

# Building Systems for Effective & Sustainable Tertiary Interventions

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# School-Wide Positive Behavior Support

## Universal Interventions

School-/Classroom-  
Wide Systems for  
All Students,  
Staff, & Settings

~5%

Intensive Interventions  
Specialized  
Individualized  
Systems for Students with  
High-Risk Behavior

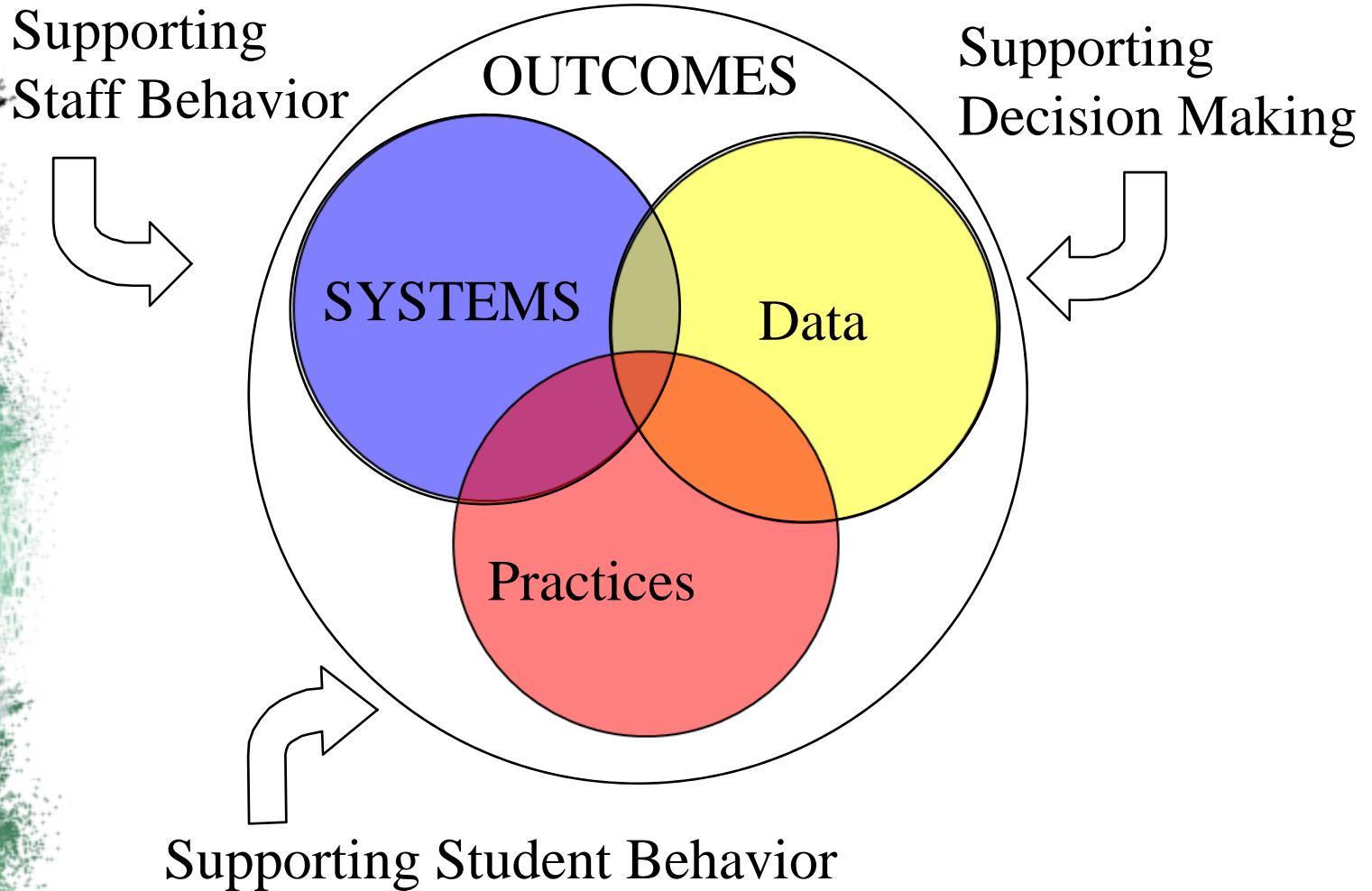
~15%

Targeted Interventions  
Specialized Group  
Systems for Students with  
At-Risk Behavior

~80% of Students



# Interventions are Not Enough



# IPBS in a School: Practices

- Continuum of supports
- Multiple ways of identifying students who may benefit
  - *Office discipline referrals*
  - *Request for assistance*
  - *Formative evaluations*

# IPBS in a School: Systems

- Team that meets regularly to progress monitor
  - *Team roles*
  - *Team functions*
- On-going training for team-members
- Access to technical assistance
- Link between SWPBS and IPBS
- Links between
  - *Academics and social behavior support*
  - *Families and schools*

Sample  
Minutes

Bethel's  
integrated  
system



# IPBS in a School: Outcomes/Data

- Individual students

- *Tools for data collection*

- Process
- Fidelity

Daily

Rating +  
Fidelity

- *Tools for easy graphing and evaluation*



- *Teachers receive feedback regularly*

- *Parents receive feedback regularly*

- Effects of system monitored

- *Outcomes*

Data

- *Fidelity*



# IPBS System in a School District

- Practices
  - *Technical assistance*
  - *Capacity building*
    - Efficient school systems and practices
- Systems
  - *Reallocation of resources, roles*
  - *District-level coordinators*
  - *Ongoing training*
- Data
  - *Process*
    - Across and within schools
  - *Outcomes*
    - Across and within schools

CONFIDENTIAL TEACHER FEEDBACK FORM FOR \_\_\_\_\_, Completed by \_\_\_\_\_

\*\*\*Due back to \_\_\_\_\_ on \_\_\_\_/\_\_\_\_/\_\_\_\_

In answering the questions below, please consider \_\_\_\_\_'s progress over the past week, between \_\_\_\_/\_\_\_\_/\_\_\_\_ and \_\_\_\_/\_\_\_\_/\_\_\_\_.

Is the student is making academic progress? (circle one)

- |                                 |                              |                                 |  |
|---------------------------------|------------------------------|---------------------------------|--|
| 1                               | 2                            | 3                               | 4  |
| No progress was made this week. | The student made small gains | The student made some progress. | The student's progress was similar to others in the class. |

If you circled 1 or 2, do you have serious concerns about the student's academic progress?

<b>NO</b>	I think the intervention is addressing concerns; it just needs more time.																		
<b>YES</b>	I have <u>serious</u> concerns about: <table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Attendance</td> <td>Progress in...</td> <td><input type="checkbox"/> Speech/verbalizations</td> </tr> <tr> <td><input type="checkbox"/> Work completion</td> <td><input type="checkbox"/> Math</td> <td><input type="checkbox"/> Fine motor skills/handwriting</td> </tr> <tr> <td><input type="checkbox"/> Homework</td> <td><input type="checkbox"/> Spelling</td> <td><input type="checkbox"/> Organization</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Writing</td> <td><input type="checkbox"/> Other (explain)</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Reading fluency</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Reading comprehension</td> <td></td> </tr> </table>	<input type="checkbox"/> Attendance	Progress in...	<input type="checkbox"/> Speech/verbalizations	<input type="checkbox"/> Work completion	<input type="checkbox"/> Math	<input type="checkbox"/> Fine motor skills/handwriting	<input type="checkbox"/> Homework	<input type="checkbox"/> Spelling	<input type="checkbox"/> Organization		<input type="checkbox"/> Writing	<input type="checkbox"/> Other (explain)		<input type="checkbox"/> Reading fluency			<input type="checkbox"/> Reading comprehension	
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	<input type="checkbox"/> Reading comprehension																		

Is the student making behavioral progress?

- |  |                              |                                 |  |
|--|------------------------------|---------------------------------|--|
| 1  | 2                            | 3                               | 4  |
| No improvement was noted or things got worse | The student made small gains | The student made some progress. | The student's behavior was similar to others in the class. |

If you circled 1 or 2, do you have serious concerns about the student's behavior?

<b>NO</b>	I think the intervention is addressing concerns; it just needs more time.												
<b>YES</b>	I have <u>serious</u> concerns about: <table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Withdrawal/social isolation</td> <td><input type="checkbox"/> Noncompliance</td> <td><input type="checkbox"/> Harassment</td> </tr> <tr> <td><input type="checkbox"/> Disruptive behavior</td> <td><input type="checkbox"/> Physical aggression</td> <td><input type="checkbox"/> Inappropriate language</td> </tr> <tr> <td><input type="checkbox"/> Off task behavior</td> <td><input type="checkbox"/> Attendance/tardiness</td> <td><input type="checkbox"/> Aggression toward peers</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Other (explain)</td> </tr> </table>	<input type="checkbox"/> Withdrawal/social isolation	<input type="checkbox"/> Noncompliance	<input type="checkbox"/> Harassment	<input type="checkbox"/> Disruptive behavior	<input type="checkbox"/> Physical aggression	<input type="checkbox"/> Inappropriate language	<input type="checkbox"/> Off task behavior	<input type="checkbox"/> Attendance/tardiness	<input type="checkbox"/> Aggression toward peers			<input type="checkbox"/> Other (explain)
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		<input type="checkbox"/> Other (explain)											

Is more support needed?

<b>NO</b>	Additional support is not needed at this time.				
<b>YES</b>	I recommend that we: <table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Schedule a team meeting</td> <td><input type="checkbox"/> Make a minor plan adjustment (explain)</td> </tr> <tr> <td><input type="checkbox"/> Schedule a meeting with parents</td> <td><input type="checkbox"/> Other (explain)</td> </tr> </table>	<input type="checkbox"/> Schedule a team meeting	<input type="checkbox"/> Make a minor plan adjustment (explain)	<input type="checkbox"/> Schedule a meeting with parents	<input type="checkbox"/> Other (explain)
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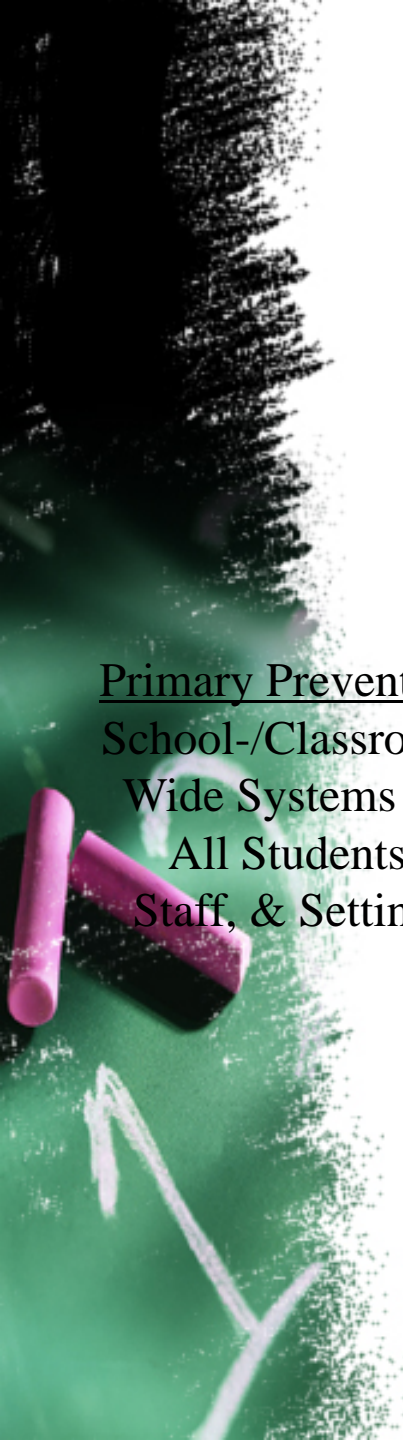


# Behavior Rating Form

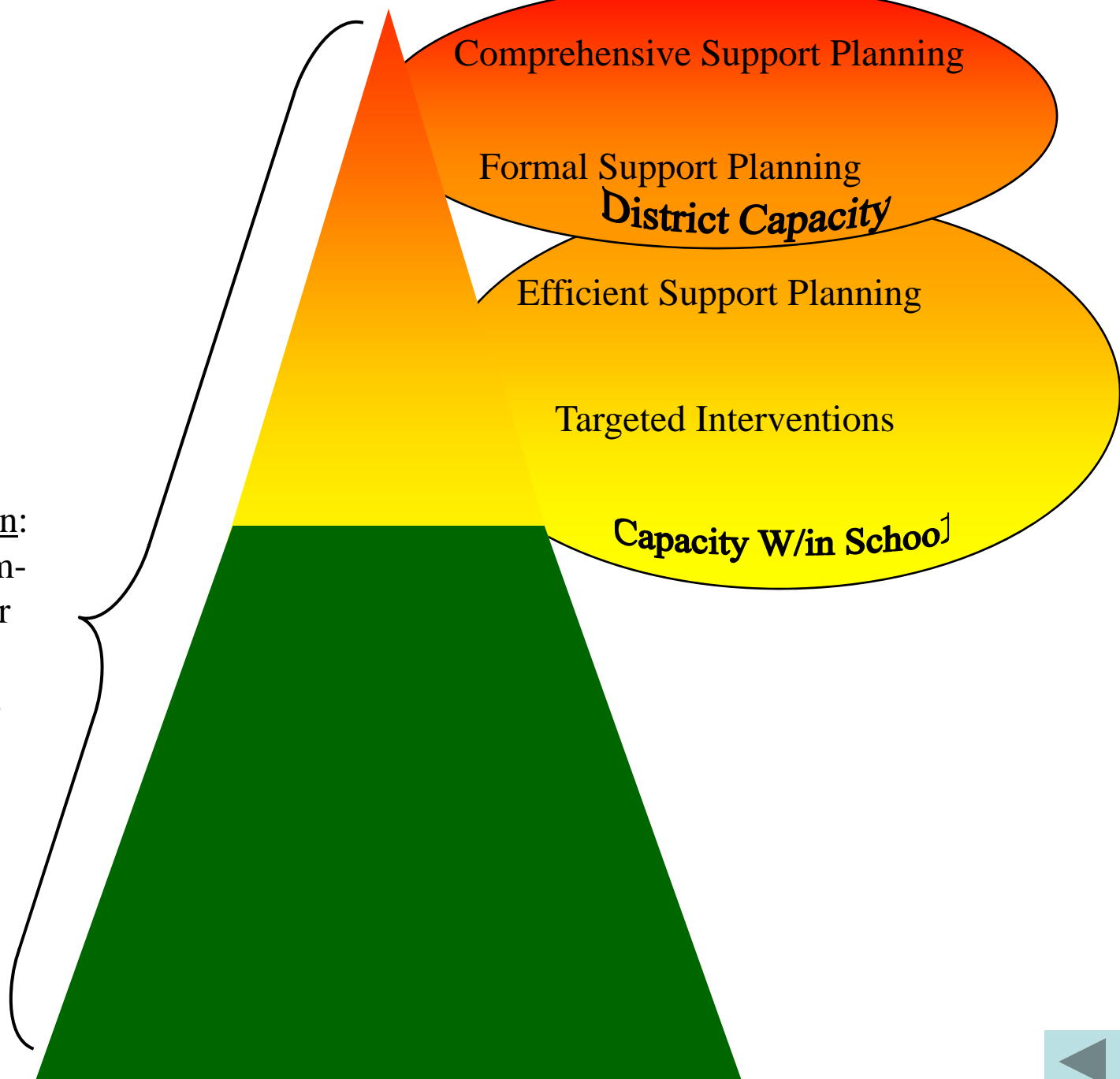
Student: Jose Fantino

Behavior		Date	5/15	5/16	5/17	5/18	5/19	5/20	5/21	5/22	5/23	5/24	5/25	5/26
Profanity	0-2 times		1	1	1	1	1	1	1	1	1	1	1	1
	3-5 times		2	2	2	2	2	2	2	2	2	2	2	2
	6-8 times		3	3	3	3	3	3	3	3	3	3	3	3
	10+ times		4	4	4	4	4	4	4	4	4	4	4	4
Out of seat	0-2 times		1	1	1	1	1	1	1	1	1	1	1	1
	3-5 times		2	2	2	2	2	2	2	2	2	2	2	2
	6-8 times		3	3	3	3	3	3	3	3	3	3	3	3
	10+ times		4	4	4	4	4	4	4	4	4	4	4	4
Raises hand	0-2 times		1	1	1	1	1	1	1	1	1	1	1	1
	3-5 times		2	2	2	2	2	2	2	2	2	2	2	2
	6-8 times		3	3	3	3	3	3	3	3	3	3	3	3
	10+ times		4	4	4	4	4	4	4	4	4	4	4	4

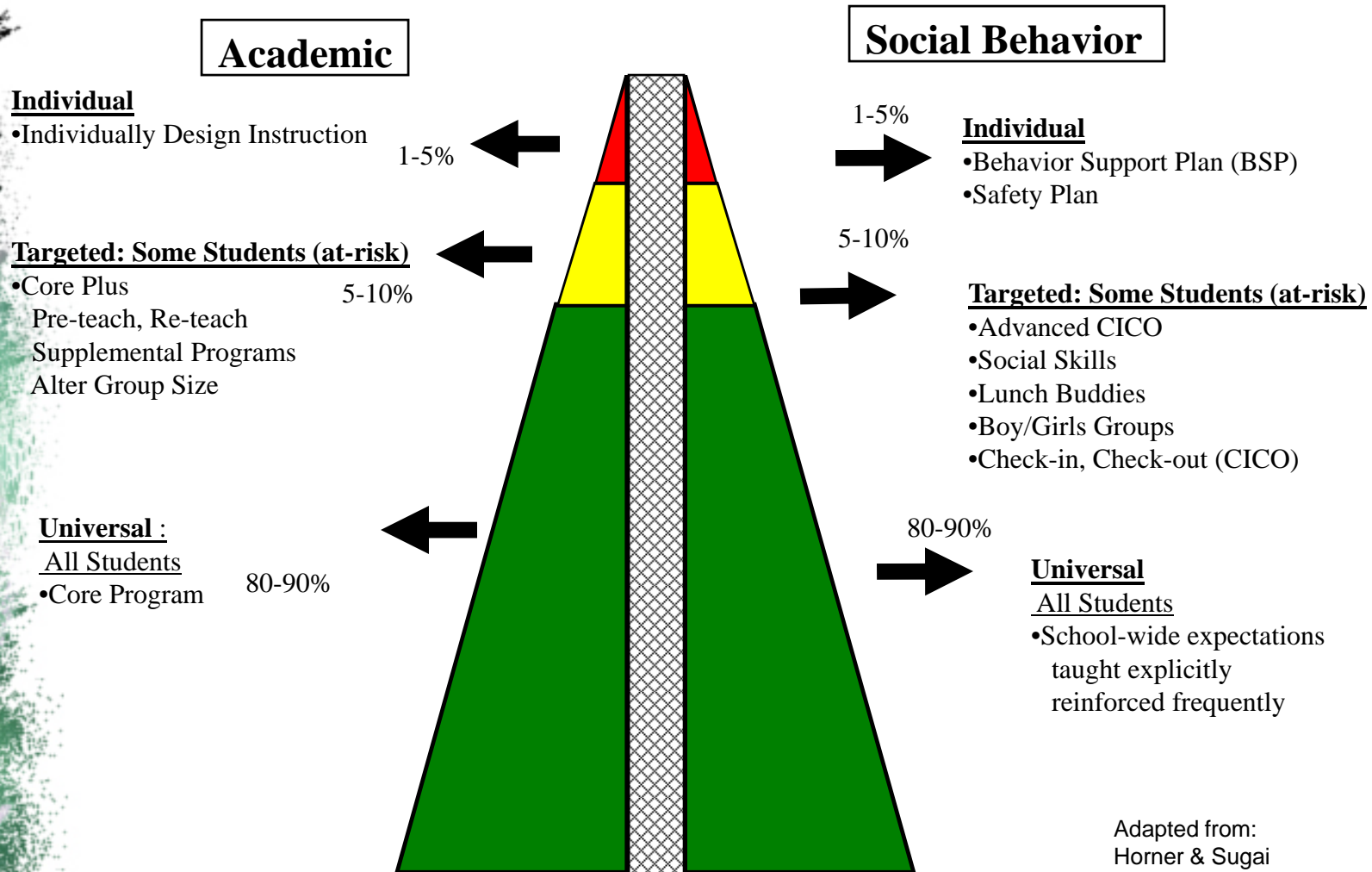




Primary Prevention:  
School-/Classroom-  
Wide Systems for  
All Students,  
Staff, & Settings



# Practices for Student Success in Bethel



# Critical Features of Request for Assistance Forms

- Demographic Information (teacher and student)
- Definition of problem
- Routines analysis
- What has been tried
- Possible motivation

[RFA  
Sample 1](#)

[RFA  
Sample 2](#)







# Student Information Form

This form is to assist your teams in monitoring progress of students over time. Please complete one form for each IPBS student.

Student First Name

Student Last Name

Date

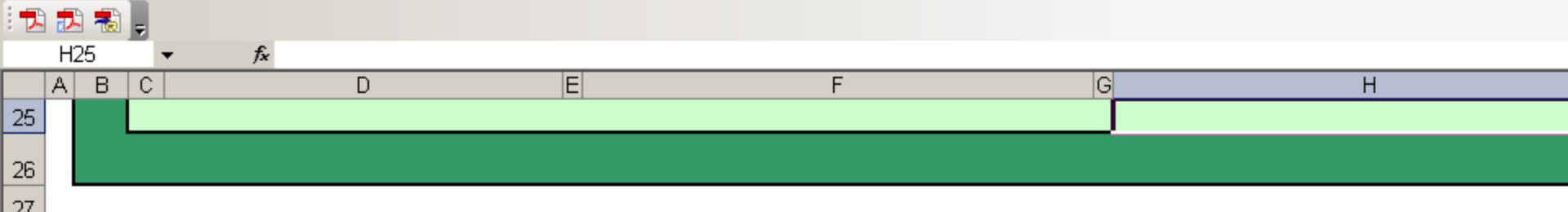
IPBS Number

Case Manager

Referring Teacher(s)

Consents for IPBS UO research obtained:  Yes  No

How referred (check all that apply)	Date/Number/Description	Behavior of Concern
<input type="checkbox"/> RFA for Behavior (date: dd/mm/yyyy)		
<input type="checkbox"/> RFA for Academic (date: dd/mm/yyyy)		
<input type="checkbox"/> RFA for Both (date: dd/mm/yyyy)		
<input type="checkbox"/> More than ___ ODRs (number of ODR's)		
<input type="checkbox"/> Formative Assessment		
<input type="checkbox"/> Parent request		
<input type="checkbox"/> Administrator Request		
<input type="checkbox"/> Other (describe)		



### Targeted Interventions

Was a targeted intervention started?  Yes  No

What targeted intervention?

Date implemented:

Description:

Type and frequency of data collection:

Date
date
date
date

Modification Implemented

Rationale

### Function-Based Interventions

Was an FBA completed?  Yes  No

If yes, what intervention was implemented?

## Function-Based Interventions

Was an FBA completed?  Yes  No

If yes, what intervention was implemented?

Date implemented:

Description:

Type and frequency of data collection:

Date
date
date
date
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Modification Implemented

Rationale

