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| **DESERT/MOUNTAIN SPECIAL EDUCATION LOCAL PLAN AREA**  **DESERT/MOUNTAIN CHARTER SPECIAL EDUCATION LOCAL PLAN AREA**  17800 HIGHWAY 18 • APPLE VALLEY, CA 92307  (760) 552-6700 • (760) 242-5363 FAX  **Functional Behavioral Assessment (FBA) Summary** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **student information** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Student Name: | | | | | |  | | | | | | | | | | | Date of Birth: | | | | | | | |  | | Grade: | | | | | |  | | | | | | Gender: | Male  Female |
| School Site: | | | | |  | | | | | | | | | | | | | | | | | | | District of Residence: | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **reason for referral** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Positive behavioral intervention support only - no manifestation meeting conducted - student has less than 10 days or no removals/suspension(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Positive behavioral intervention support only - removals/suspensions are not a manifestation of the disability | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Removals/suspensions are a manifestation of the disability (after 10 *consecutive* days of suspension) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Removals/suspensions are a manifestation of the disability and constitute a pattern (after 10 *cumulative* days of suspension) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **fba summary** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Today’s date:** | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date signed assessment plan received by district/county: | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Date(s) functional behavioral assessment (FBA) was conducted: | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Name of individual conducting the FBA: | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1.** | | **Records reviewed:** | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Assistive Technology Report(s) | | | | | | | | | | | | | | | | Medical Report(s) | | | | | | | | | | | | | | Speech and Language Report(s) | | | | | | | | |
|  | | Behavioral Intervention Plans (BIPs) | | | | | | | | | | | | | | | | Nonpublic Agency Report(s) | | | | | | | | | | | | | | Teacher’s Notes | | | | | | | | |
|  | | Diagnostic Center Report(s) | | | | | | | | | | | | | | | | Occupational Therapy Report(s) | | | | | | | | | | | | | | Other: | | | | | |  | | |
|  | | Discipline Report(s) | | | | | | | | | | | | | | | | Physical Therapy Report(s) | | | | | | | | | | | | | | Other: | | | | | |  | | |
|  | | Health Report(s) | | | | | | | | | | | | | | | | Psych Report(s) | | | | | | | | | | | | | | Other: | | | | | |  | | |
|  | | IEP(s) | | | | | | | | | | | | | | | | Report Card(s) | | | | | | | | | | | | | | Other: | | | | | |  | | |
| **2.** | | **Interviews conducted with:** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Teacher(s) | | | | | | | | | | | | | | | | Parent(s) | | | | | | | | | | | | | | Paraprofessional(s) | | | | | | | | |
|  | | Physician(s) | | | | | | | | | | | | | | | | Administrator(s) | | | | | | | | | | | | | | School Psychologist(s) | | | | | | | | |
|  | | Related Services Personnel | | | | | | | | | | | | | | | | Office/Campus Personnel | | | | | | | | | | | | | | Bus Driver(s) | | | | | | | | |
|  | | School Counselor(s) | | | | | | | | | | | | | | | | Mental Health Counselor(s) | | | | | | | | | | | | | | Other: | | | | | |  | | |
|  | | Other: | | | |  | | | | | | | | | | | | Other: | | | | |  | | | | | | | | | Other: | | | | | |  | | |
| **3.** | | **Challenging behaviors:** *(Clearly define and include frequency, duration, and intensity of behaviors.)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
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| **4.** | | **Data collection methods:** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **5.** | | **Environmental/ecological problems affecting behavior in the classroom, on campus, and on the bus:** *(What needs to be changed?)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **6.** | | **Identified antecedents:** *(What happens right before the behavior occurs?)* | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **7.** | | **Identified consequences:** *(What happens right after the behavior occurs?)* | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **8.** | | **Hypothesized function:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Getting  ***OR***  Avoiding/Escaping: | | | | | | | | | | | | | *Attention* | | | | | | | | | *Sensory* | | | | | | *Tangible* | | | | | | |  | | | |
|  | |  | | | | | | | | | | | | | *Other:* | | | | |  | | | | | | | | | | *Other:* | | | | | |  | | | | |
| **9.** | | **Identified reinforcers:** | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **10.** | | **Level of additional intervention needed as support:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Check In/Check Out | | | | | | | | | Contracts | | | | | | | | | | Reinforcement Systems | | | | | | | | Prevent/Teach/Reinforce (PTR) | | | | | | | | | | | |
|  | | Behavioral Goal(s) | | | | | | | | | Other: | | | | |  | | | | | | | | | | | | | Other: | | | | | |  | | | | | |
|  | | Behavioral Intervention Plan (BIP) | | | | | | | | | | | | *Projected team meeting date to create BIP:* | | | | | | | | | | | | | |  | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *FBA-Disciplinary Context, Summary Report, Diana Browning Wright, with input from Teri Ede, PENT CADRE member, 2006. Adapted with permission.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |