

Section 8 Behavior

CODE OF CONDUCT POLICY 1400

PROCEDURES FOR CONDUCTING THE FUNCTIONAL BEHAVIORAL
ASSESSMENT

FUNCTIONAL BEHAVIORAL ASSESSMENT REVIEW FORM

FUNCTIONAL BEHAVIORAL ASSESSMENT FORM

PROCEDURES FOR DEVELOPING AND IMPLEMENTING THE BEHAVIORAL
INTERVENTION PLAN PROGRESS MONITORING

BEHAVIORAL INTERVENTION PLAN REVIEW FORM

BEHAVIORAL INTERVENTION PLAN FORM

BIP DEVELOPMENT MEETING NOTICE

BIP PROGRESS MONITORING MEETING NOTICE

PROCEDURES FOR USE OF TIME OUT ROOM

TIME OUT ROOM AND EMERGENCY INTERVENTION DOCUMENT

**ROCHESTER CITY SCHOOL DISTRICT
CODE OF CONDUCT
Policy 1400**

Approved by the Board of Education on June 16, 2016

The Board of Education is committed to a policy of inclusion of students with disabilities within the full range of programs offered to students of the District generally, to the fullest extent consistent with the specific needs of individuals. Consistent with the principle of inclusion, to the fullest extent provided by federal or state law, the policy of the District regarding student discipline for students shall be uniform for all students, both with reference to disciplinary proceedings and reporting crimes to appropriate authorities.

The Board recognizes that it may be necessary to suspend, remove or otherwise discipline students with disabilities to address disruptive or problem behavior. The Board also recognizes that students with disabilities enjoy certain procedural protections by virtue of statute, regulation and/or court order when school authorities intend to impose discipline upon them. The Board is committed to ensuring that the procedures followed for suspending, removing or otherwise disciplining students with disabilities are consistent with the procedural safeguards required by applicable laws and regulations.

This Code of Conduct affords students with disabilities subject to disciplinary action no greater or lesser rights than those expressly afforded by applicable federal and state requirements. In the event of any change or amendment to such federal and state law and regulations, or to any order of a court of competent jurisdiction impacting District students with disabilities, the Superintendent is authorized to issue regulations designed to maintain coordination of our program with such legal requirements; and, where such requirements may affect or override provisions of any consent decree, to apply to the appropriate court for such relief as the Superintendent deems appropriate.

It is the policy of the Board of Education to implement the provisions of the federal "Individuals with Disabilities Education Improvement Act of 2004" P.L. 108-446 (effective July 1, 2005), which defines the current law for addressing discipline for students with disabilities. Students with disabilities who are suspended for not more than ten school days shall be afforded the same rights as their non-disabled peers. When a removal will result in the student accumulating more than ten school days of removals for the school year, a parent and necessary District employees shall review the student's file to determine whether the conduct was caused by or had a direct and substantial relationship to the disability, or was a direct result of a failure to implement the IEP. If the behavior was a manifestation of the student's disability, the CSE shall conduct a functional behavioral assessment and create or modify and implement a behavior plan, and the student shall return to his/her prior (or otherwise agreed-upon) placement, except when the student's behavior involves serious bodily injury, weapons, illegal drugs or controlled substances, the student may be disciplined in accordance with Part 201.7(e) of the Commissioner's Regulations. If the behavior was not a manifestation of the student's disability, then a student with a disability will be treated in the same manner as the student's nondisabled peers, and the District shall continue to implement the student's IEP. In all instances, the District shall consider any unique circumstances when determining whether to change the placement of students with disabilities who violate this Code.

Ref.: P.L. 108-446 "Individuals with Disabilities Education Improvement Act of 2004"
Education Law §3214(3)(g)
8 NYCRR Part 201

RCSD Procedures for Conducting the Functional Behavioral Assessment**NYSED Part 200.1 R**

(r) Functional behavioral assessment means the process of determining why a student engages in behaviors that impede learning and how the student's behavior relates to the environment. The functional behavioral assessment shall be developed consistent with the requirements in section 200.22(a) of this Part and shall include, but is not limited to, the identification of the problem behavior, the definition of the behavior in concrete terms, the identification of the contextual factors that contribute to the behavior (including cognitive and affective factors) and the formulation of a hypothesis regarding the general conditions under which a behavior usually occurs and probable consequences that serve to maintain it.

NYSED Part 200.4 (b) (v)

(b) Individual evaluation and reevaluation. (1) Unless a referral for an evaluation submitted by a parent or a school district is withdrawn pursuant to paragraph (a)(7) or (9) of this section, after parental consent has been obtained or a parental refusal to consent is overridden, an individual evaluation of the referred student shall be initiated by a committee on special education. The initial individual evaluation shall be completed within 60 days of receipt of consent unless extended by mutual agreement of the student's parents and the CSE pursuant to subparagraph (7)(i) and paragraph (j)(1) of this subdivision. The individual evaluation shall include a variety of assessment tools and strategies, including information provided by the parent, to gather relevant functional, developmental and academic information about the student that may assist in determining whether the student is a student with a disability and the content of the student's individualized education program, including information related to enabling the student to participate and progress in the general education curriculum (or for a preschool child, to participate in appropriate activities). The individual evaluation must be at no cost to the parent, and the initial evaluation must include at least:

(v) other appropriate assessments or evaluations, including a functional behavioral assessment for a student whose behavior impedes his or her learning or that of others, as necessary to ascertain the physical, mental, behavioral and emotional factors which contribute to the suspected disabilities.

NYSED Part 201.3 (a)

If the manifestation team pursuant to section 201.4 of this Part, makes the determination that the conduct subject to the disciplinary action was a manifestation of the student's disability, the CSE must either:

(a) conduct a functional behavioral assessment, unless the school district had conducted a functional behavioral assessment before the behavior that resulted in the change of placement occurred, and implement a behavioral intervention plan for the student;

RCSD Procedures for Conducting the Functional Behavioral Assessment

1. A student's need for a Functional Behavioral Assessment (FBA) must be considered whenever:
 1. within the Initial Referral process, where the student's behavior impedes his or her learning or that of others
 2. a student with a disability is exhibiting persistent behaviors that impede his or her learning or that of others, despite consistently implemented general school-wide or classroom-wide interventions or the student's behavior places the student or others at risk of harm or injury;
 3. the Committee on Special Education (CSE) or Committee on Preschool Special Education (CPSE) is considering more restrictive programs or placements as a result of the student's behavior; and/or
 4. the student is subject to disciplinary actions and a determination has been made that the behavior is related to the student's disability.
2. Prior Written Notice is generated per the requirements of Part 200.5 (b).
3. Upon consent, the team must conduct the FBA and convene the CSE to review the results of the FBA and determine the need for a Behavioral Intervention Plan within 60 calendar days.
4. The FBA must include and identify:
 - an identified and concretely defined problem-the behavior is measurable and observable
 - contextual factors that contribute to the behavior
 - as appropriate, multiple sources of data including but not limited to:
 - direct observation of the student
 - information from the student
 - information from the student's teacher and/or related services providers
 - review of available data
 - information from student's record and other sources
 - any relevant information provided by the student's parents
 - Baseline date of the problem behavior must include:
 - the frequency of the problem behavior
 - duration of the problem behavior
 - intensity and latency of the problem behavior
 - assessment for reinforcement
 - Baseline data is provided based on evidence collected across multiple settings and activities, by multiple people, and at throughout the school day in order to provide sufficient details to form the basis for the BIP.
 - A hypothesis regarding the general conditions under which a behavior usually occurs and probable consequences that serve to maintain it.
5. Teams will utilize the Form 1: Functional Behavioral Assessment (FBA) Review Checklist to ensure consistency and compliance.

Form #1

Functional Behavioral Assessment (FBA) Review

Student Name: _____

School/Site Name: _____

Date Completed: _____

Citation		In Compliance with Regulatory Requirement
8 NYCRR 200.1(r) FBA means the process of determining why a student engages in behaviors that impede learning and how the student's behavior relates to the environment.	The FBA includes the identification of the problem behavior(s).	Yes <input type="checkbox"/> No <input type="checkbox"/>
	The FBA includes a definition of the behavior(s) in concrete terms.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	The FBA includes identification of the contextual factors that contribute to the behavior(s) (including cognitive and affective factors).	Yes <input type="checkbox"/> No <input type="checkbox"/>
	The FBA includes formulation of a hypothesis regarding the general conditions under which a behavior usually occurs and probable consequences that serve to maintain it.	Yes <input type="checkbox"/> No <input type="checkbox"/>
8 NYCRR 200.22(a)	The FBA is based on multiple sources of data. Check all that apply: <input type="checkbox"/> information from direct observation of the student <input type="checkbox"/> information from the student <input type="checkbox"/> information from the student's teacher(s) <input type="checkbox"/> information from the student's parent <input type="checkbox"/> information from others (specify) _____ <input type="checkbox"/> review of available data <input type="checkbox"/> review of student's record <input type="checkbox"/> other sources of information (specify) _____ _____	Yes <input type="checkbox"/> No <input type="checkbox"/>
	The FBA provides a baseline of the student's problem behavior(s) including frequency, duration, intensity and/or latency across activities, settings, people and times of the day.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	The FBA includes enough information in sufficient detail to form the basis for a behavioral intervention plan for the student that addresses antecedent behaviors, reinforcing consequences of the behavior, recommendations for teaching alternative skills or behaviors and an assessment of student preferences for reinforcement.	Yes <input type="checkbox"/> No <input type="checkbox"/>



Functional Behavioral Assessment

<u>Student Name/ID Number:</u>	<u>DOB:</u>	<u>School Year:</u>
<u>Parent/Guardian:</u>	<u>School/Grade/Primary Teacher:</u>	<u>Date FBA Completed:</u>

Identify school staff who participated in the FBA process:

Name	Title/Position

Relevant student diagnostic data or background information (ex: classification, placement, services, mental health or medical diagnoses, outside agency services, etc) 200.1(r), 200.22(a)(2):

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Student strengths/skills including information from student and/or parent input (What are the student's interests or preferences? What does the student find reinforcing or motivating? What is not reinforcing or motivating for this student?) 200.1(r), 200.22(a)(2):

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Functional Behavioral Assessment

Relevant contextual information/global influences including cognitive, social, affective factors that relate to the problem behavior 200.1(r), 200.22(a)(2):

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Identify and Define the Targeted Problem Behavior(s): NYS Regulation [200.1(r)]

Identify the problem behavior(s) to be targeted and define that behavior in *observable, measurable, and concrete terms*.

Problem Behavior 1:

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Problem Behavior 2 (if applicable):

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Functional Behavioral Assessment

Indirect and Direct data sources used to identify baseline data (If two specific problem behaviors are defined then data collection must be completed for each behavior):
NYS Regulation [200.22(a)(2)]

➤ Indirect Data (Check all that apply):

NOTE: The data sources marked with * must be completed and uploaded, AS WELL AS, attached to the FBA document filed in the CUM

Indirect Data Sources

Date Completed

- | | |
|---|-------|
| <input type="checkbox"/> Student Interviews* (Information from the Student) including assessment of student preferences | _____ |
| <input type="checkbox"/> Parent Interviews* (including relevant history and current status) | _____ |
| <input type="checkbox"/> Staff Interviews* (including teachers, paraprofessionals, related services providers, and possibly other relevant staff) | _____ |
| <input type="checkbox"/> Student records review | _____ |
| <input type="checkbox"/> Surveys or questionnaires specific to the behavior(s) | _____ |
| <input type="checkbox"/> Summary of the results of relevant evaluations | _____ |
| <input type="checkbox"/> Relevant medical information | _____ |
| <input type="checkbox"/> Testing data | _____ |
| <input type="checkbox"/> Attendance data | _____ |
| <input type="checkbox"/> Office discipline referrals | _____ |
| <input type="checkbox"/> Suspensions (ISS & OSS) | _____ |

➤ Direct Data (Check all that apply **AND** attach to the FBA document filed in the CUM): (Gathered from direct observations across multiple settings)

Direct Data Sources

Date Completed

- ☐ Direct Observations:

Indicate date and type: _____

- | | |
|---|-------|
| <input type="checkbox"/> ABC Charts (to include activities, locations, settings, people, and times of day data) | _____ |
| <input type="checkbox"/> Frequency Charts | _____ |
| <input type="checkbox"/> Duration Charts | _____ |
| <input type="checkbox"/> Intensity Scales | _____ |
| <input type="checkbox"/> Latency Documentation | _____ |
| <input type="checkbox"/> Other-Specify | _____ |



Functional Behavioral Assessment

Baseline Data: NYS Regulation [200.22(a)(3)]

Using the contextual information above, provide baseline data with regard to frequency, duration, intensity and/or latency of the targeted problem behavior(s) across activities, settings, people, and times of day.

Problem Behavior 1:

Frequency (how often)	Duration (length of behavioral/episode)	Intensity (mild/mod/severe) Define in observable, measurable and concrete terms	Latency (time from trigger to onset behavior)
<u>Problem Behavior 2:</u>			



Functional Behavioral Assessment

<u>Problem Behavior 1:</u>	
<u>Environmental Considerations (daily routines, environmental settings, etc)</u>	<u>Setting Events (events that increase the likelihood the behavior will occur)</u>
<u>Problem Behavior 2:</u>	

Description of Antecedent(s): NYS Regulation [200.1(r) and 200.22(a)(3)]
What occurs prior to and triggers the problem behavior(s)?

<u>Problem Behavior 1:</u>	
<u>Situations/activities/people that seem to trigger the problem behavior(s)</u>	<u>Times of the school day when the behavior(s) most often occur</u>



Functional Behavioral Assessment

<u>Problem Behavior 2:</u>	

Description of Consequence(s): NYS Regulation [200.1(r) and 200.22(a)(3)]

Describe the consequence-What occurs immediately after the problem behavior that promotes the behavior to continue? Include adult/peer responses.

<u>Problem Behavior 1:</u>	
<u>Response:</u>	
<u>Problem Behavior 2:</u>	
<u>Response:</u>	



Functional Behavioral Assessment

Function of the Behavior(s): NYS Regulation [200.22(a)(3)]

Identify the function that maintains the behavior(s) and increases the likelihood it will occur again.

Problem Behavior 1:

Student Gets/Obtains	Student Escapes/Avoids
<input type="checkbox"/> Teacher/Adult Attention <input type="checkbox"/> Peer Attention <input type="checkbox"/> Sensory/Stimulation <input type="checkbox"/> Tangible/Preferred Activity	<input type="checkbox"/> Teacher/Adult Attention <input type="checkbox"/> Peer Attention <input type="checkbox"/> Sensory/Stimulation <input type="checkbox"/> Tangible/Non-preferred Activity/Task
Problem Behavior 2:	
<input type="checkbox"/> Teacher/Adult Attention <input type="checkbox"/> Peer Attention <input type="checkbox"/> Sensory/Stimulation <input type="checkbox"/> Tangible/Preferred Activity	<input type="checkbox"/> Teacher/Adult Attention <input type="checkbox"/> Peer Attention <input type="checkbox"/> Sensory/Stimulation <input type="checkbox"/> Tangible/Non-preferred Activity/Task



Functional Behavioral Assessment

Diagram of the Functional Hypothesis: NYS Regulation [200.1(r)]

Setting Events (Events that increase the likelihood of the behavior)	Antecedent (What occurs before)	Target Problem Behavior (observable & measurable)	Maintaining Consequence (what happens after) Function (what does the student get/avoid)
		<u>Problem Behavior 1:</u>	Consequences:
			Function:
		<u>Problem Behavior 2:</u>	Consequences:
			Function:



Functional Behavioral Assessment

Statement of the Functional Hypothesis:

Using the diagram above, develop a statement of the functional hypothesis for each problem behavior that includes setting events, antecedents, problem behavior, consequences, and relevant contextual factors.

Functional Hypothesis: 200.1(c). 200.1(mmm) (a summary statement describing the general conditions—globally and specifically—under which a behavior usually occurs and probable consequences that serve to maintain it.) e.g. *When student is experiencing (setting events), the student is more likely to engage in (problem behavior(s)). The behavior(s) is/are triggered by (antecedent). The behavior(s) is/are maintained by (probable consequence). The perceived function is (obtains/escapes) _____.* The behavior(s) is/are impacted by (global/contextual factors).

Problem Behavior 1 Hypothesis Statement:

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Problem Behavior 2 (if applicable):

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Behavioral Supports & Interventions Previously Tried:

Describe any interventions previously implemented for the student and the effectiveness of the interventions

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Functional Behavioral Assessment

Tier 1 and Tier 2 Behavioral Supports & Interventions Currently in Place:

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TO BE COMPLETED AT CSE **Rationale for Specific Support and/or Intervention**

Specify if a BIP is recommended: ☐ YES ☐ NO

If YES, recommended that the team discuss and identify alternative replacement behaviors or alternative skills that will serve the same function as the problem behavior.

Problem Behavior 1:

Recommended Replacement Behaviors:

Problem Behavior 2 (if applicable):

Recommended Replacement Behaviors:



Functional Behavioral Assessment

If NO, outline adjustments to Tier 1 and Tier 2 supports such as:	
Tier 1 (ex: visual supports, verbal reminders, classroom arrangement)	Tier 2 (check in/check out, social/academic skills groups, boys/girls group)

RCS D Procedures for Developing and Implementing the Behavior Intervention Plan

NYSED Part 200.22

(4) The behavioral intervention plan shall identify:

(i) the baseline measure of the problem behavior, including the frequency, duration, intensity and/or latency of the targeted behaviors. Such baseline shall, to the extent practicable, include data taken across activities, settings, people and times of the day. The baseline data shall be used as a standard to establish performance criteria and against which to evaluate intervention effectiveness;

(ii) the intervention strategies to be used to alter antecedent events to prevent the occurrence of the behavior, teach individual alternative and adaptive behaviors to the student, and provide consequences for the targeted inappropriate behavior(s) and alternative acceptable behavior(s); and

(iii) a schedule to measure the effectiveness of the interventions, including the frequency, duration and intensity of the targeted behaviors at scheduled intervals.

(5) Progress monitoring. The implementation of a student's behavioral intervention plan shall include regular progress monitoring of the frequency, duration and intensity of the behavioral interventions at scheduled intervals, as specified in the behavioral intervention plan and on the student's IEP. The results of the progress monitoring shall be documented and reported to the student's parents and to the CSE or CPSE and shall be considered in any determination to revise a student's behavioral intervention plan or IEP.

RCSD Procedures for Developing, Implementing and Progress Monitoring the Behavior Intervention Plan

1. Once the Functional Behavioral Assessment (FBA) is reviewed at the Committee on Special Education (CSE) meeting, the CSE determines whether a Behavioral Intervention Plan (BIP) is needed. A draft of the BIP may be developed at that time.
2. The student's Individualized Educational Program (IEP) that is a result of the CSE meeting will clearly describe the problem behavior, need for strategies, supports and BIP and whether the student required a particular device or service.
3. Outside of the CSE meeting, relevant members of the CSE will meet to develop a BIP that is compliant with all components as described in NYSED Part 200.22.
 - a. Relevant team members may be members of the CSE, but are not limited to those members.
4. Teams will utilize the Form 2: Behavioral Intervention Plan (BIP) Review Checklist to determine compliance with regulatory components.
5. The BIP will be progress monitored per the schedule documented in the BIP with all relevant members invited to the review meeting, including the parent.
6. Progress will be reported to parents immediately following each BIP review meeting.
7. The CSE must be convened to consider the dismissal of a BIP if the progress monitoring data indicates that a BIP is no longer warranted.

Form #2**Behavioral Intervention Plan (BIP) Review****Student Name:** _____**School/Site Name:** _____**Date Completed:** _____

Citation	Requirements	In Compliance with Regulatory Requirement
8 NYCRR 200.1(mmm)	The BIP is based on the results of a functional behavioral assessment.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	The BIP includes a description of the problem behavior.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	The BIP includes global and specific hypotheses as to why the problem behavior occurs.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	The BIP includes intervention strategies that include positive behavioral supports and services to address the behavior.	Yes <input type="checkbox"/> No <input type="checkbox"/>
8 NYCRR 200.22(b)(4),(5)	The BIP identifies the baseline measure of the problem behavior, including the frequency, duration, intensity and/or latency of the targeted behaviors.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	The baseline measure includes data taken across activities, settings, people and times of the day.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Baseline data is used as a standard to establish performance criteria and against which to evaluate intervention effectiveness.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	The BIP identifies intervention strategies to be used to alter antecedent events to prevent the occurrence of the behavior, teach individual alternative and adaptive behaviors to the student and provide consequences for the targeted inappropriate behavior(s) and alternate acceptable behavior(s).	Yes <input type="checkbox"/> No <input type="checkbox"/>
	The BIP identifies a schedule to measure the effectiveness of the interventions, including the frequency, duration and intensity of the targeted behaviors at scheduled intervals.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	The implementation of a BIP includes regular progress monitoring of the frequency, duration and intensity of the behavioral interventions at scheduled intervals as specified in the BIP and on the student's IEP.	Yes <input type="checkbox"/> No <input type="checkbox"/>



Behavioral Intervention Plan

<u>Student Name/ID Number:</u>	<u>DOB:</u>	<u>School Year:</u>
<u>Parent/Guardian:</u>	<u>School/Grade/Case Manager:</u>	<u>Date BIP Completed:</u>

Team Members	Check box if in attendance at original meeting	Team Members	Check box if in attendance at original meeting
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>

Identify and Define the Targeted Problem Behavior(s): NYS Regulation [200.22(b)(4)] From FBA

<u>Problem Behavior 1:</u>
<u>Problem Behavior 2 (if applicable):</u>



Behavioral Intervention Plan

Baseline Data: NYS Regulation [200.22(b)(4)(i)] From FBA

Problem Behavior 1:

Frequency (how often)	Duration (length of behavior/episode)	Intensity (mild/mod/severe) Define in observable, measurable, and concrete terms	Latency (time from trigger to onset behavior)
<u>Problem Behavior 2:</u>			



Behavioral Intervention Plan

Diagram of the Functional Hypothesis: NYS Regulation [200.1(r)] From FBA

Setting Events (Events that increase the likelihood of the behavior)	Antecedent (What occurs before)	Target Problem Behavior (observable & measurable)	Maintaining Consequence (what happens after) Function (what does the student get/avoid)
		<u>Problem Behavior 1:</u>	Consequences:
			Function:
		<u>Problem Behavior 2:</u>	Consequences:
			Function:



Behavioral Intervention Plan

Statement of the Functional Hypothesis: From FBA

Problem Behavior:


Problem Behavior 2 (if applicable):

Identification of Student Preferences for Reinforcement: NYS Regulation [200.22(a)(3)] From FBA

Recommended Replacement Behavior(s): NYS Regulation [200.22(a)(3)]

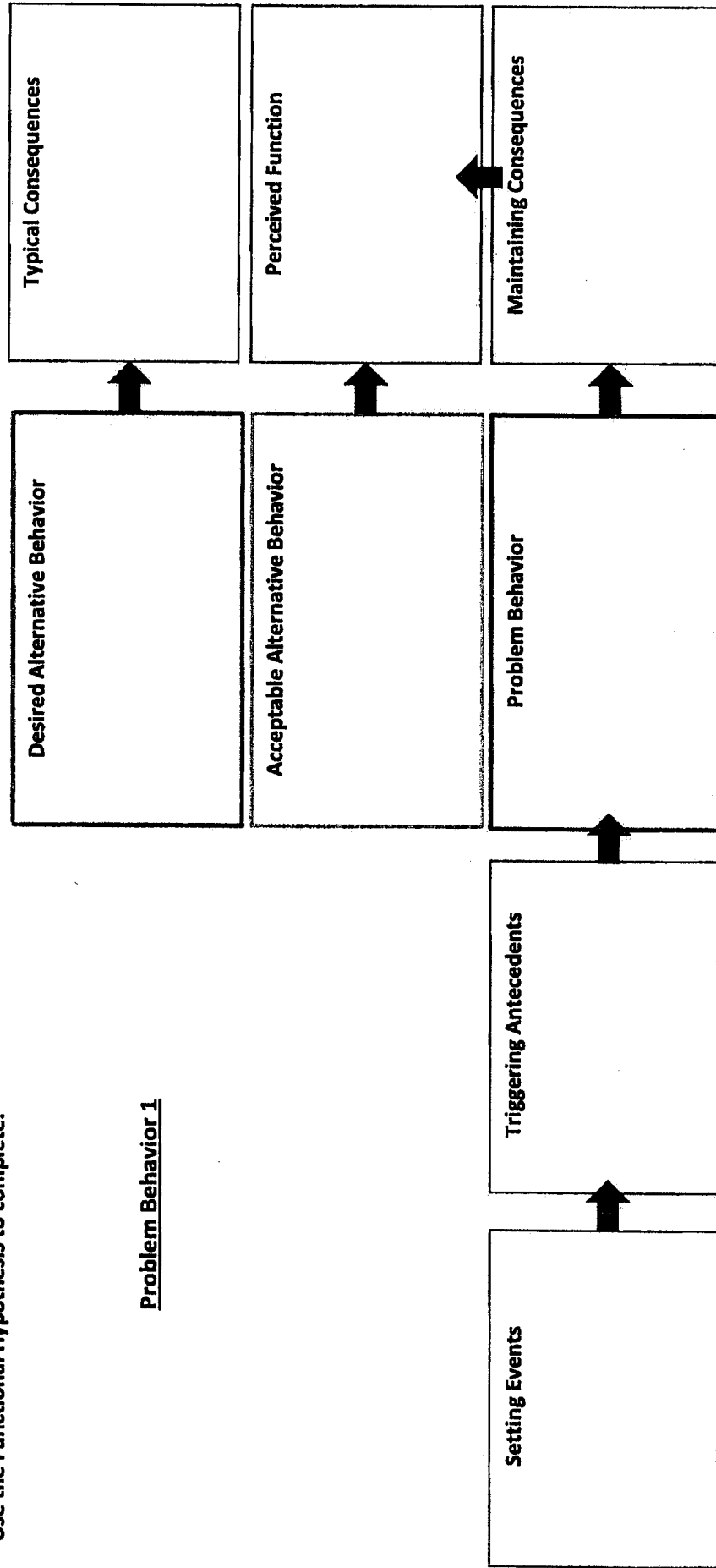
Problem Behavior 1:

Recommended Replacement Behaviors:

<div style="text-align: center;">  Behavioral Intervention Plan </div>	
<u>Problem Behavior 2 (if applicable):</u>	
<u>Recommended Replacement Behaviors:</u>	

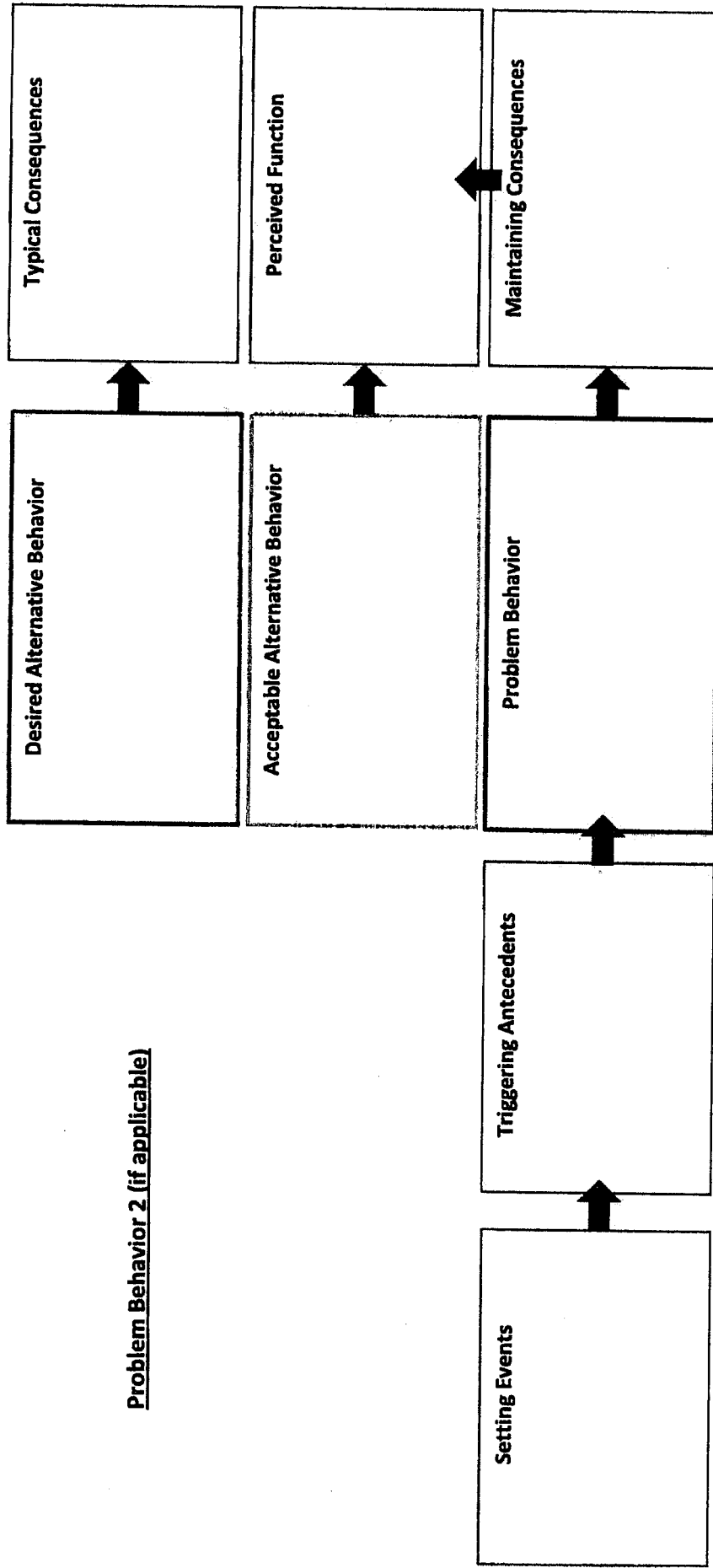
Competing Behavior Pathway:
Use the Functional Hypothesis to complete:

Problem Behavior 1





Behavioral Intervention Plan



Intervention Strategies: NYS Regulation [200.22(b)(4)(ii), 200.1(mmm)]

(What, where, when, how) must be developed BASED ON THE FUNCTIONAL HYPOTHESIS from the FBA. Include strategies to alter the setting events and antecedents to prevent the targeted problem behavior(s) as well as strategies to alter the consequences that currently maintain the targeted problem behavior(s). Include strategies that will 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.

Behavioral Intervention Plan

Setting Event Strategies 200.22(4)(i) How will you neutralize or prevent setting events?	Antecedent Strategies 200.22(4)(ii) How will you change the environment to reduce triggers for problem behavior(s) and increase success of new behaviors?	Behavior Teaching Strategies 200.22(4)(j) How will you explicitly teach replacement behaviors? What/By Whom?	Consequence/Response Strategies 200.22(4)(k) Response after new behavior(s) occur (increase the likelihood of replacement behavior to occur again)		Response after problem behavior occurs
Problem Behavior 1					
		Replacement Behavior(s):			
		How will new behaviors be taught?			
		By Whom?			



Behavioral Intervention Plan

Problem Behavior 2 (if applicable)

Replacement Behavior(s):		
How will new behaviors be taught?		
By Whom?		

Progress Monitoring: NYS Regulation [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 CSE/CPSE and must be considered in any determination to revise a student's Behavioral Intervention Plan or IEP.

Progress Monitoring Review Schedule (ex: every 4 weeks):

Staff Responsibilities for the plan:

Name	Responsibility



Behavioral Intervention Plan

How effectiveness of Interventions will be measured:			
Tool/Procedure	Person(s) Responsible	Timeline	

Problem Behavior 1			
Baseline Data	Baseline Frequency:	Baseline Duration:	Baseline Intensity:
Date of FBA:			Baseline Latency: (If applicable)
Progress Review:	Current Frequency	Current Duration	Current Latency (If applicable)
Date Reviewed:			
Team Attendance:			
Date sent to CSE & Parent:			



Behavioral Intervention Plan

Note changes (antecedent strategies, teaching strategies, consequence/response strategies):

Date Reviewed:

Team Attendance:

Date sent to CSE & Parent:

Note changes (antecedent strategies, teaching strategies, consequence/response strategies):

Date Reviewed:

Team Attendance:

Date sent to CSE & Parent:

Note changes (antecedent strategies, teaching strategies, consequence/response strategies):

Date Reviewed:



Behavioral Intervention Plan


Team Attendance:				
Date sent to CSE & Parent:				
Note changes (antecedent strategies, teaching strategies, consequence/response strategies):				

Problem Behavior 2				
Baseline Data	Baseline Frequency:	Baseline Duration:	Baseline Intensity:	Baseline Latency: (If applicable)
Date of FBA:				
Progress Review:	Current Frequency	Current Duration	Current Intensity	Current Latency (If applicable)
Date Reviewed:				
Team Attendance:				
Date sent to CSE & Parent:				
Note changes (antecedent strategies, teaching strategies, consequence/response strategies):				



Behavioral Intervention Plan

Date Reviewed:				
Team Attendance:				
Date sent to CSE & Parent:				
Note changes (antecedent strategies, teaching strategies, consequence/response strategies):				
Date Reviewed:				
Team Attendance:				
Date sent to CSE & Parent:				
Note changes (antecedent strategies, teaching strategies, consequence/response strategies):				
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Team Attendance:				



Behavioral Intervention Plan

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Every child is a work of art.
Create a masterpiece.

BIP Development Meeting Notice

Parent/Guardian of:

DOB:

ID:

Dear Parent/Guardian:

You are invited to participate in a meeting to develop the Behavioral Intervention Plan (BIP) for your child. At this meeting, we will further review the results of your child's current functional behavioral assessment and other information provided by you and the staff working with your child. The goal is to ensure your child has a BIP in place that fully meets his/her behavioral needs. The meeting has been scheduled for the following date, time, and location:

Date:

Time:

Location:

The following persons will be invited to this meeting:

- School Psychologist
- Special Education Teacher
- General Education Teacher
- Social Worker
- Parent/Guardian
- Student

If you are unable to make this meeting, please contact me at _____.
We look forward to meeting with you and feel free to contact me if you have any questions. Thank you.

Sincerely,

Name

Title



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BIP Progress Monitoring Meeting Notice

Parent/Guardian of:

DOB:

ID:

Dear Parent/Guardian:

You are invited to participate in a meeting to review the progress of your child's Behavioral Intervention Plan (BIP) for your child. At this meeting, we will review the progress monitoring results of your child's current BIP and other information provided by you and the staff working with your child. The meeting has been scheduled for the following date, time, and location:

Date:

Time:

Location:

The following persons will be invited to this meeting:

- School Psychologist
- Special Education Teacher
- General Education Teacher
- Social Worker
- Parent/Guardian
- Student

If you are unable to make this meeting, please contact me at _____.

We look forward to meeting with you and feel free to contact me if you have any questions. Thank you.

Sincerely,

Name

Title

Procedures for Use of a Time-Out Room

Except for unanticipated situations that pose an immediate concern for the physical safety of a student or others, the use of a time out room can only be used in conjunction with a behavioral intervention plan that is designed to teach and reinforce alternative appropriate behaviors.

The following procedures must be implemented when a time-out room is being utilized in a Rochester City School:

1. A student's individualized education program (IEP) and behavioral intervention plan (BIP) will be reviewed to determine if there is indication of the use of the time-out room, including the maximum amount of time a student will need to be in the time out room as a behavioral consequence.
 - a. If there is no documentation on the student's IEP and BIP, the school will not utilize a time out room unless it is an unanticipated emergency situation.
2. The Principal or designee will inform the student's parents prior to the initiation of a BIP which indicates the use of the time out room as a behavioral consequence. The parents will be provided an opportunity to inspect the physical space of the time out room.
3. Given these requirements have been met, staff will escort the student to the time out room.
4. The time out room will remain unlocked with the door able to be opened from the inside.
5. Staff will be assigned to continuously monitor the student while in the time out room. Staff must be able to see and hear the student at all times.
6. Staff will ask the student at periodic intervals, not to exceed the maximum time as indicated on the student's IEP and BIP, if he/she is ready to reengage with the class. (The periodic intervals shall be discussed with the team and documented in the BIP as part of the BIP progress monitoring.)
7. Each occurrence of the use of the time out room will be documented on the established RCSD form. This includes any emergency use of the time out room due to unanticipated situations posing an immediate concern for the physical safety of the student or others.
8. Principal will be informed of the use of the time out room.
9. Nursing staff will be notified if injury to student, staff, or others has occurred.
10. Parents shall be notified.
11. Documentation of the use of the time out room shall be kept in a binder at each building and used in progress monitoring a student's BIP and determining building management and behavioral concerns.



6/28/2017

Time out Room and Emergency Intervention Document

Date of Incident: _____

Name of Student: _____ DOB: _____

Setting and Location of Incident:

Name of Staff or Other Person(s) Involved:

Description of the Incident and Emergency Intervention Used:

Duration of Incident: _____

Duration Student was in Time Out Room: _____

Does Student Currently Have a Behavioral Intervention Plan (BIP)? _____

Were any Injuries Sustained by the Student or Others? _____ If so, Explain: _____

Parent has been contacted:

Yes _____ Date _____

Administration has been notified:

Yes _____ Date _____

School Nurse has been notified if injuries noted:

Yes _____ Date _____

Staff Completing Form: _____

Signature