

Ventura County SELPA
 FUNCTIONAL ANALYSIS ASSESSMENT (FAA) SUMMARY REPORT OR
 FUNCTIONAL BEHAVIORAL ASSESSMENT (FBA) GUIDE

This form contains required elements for FAA under CCR 3052 (b). It can be used as a guide for conducting FBAs as per CFR 300.520. Please check the appropriate box for your purpose.

Student Name Steven Date 10/15/02
Date of Birth 12/12/86 Age 17-2
Current Placement Special Day Class Disability Mental Retardation

Reason for referral (be specific):

Steven was referred for a Functional Analysis Assessment by the Individualized Education Program (IEP) team members subsequent to his being suspended from school after hurting another student. Steven has a long history of severe aggression, including: hitting, biting, pinching and throwing objects at staff and other students. Due to the severity of Steven's behaviors he is at risk of being placed in a more restrictive educational environment.

Review of all relevant records (be sure to specify developmental, cognitive and communication abilities and list which records were reviewed):

Parent Interview (parent and group home)
Teacher Interview
Review of Cumulative Records (includes psychoeducational and speech assessment results)

Steven resided in Santa Barbara with his family until he was 15 years old. According to the **Home Language Survey**, Spanish is the primary language of the household. Steven was recently placed in a group home, after his parents were unable to handle his increasing aggression towards his younger siblings. Improvements in his behavior are noted by the group home, although he continues to be a challenging client.

Steven has medical diagnoses of: severe mental retardation secondary to post-natal viral meningitis, a history of seizure disorder, left hemiparesis, and mild thoracic scoliosis. He takes the following medications on a daily basis: Haldol, Depalote, and Cogentin. Steven's physician is currently reviewing Steven's medications. Prior to being in the group home, Steven was not on any medications. Steven's hearing and vision skills are intact.

Steven is currently enrolled in a self-contained, non-categorical Special Day Class program run by the Ventura County Superintendent of Schools for students with severe handicaps. He has been in this type of programming since preschool. Records indicate that Steven has a long history of behavioral challenges at home and school, beginning as a toddler. In middle school he was placed on Home Teaching, as he was not being successful in the special education program. He was also placed in a non-public school, but was dismissed as he engaged in running away from the school, placing himself in danger.

Previous assessments have consistently shown Steven to be functioning in the sensory motor stage of intellectual development. He is ambulatory, although he does have some gross and fine motor delays, secondary to the left hemiparesis. He is dependent upon others for all of his grooming and toileting needs.

PROBLEM BEHAVIOR

Describe behavior (observable measurable and specific - including intensity and duration when appropriate):

When angry or frustrated, Steven will hit, pinch, kick, or throw objects at staff or students. His angry outbursts will occasionally last for up to 5 minutes. What is most concerning is that they have become more intense, resulting in a student's having to go to the hospital.

Baseline (how often does it occur?) (i.e., 5 x per hour; 2-3 times per month). Include when student was observed, by whom and in what environments.

A record of Steven’s aggression was compiled by his classroom teacher from 9/5/02 to 10/10/02, with three days of out-of school suspension during that observation period. A daily record was kept on Steven’s aggressive behaviors in the classroom and when on Community Based Instruction. An average of 2 incidents of aggression per day were noted over the observation period.

Antecedents (what happens before the behavior occurs)?

Antecedents to Steven becoming aggressive towards staff or students include: being asked to perform a non-preferred activity, being asked to change activities, or being denied access to something that he has requested. At times Steven’s mood on any given day will increase his aggression towards others.

Consequences (what happens after the behavior occurs)?

With low intensity aggression, Steven is removed from the group, given a verbal reprimand and redirected back to the activity that he was supposed to be doing. With higher level aggressions, staff is usually aware of the situation when the peer makes some noise (such as screaming), staff members come running, they tell Steven “no!” and then physically removing him from the peer. Severe aggression has resulted in Steven’s being suspended from school.

ECOLOGICAL/SETTING FACTORS AND EVENTS
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For each of the following, describe what is typical:

	<i>When the problem behavior occurs...</i>	<i>When the problem behavior does not occur...</i>
Day or Time:	<ul style="list-style-type: none"> In the morning Monday 	
After a certain event:	<ul style="list-style-type: none"> After eating breakfast When transitioning from preferred to nonpreferred activity After having spent the weekend with his family 	<ul style="list-style-type: none"> After a severe aggressive incident
Before a certain event:	<ul style="list-style-type: none"> When getting ready to go out in the community and teacher gets distracted 	
People present: (students and adults)	<ul style="list-style-type: none"> Students in wheelchairs 	
Subject/Activity:	<ul style="list-style-type: none"> Sweeping the floor Doing classroom “jobs” 	<ul style="list-style-type: none"> On the bus
Type of activity: (quiet, group, hands-on)	<ul style="list-style-type: none"> Whole group, sit down activities 	<ul style="list-style-type: none"> When allowed outside to “do his own thing”
Location: (cafeteria, playground)	<ul style="list-style-type: none"> Classroom 	<ul style="list-style-type: none"> When being talked to in Spanish
Type of instruction: (oral, visual)		
Support available: (one-on-one, group)		
Other:		

Describe the student's ability to communicate:

Expressive (*verbal or non-verbal*) – Steven communicates by gestures, facial expression, and pulling the person to what he wants. He does make some sounds, which he uses to express his pleasure or anger. His previous teachers have attempted to teach Steven how to use a communication device, but he has been resistant to learning.

Receptive – Steven has good receptive language skills for simple commands. His receptive language is significantly stronger than his expressive language. Steven particularly likes being talked to in Spanish.

Are there health, medical or family factors which may contribute to the problem behavior? Please note:

Steven’s medication is in the process of being changed. He is more likely to have difficulty during this time period.

History of behavior - include effectiveness of previously used behavior interventions:

As stated previously, Steven has a long history of severe behavior problems, beginning when he was a toddler. When talking with his previous teachers, no specific behavior plan was written down and implemented. Rather, each teacher tried to control the behavior through their use of their own classroom rules.

Describe student’s opportunities for life-enhancing activities:

- Independence – Steven is monitored in all aspects of his life. He is allowed to go outside and “do his own thing” for brief periods of time, but he is always closely supervised to insure that he doesn’t do something harmful to himself or others.
- Choice – At the present time Steven has few opportunities to make choices. He is in a highly structured academic program where all activities are chosen for him by the staff
- Variety – Steven’s academic program has a variety of activities in and out of the classroom. His day is broken into classroom activities and community activities. These activities vary daily.

FUNCTION OF BEHAVIOR

What is your hypothesis of the function of the behavior (what the behavior gets for the student – such as escaping or seeking sensory input, attention, items or events)?

Steven’s behaviors appear to be a means of escaping (protesting, avoiding) a non-preferred activity.

REPLACEMENT BEHAVIOR

Describe the behavior which you would like the student to do instead of the problem behavior. (Cannot be simply a lack of the problem behavior - must be a new behavior which will get the same outcome for the student as above):

Steven would communicate his desire to avoid or protest an activity by showing a break card.

Does the student currently use/have the replacement behavior? Yes No

If yes:

- Baseline –
- Antecedents –
- Consequences –

If the behavior is currently occurring at all -

For each of the following, describe what is typical when the behavior occurs:

Day or Time:
After a certain event:
Before a certain event:
Subject/Activity:
People present: (students and adults)
Type of activity: (quiet, group, hands-on)
Location: (cafeteria, playground)
Type of instruction: (oral, visual)
Support available: (one-on-one, group)
Other:

REINFORCEMENT

Note what the student likes/seeks:

Activities: Going out for fast food, going to the park, being on the bus, listening to Spanish music on a tape recorder, cause and effect toys that emit sounds.

People: School Psychologist

Food: Candy, cookies, popcorn

Other:

RECOMMENDATION TO THE IEP TEAM

BIP needed? Yes/No

Signature _____ Title _____

When developing the Behavior Intervention Plan (or Positive Behavior Support Plan), the team should consider:

1. Adjustments/accommodations to health/medical and family issues which may be possible.
2. Instruction/accommodations/modifications to address student's communication needs (expressive and receptive).
3. Interventions used in the past - what worked/did not work.
4. Introducing more independence and life enhancing activities into the student's daily routine.
5. Changes to the environment/setting which will reduce occurrence of problem behavior and increase desired behavior.
6. Interventions planned to decrease problem behavior and increase desired behavior.
7. Plan for delivering reinforcement for reduction/elimination of problem behavior and increase of desired behavior.
8. A plan for responding if the problem behavior occurs.