

VENTURA COUNTY SELPA
Behavioral Intervention Plan (BIP)/Positive Behavior Support Plan (PBSP)
Program Effectiveness – Review Worksheet

Name of Student:

School District:

Date of IEP to adopt BIP/PBSP:

Date to be reviewed:

REVIEW OF BIP/PBSP EFFECTIVENESS:

Summary of effect of plan on the target behavior (from data sheets):

Summary of effect of plan on the replacement behavior(s) (from data sheets):

Comments:

RECOMMENDATIONS

- The BIP/PBSP, including behavioral interventions, has effectively eliminated the target behavior. The use of the special behavioral interventions is to be discontinued. (Note: requires IEP team review/decision)

- The BIP/PBSP, including behavioral interventions, has had a positive effect on the target and replacement behaviors. The plan will be continued for an additional three months.

- Minor modifications to the BIP/PBSP will include:

- There is a need for additional functional analysis regarding the behavior. An assessment plan has been provided to the parent and results will be reviewed in an IEP team meeting.

- There is need for consideration of significant modifications of the BIP/PBSP, which will be developed in an IEP team meeting.

- (other)

Parent participated in this review by:

- Attended the review meeting**
- Telephone conference**
- Other:** _____

Behavior Intervention Plan/Positive Behavior Support Plan: Program Effectiveness – Review

<u>BIP/PBSP Review Conducted by:</u>	<u>Title</u>	<u>Date</u>
	Parent	
	Behavioral Intervention Case Manager	
	Teacher	
	Additional Participant/Title	
	Additional Participant/Title	
	Additional Participant/Title	
	Additional Participant/Title	
	Additional Participant/Title	