Behaviour Support Plan

Date Created:		**Date(s) Reviewed:**	
Student Name:		**Parent(s)/ Guardian(s) Information**	
Current School:		**Address:**	
Current Grade:		**Phone:**	

Key Student Understandings - Identify the student's strengths and any challenges and other information to positively understand the student's needs.	
Strengths:	**Challenges:**
Any Other Relevant Information (Interests/Hobbies/motivators)	

Hypothesis statement that identifies why student behaviour may be occurring:

The [student] _____(behaviour) for the purpose of _____

Target Behaviour:

SETTING EVENTS: What prior events or conditions, internal or external to the individual, influences the student's behaviour in the classroom or school?

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Setting Event	Calm Strategy

ANTECEDENTS: What are the situations and events that are immediate triggers for the escalation of behaviour? What occurs at school prior to a behaviour problem?

Antecedent	Strategy for Triggers

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RESPONSE PLAN: (Staff responses to student behaviour) Designated staff will implement the following plan when necessary.

Precursor Behaviours (What you see)	Staff Responses (What you do)
Anxiety: (noticeable increase or change in behaviour)	**Be Supportive:** (empathetic, non-judgemental response)

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Precursor Behaviours (What you see)	Staff Responses (What you do)
Defensive: (cues that the student is beginning to lose the ability to think or process information)	**Be Directive:** (set clear, simple, enforceable limits)

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Precursor Behaviours (What you see)	Staff Responses (What you do)
Acting Out: (risk to self or others)	**Safety Intervention Plan:** (injury prevention)
	See Student Crisis Plan Attached
Tension Reduction: (cues that the student is calm)	**Therapeutic Rapport:** (re-establish rapport-do not recriminate)

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This plan will be reviewed on a weekly or as needed basis by the entire team and if any change in behaviour occurs .

I have read this plan and am aware of safety procedures to be followed:

Print Name	Signature	Relationship to Student	Date

Next Meeting Date:

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