

# Behavior Support Plan Template

## 1 Identification

Person's Name:  
Date of Birth:  
Day Placement:  
Date of Plan:  
Date of Plan Expiration

Person's Age:  
Residential Placement:  
Date of Revision:  
Name of BSP developer:

## 2 Purpose

Describe the reason(s) or clinical rationale for the necessity of the behavior support plan.

## 3 Relevant History

Describe background information that is relevant to the current behavior(s) of interest. Describe prior nonrestrictive intervention strategies used to address target behaviors, and their results. Describe prior restrictive interventions used and describe their effectiveness. A review of developmental history is not necessary.

## 4 Diagnostic Information

List current diagnoses.

Mental Health Diagnosis	
Intellectual/Developmental Diagnosis	
Medical Diagnosis	

## 5 Medication Treatment

List currently prescribed psychotropic and nonpsychotropic medications.

### A Psychotropic Medications

Medication	Dosage	Symptom targeted by medication	Mental Health Diagnosis

### B Non-Psychotropic Medications:

Medication	Dosage	Symptom targeted by medication

## 6 Target Behaviors

Provide an operational definition for each target behavior, describing observable elements that can be measured. Using either table or graph, show 1 year data for the residence and 1 year data for the day program setting. Target behaviors should be limited to behaviors that pose a danger to the health or safety of the person or to those around them.



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## 7 Functional Assessment

List the sources of information for the functional assessment. Describe the setting events (if any), antecedents, and maintaining consequences for each target behavior. Provide a person-centered statement describing the primary function of each target behavior based on the results of the functional assessment.

### List sources of information utilized in functional assessment:

#### Target Behavior#1:

Setting events:

Antecedents:

Maintaining Consequences:

Primary Function:

#### Target Behavior#2:

Setting events:

Antecedents:

Maintaining Consequences:

Primary Function:

#### Target Behavior#3:

Setting events:

Antecedents:

Maintaining Consequences:

Primary Function:

## 8 Behavioral Goals

Specify measurable goals for decreasing the target behavior that can be accomplished within one ISP year.

## 9 Proactive Strategies

List the positive proactive strategies that staff will use to prevent the target behavior from occurring.

**Environmental modifications:** Identify those conditions that set the occasion for each target behavior and recommend changes in the environment that will make these conditions less likely to occur. For example, provide strategies to make *setting events* less likely to occur and specify changes that can be made in the *immediate antecedents* to prevent the target behaviors (*i.e.* antecedent manipulations).

*Physical Environment:* List changes that need to be made in the person's physical environment (*i.e.* strategies to limit noise, crowding, access to sharp objects, etc) to make the target behavior less likely to occur.

*Service Environment:* List changes that need to be made in the daily programming used to support the person's choices and teach practical skills (*i.e.* strategies to address the absence of a predictable daily schedule, boredom, lack of choices; dependence on staff).

*Interpersonal Environment:* List changes that need to be made in *interpersonal interactions* (*i.e.* access to peers and family, quality of interactions with staff).

### List Recommendations for Environmental Modifications:

- 1.
- 2.
- 3.

**Positive Programming/Teaching Replacement Skills:** For each target behavior, specify the new skills that will be taught to provide a more adaptive response than resorting to the target behaviors. For example, if the target behavior is designed to communicate, then recommendations should include teaching functional communication skills to replace the target behavior (*e.g.* teaching the person to use a break card or gesture when he needs a break at work). Describe strategies for teaching the new skills (*e.g.* direct instruction, shaping, prompting, chaining, role play, modeling/imitation). Specify the reinforcers that will be provided to increase the frequency of replacement skills (*e.g.* edible reinforcers, sensory reinforcers, social reinforcers, tangible reinforcers, activity reinforcers) and how often they should be provided.

### List Strategies for Teaching and Promoting Replacement Skills:

- 1.
- 2.



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**Focused Support/Reinforcing Alternative Behaviors:** For each target behavior, specify the differential reinforcement strategies for promoting an alternative behavior, or competing behavior, that the person already knows how to perform and can engage in instead of resorting to the target behaviors (e.g. DRA, DRO, DRL). Specify the reinforcers that will be used (e.g. edible reinforcers, sensory reinforcers, social reinforcers, tangible reinforcers, activity reinforcers) and how often they will be provided.

List Strategies for Recommendations for Alternative Behaviors:

- 1
- 2
- 3

## 10 Goals for Behaviors Targeted for Increase

List the specific behavioral goals for increasing replacement skills, functional communication skills, and alternative behaviors. Include measurement criteria and projected target date by which each goal will be met (e.g. By December 31<sup>st</sup>, John will appropriately ask for a break by saying "I need a break" or similar phrase for 6 out of 10 opportunities each week as measured by behavioral observations). Using either table or graph, show 1 year data for the residence and 1 year data for the day program.

## 11 Staff Responses and Crisis Intervention

Describe how staff will respond to target behaviors when they occur. Describe specific procedures for supporting the individual during crisis events.

## 12 Staffing Supports

Describe the staffing ratio needed to implement the BSP as written. If a one-to-one level or higher is recommended, describe its necessity and the specific role of staff.

## 13 Restrictive Components &/ Or Psychotropic Medication

Describe the use of any restrictive procedures in the behavior support plan. Provide a clear and concise clinical justification that supports the need for each restrictive intervention. The justification must be based on behaviors that are *currently* exhibited, not historical information.

Clinical Justification for Restrictive Components &/ Or Psychotropic Medication	
Psychotropic Medication:	
Increased Staffing:	
Physical Modifications to the Environment:	
Physical Restraints:	
Other restriction:	

## 14 Restrictive Components & Psychotropic Medication Fade Plan

Describe the specific behavioral goals that must be met in order for each restrictive component to be reduced or removed.

## 15 Data Collection and Monitoring

Describe methods for collecting data to track impact of behavior support plan for each target behavior (e.g. event recording with ABC logs, interval recording, duration recording). Describe how data collection will be monitored. Describe how data will be used to assess the effectiveness of the behavior support plan. The results of these analyses must be shared with the individual's interdisciplinary team in quarterly reports.

## 16 Staff Training

Describe how staff who work with the person will be trained to competency by the BSP developer, QIDP, or program specialist to implement the BSP as it is written.



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## 17 Signatures

Provide name, signature and credentials of the BSP developer and supervising professional, if applicable. Also include the date signed.

## 18 Informed Consent

Provide name and signature of the person giving informed consent, and the date signed.

The following items have been explained to me and I consent to this Behavior Support Plan:

- The purpose, intended outcome, and procedures involved in the BSP.
- The risks and benefits of the behavior support procedures.
- The risks of not having behavior support.
- That consent may be withheld or withdrawn at any time with no punitive action taken against the person.

\_\_\_\_\_  
Signature Person Giving Informed Consent

\_\_\_\_\_  
Printed Name & Relationship to the Person

\_\_\_\_\_  
Date of Consent

## 19 Addendum: Changes Since Last Restrictive Controls Review

List updates and revisions made to BSP since last restrictive control approval date but prior to the BSP expiration date.

### Changes in diagnosis

- No
- Yes (explain)

### Changes in psychotropic medication

- No
- Yes (explain)

### Changes in other restrictions

- No
- Yes (explain)

