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| DDA Logo.jpg | Functional Assessment (FA) and Positive Behavior Support Plan (PBSP)  **Quality Review Tool: Functional Assessment** | | | | |
| **Benchmark** | **3 Points** | **2 Points** | **1 Point** | **0 Points** | **Score** |
| **Description and Pertinent History**  Description of the individual in his or her world and pertinent history needs to be an accurate and detailed introduction. It should show the reader who this person is -- habits, schedule, preferences, goals, and aspirations of the individual described. | Score at this level if the FA provides a comprehensive picture of the “whole person” and not just the person’s behaviors. | Score at this level if the FA provides a solid picture of the person but does not address all components or addresses them in a superficial manner. | Score at this level if the overall picture of the person is limited. The primary focus may be on the challenging behaviors and little else is covered. | Score at this level if there is little or no description of the person or it refers to another plan without summarizing the information in the FA. |  |
| **At least 7 components are fully covered and the others are adequate:** | **At least 5 components are covered, but others are missing or incomplete:** | **At least 4 components are covered, but others are missing or incomplete:** | **Less than 4 components are covered:** |
| (Mark all that apply) | (Mark all that apply) | (Mark all that apply) | (Mark all that apply) |
| Present circumstances  Lists current medical, disability and psychiatric conditions / diagnoses  Interests / activities / hobbies  Strengths and abilities  Lists current medications or is not taking medications  Cognitive, adaptive and emotional functioning when doing well  Pertinent life experiences that may impact current behaviors (e.g., losses, transitions, history or trauma)  Communication skills  Describes how well the person’s current life meets their wishes and needs | | | |
| **Definition of Challenging Behaviors**  List each behavior separately and define in measurable terms; unless that behavior is part of a consistent group (e.g., tantrums or delusions). Baseline frequency, severity / intensity, and duration are clearly based on data collection. | Score at this level when each targeted behavior is listed separately and described in measurable terms, and baseline levels are clearly documented. | Score at this level when the definition of challenging behaviors is mostly complete, but there are some gaps. | Score at this level when some good information is provided, but overall the definitions are poor. | Score at this level when all aspects of the definitions are poor. |  |
| **All 4 components are fully covered:** | **At least 3 components are covered, but 1 is missing or incomplete:** | **At least 1 component is covered, but others are missing or incomplete:** | **All 4 components are missing or incomplete:** |
| (Mark all that apply) | (Mark all that apply) | (Mark all that apply) | (Mark all that apply) |
| Each targeted behavior is defined in measurable terms.  Behaviors are listed separately unless part of a consistent grouping. The specific behaviors that comprise the grouping (e.g., tantrum) are listed and usually occur together.  Information on frequency, severity / intensity, and duration of each behavior is provided in quantitative (2x/week) rather than qualitative (e.g., frequently) terms.  Frequency  Severity / Intensity  Duration  Information is clearly derived from data collection (baseline data was observed and collected). | | | |
| **Quality Review Tool: Functional Assessment (continued)** | | | | | |
| **Benchmark** | **3 Points** | **2 Points** | **1 Point** | **0 Points** | **Score** |
| **Data Analysis and Assessment Procedures**  Baseline data has been systematically collected from different sources. This data drives the description of targeted behaviors via the A-B-C model (Antecedent-Behavior-Consequence). Other factors that influence behavior are listed. | Score at this level when it is clear that systematically collected baseline data drives target behavior descriptions and other factors that influence behaviors have been considered. | Score at this level when quality data analysis and assessment procedures are described, but there are gaps. | Score at this level when one component of the data analysis and assessment procedures is covered well, but other components are missing or incomplete. | Score at this level when all components of the description of data analysis and assessment procedures are missing or incomplete. |  |
| **All 4 components are fully covered:** | **At least 2 components are covered, but others are missing or incomplete:** | **At least 1 component is covered, but others are missing or incomplete:** | **All 4 components are missing or incomplete:** |
| (Mark all that apply) | (Mark all that apply) | (Mark all that apply) | (Mark all that apply) |
| Baseline data collection procedure is clearly described (how data was collected, what sources of information were used).  The data is clearly described as it relates to the A-B-C (Antecedent-Behavior-Consequence) model for each targeted behavior.  The setting events and predictors (immediate antecedents) are identified from the collected information.  Specific medical, psychiatric or quality of life issues that appear to impact or influence the challenging behavior are included. | | | |
| **Summary Statements**  List the hypothesis (function) why the person engages in each challenging behavior. When there are multiple behaviors that appear to serve different functions / purposes, list a summary statement for each behavior. | When the FA focuses on multiple behaviors or functions of a single behavior, score at this level only when all hypotheses meet the criteria below. | When the FA focuses on multiple behaviors or functions of a single behavior, score at this level if at least one of the hypotheses falls short of a 3 point response, but none are at the 1 point level of quality. | When the FA focuses on multiple behaviors or functions of a single behavior, score at this level if at least one of the hypotheses meets a 1 point level of quality. | Score at this level when the section is missing or when all aspects of the summary statements are of poor quality. |  |
| **Each target behavior has a summary statement with all 4 components are fully covered:** | **At least 2 components are covered, but 1 is missing or incomplete:** | **At least 1 component is covered, but others are missing or incomplete:** | **All 4 components are missing or incomplete:** |
| (Mark all that apply) | (Mark all that apply) | (Mark all that apply) | (Mark all that apply) |
| A hypothesis for why the person engages in the behavior is provided for each targeted behavior that was a focus of the FA.  The hypothesis logically follows from the data or other information collected. (For example, “the person hits to get attention,” does not explain why the person wants attention. Are they bored/sick/afraid, etc.?)  Situations in which the behavior is more/less likely to occur are noted for each targeted behavior.  Reinforcers (what the person seeks to gain/avoid in response to exhibiting the behavior) are noted for each targeted behavior. | | | |
| **Total Score** | **Excellent**  No revision recommended. | **Satisfactory**  Light revision recommended. | **Below Standard**  Moderate revision recommended. | **Unsatisfactory**  Major revision recommended. | TOTAL SCORE |
| **10 - 12** | **8 – 9**  with no section scored 0 points | **6 – 7**  with no section scored 0 points | **Less than 6**  or any section scored 0 points |
| DDA Logo.jpg | Functional Assessment (FA) and Positive Behavior Support Plan (PBSP)  **Quality Review Tool: Positive Behavior Support Plan (PBSP)** | | | | |
| **Benchmark** | **3 Points** | **2 Points** | **1 Point** | **0 Points** | **Score** |
| **Challenging Behaviors Defined**  The list of targeted behaviors in the Positive Behavior Support Plan should match behaviors discussed in the Functional Assessment. Unless additional information is provided beyond what was included in the FA, check off only those components that were checked for the scoring of this section in the FA. | Score at this level when each targeted behavior is listed separately and described in measurable terms, and targeted behaviors correspond to the FA. | Score at this level when the definition of challenging behaviors is mostly complete, but there are some gaps. | Score at this level when some good information is provided, but overall the definitions are poor. | Score at this level when all aspects of the definitions are poor. |  |
| **All 4 components are fully covered:** | **At least 2 components are covered, but others are missing or incomplete:** | **At least 1 component is covered, but others are missing or incomplete:** | **No components are covered or information is incomplete:** |
| (Mark all that apply) | (Mark all that apply) | (Mark all that apply) | (Mark all that apply) |
| Each targeted behavior is defined in measurable terms.  Behaviors are listed separately unless part of a consistent grouping, such as tantrums or delusions. The specific behaviors that comprise the grouping are listed and usually occur together.  Information on frequency, severity/ intensity, and duration of each behavior is provided in quantitative (2x/week) rather than qualitative (e.g., frequently) terms.  Frequency  Severity / Intensity  Duration  All targeted behaviors correspond to the FA, or if they differ, no explanation is provided for the discrepancy. | | | |
| **Prevention Strategies**  Strategies should be described in sufficient detail to serve as a guidebook for staff/caregivers that are implementing the plan. Strategies should play on the individual’s strengths and relate to the list of targeted behaviors and skills to be taught. Strategies should be reasonable and achievable. | Prevention strategies are comprehensive and provide clear direction for staff. | Strategies are listed that are specific and measurable, but strategies for only 1 or 2 domains are identified; or, strategies for all 3 domains are identified, but the strategies for some domains (but not all 3) are not specific and measurable. | Strategies may be listed that are preventative in nature, but none are specific and/or measurable (i.e., tend to be vague and lacking in focus). | No prevention strategies are provided or strategies are primarily reactive (e.g., what to do if “X” occurs) rather than preventive (e.g., doing things to change the environment, addressing major quality of life issues for the person). |  |
| **All components are fully covered:** | **At least 3 items are checked, but 1 is missing or including the first component:** | **The first component is covered, but the second component does not apply for any of the strategies provided:** | **The first component is not covered:** |
| (Mark all that apply) | (Mark all that apply) | (Mark all that apply) | (Mark all that apply) |
| Strategies are preventative in nature.  Specific and measurable actions are provided for staff/caregivers to prevent targeted behaviors.  There are strategies for each of the three domains:  Environmental  Psychosocial/interpersonal  Intrapersonal (medical, psychiatric or psychological) | | | |
| **Quality Review Tool: Positive Behavior Support Plan (PBSP) (continued)** | | | | | |
| **Benchmark** | **3 Points** | **2 Points** | **1 Point** | **0 Points** | **Score** |
| **Teaching / Training Supports**  Do the teaching strategies support the goals outlined and the skills identified? Are the teaching procedures detailed enough to tell the support staff / caregiver what they are to do when teaching these skills? Do the instructions also tell how to reinforce the person as he or she attempts, learns, and completes each skill? | Score at this level when the teaching/training outline gives comprehensive and clear direction for staff members to teach and reinforce each of the skills identified. When multiple teaching supports are identified, score at this level only if all teaching/training supports meet the 3 point level of quality. | Score at this level when the teaching/training outline is generally well developed, but lack specific instructions for staff/caregivers to follow (e.g., general in nature, use of professional jargon without specific instructions, reinforcers not fully identified), or is not age appropriate. | Score at this level when teaching and training supports are present but unclear. The plan may list reinforcement procedures or specific skills/replacement behaviors to teach, but not both. Instructions for staff/caregivers are non-specific. | Score at this level when no specific skills or replacement behaviors and no reinforcement procedures are outlined, or when the information given is so vague that it is unclear what will be taught or how. |  |
| **All 3 components are fully covered:** | **At least 2 components are covered, but others are missing or incomplete:** | **At least 1 component is covered, but others are missing or incomplete:** | **No components are covered or information is incomplete for each:** |
| (Mark all that apply) | (Mark all that apply) | (Mark all that apply) | (Mark all that apply) |
| Procedures to teach and reinforce replacement behaviors are clearly described for each skill to be taught.  Teaching/training supports are age appropriate.  There are specific instructions on when and how to teach and reinforce skills and behaviors that can serve as replacement behaviors | | | |
| **Strategies for Responding to Challenging Behaviors**  Strategies should be provided for the predictable behaviors that are part of the individual’s list of challenging behaviors. Strategies should be reasonable and appropriate for the challenging behavior and will allow the staff/caregiver to keep the individual, others and him/herself safe while the individual is in their care. | Score at this level when the strategies for responding to challenging behavior meet DDA policy and provide complete, comprehensive and clear direction for staff / caregivers. | Score at this level when the strategies meet DDA policy and are adequate to respond to the targeted behavior, but there is some ambiguity (e.g., jargon terms without definition - “use role play techniques”; or it is unclear which strategies should be provided when or in response to what). | Score at this level when the strategies for responding to challenging behavior meet DDA policy but the instructions are minimal (e.g., actions are not presented in a sequential order; the strategy is disproportionate to the behavior; or may not be applied in a variety of settings and no alternative strategies for use in other settings). | Score at this level when strategies violate DDA policy, or there are little or no instructions (e.g., “use appropriate strategies”), or strategies are clearly an inadequate to address the challenging behavior (e.g., suggests “ignoring” a behavior that is a clear health and safety issue; verbal redirection for a person who does not respond to verbal commands). |  |
| **All 3 components are fully covered *and*, if used, restrictive procedures are fully described and meet DDA policy:** | **At least 2 components are covered but the other is missing or incomplete *and*, if used, restrictive procedures are fully described and meet DDA policy** | **At least 1 component is covered but others are missing or incomplete *and*, if used, restrictive procedures meet DDA policy:** | **No components are covered or information is incomplete for each *and/or* restrictive procedures *do not* meet DDA policy:** |
| (Mark all that apply) | (Mark all that apply) | (Mark all that apply) | (Mark all that apply) |
| **Quality Review Tool: Positive Behavior Support Plan (PBSP) (continued)** | | | | | |
| **Benchmark** | **3 Points** | **2 Points** | **1 Point** | **0 Points** | **Score** |
| **Strategies for Responding to Challenging Behaviors (continued)** | Comprehensive, clear, and specific instructions for staff/caregivers to follow in responding to each targeted behaviors. *Strategies typically cover these elements: ensuring protection; redirection; helping the person problem solve; and minimizing reinforcement of challenging behavior(s).*  A continuum of responses is listed, ranging from least to most restrictive.  Strategies are appropriate for a variety of settings.  Restrictive procedures and physical holds are clearly described and meet DDA policy requirements (e.g., allowable by policy, current approval obtained, staff training, etc.).  Instructions to implement restrictive procedures are included (what, when, how). Identification of physical holds must be specific; cannot state “implement physical hold” or implement TO hold” without further description. | | | |  |
| **Data Collection and Monitoring**  Description of the data collection process has two major components:   1. Details tell support staff and caregivers what to collect, when, where, and how. 2. Data is directed at the targeted behaviors in such a way that the plan’s effectiveness can be determined. | Score at this level when the data collection procedures are specific, comprehensive, and able to address program effectiveness. | Score at this level when data collection procedures are mostly complete, but there is some ambiguity on what, when, where, or how to collect data; or, data collection procedures provide some information but are insufficient to fully evaluate plan effectiveness. | Score at this level when the plan lacks clear instructions for data collection, or data being collected is not aligned with the measurable definition of behavior. | Score at this level when there are no instructions on data to be collected, or solely relies on incident reports or other narrative records. |  |
| **All 4 components are fully covered:** | **At least 2 components are covered, but the others are missing or incomplete:** | **At least 1 component is covered, but the others are missing or incomplete:** | **No components are covered or information is incomplete for each:** |
| (Mark all that apply) | (Mark all that apply) | (Mark all that apply) | (Mark all that apply) |
| Clear instructions on data to be collected – who, what, when, where, and how.  Data collected is comprehensive (date, time, location, measurable description, intensity, duration, immediate precursors to behavior described).  Data collection is sufficient to evaluate plan effectiveness and corresponds with the measurable definition of the targeted behavior.  Provides behavior tracking sheet / graph with clear and easy to follow instructions. | | | |
| **Total Score** | **Excellent**  No revision recommended. | **Satisfactory**  Light revision recommended. | **Below Standard**  Moderate revision recommended. | **Unsatisfactory**  Major revision recommended. | TOTAL SCORE |
| **13 - 15** | **10 - 12**  with no section scored 0 points | **7 – 9**  with no section scored 0 points | **Less than 7**  or any section scored 0 points |