

Behavioral Intervention Procedural Checklist
(To be used as a guide when completing a Behavior Emergency Report or an Incident Report)

Student _____ DOB _____ Date _____
Case Manager _____ School _____

Section A			
Date	Initials		
		Student Exhibits behaviors that impede his/her learning or the learning of others.	Yes <input type="checkbox"/> Proceed to next question No <input type="checkbox"/> Review and continue to implement the IEP
		An emergency physical intervention was employed	Yes <input type="checkbox"/> Proceed to section B No <input type="checkbox"/> Proceed to section C

Section B: Emergency Physical Intervention was employed			
Date	Initials		
		Notify parent of emergency intervention used the same day as the use of the emergency intervention <input type="checkbox"/> Phone <input type="checkbox"/> E-mail <input type="checkbox"/> In Person <input type="checkbox"/> Other	
		Behavioral Emergency Report was completed the same day as the use of the emergency intervention	
		Behavioral Emergency Report was provided to the site administrator the same day as the use of the emergency intervention	
		Behavioral Emergency Report was provided to the District Special Education Administrator the same day as the use of the emergency intervention	
		Behavioral Emergency Report was filed in the student record the same day as the use of the emergency intervention	
		A Behavioral Intervention Plan Exists	Yes <input type="checkbox"/> Schedule an IEP team meeting (to be convened no later than 30 calendar days after the use of the emergency intervention) and proceed to section E No <input type="checkbox"/> Schedule an IEP team meeting within 2 days. Proceed to section D

Section C: No Emergency Physical Intervention was used.			
Date	Initials		
		Is an Incident Report Required	Yes <input type="checkbox"/> Complete the Incident Report and provide to: <input type="checkbox"/> Administrator <input type="checkbox"/> Student File <input type="checkbox"/> Notify Parent/Guardian (there is no requirement that they receive a formal report) <input type="checkbox"/> Phone <input type="checkbox"/> E-mail <input type="checkbox"/> In Person <input type="checkbox"/> Other _____ Proceed to next step No <input type="checkbox"/> Proceed to next step
		A Behavior Intervention Plan exists	Yes <input type="checkbox"/> Schedule an IEP team meeting to review the plan Proceed to Section E No <input type="checkbox"/> Proceed to next step
		Student's behavioral needs are being appropriately addressed in the IEP	Yes <input type="checkbox"/> Continue to implement the IEP as written No <input type="checkbox"/> Schedule an IEP meeting and proceed to Section D

Section D: Procedure for IEP meeting			
Date	Initials		
		Current IEP has behavioral strategies for this uncontrollable, spontaneous behavior that posed a clear and present danger	Yes <input type="checkbox"/> Convene the IEP Team to review behavioral strategies included in the IEP. <ul style="list-style-type: none"> • If strategies are not effective proceed to Section E • If strategies are effective continue to implement the IEP as written No <input type="checkbox"/> Convene the IEP team and proceed to section E

Section E: Review and/or modify current Behavior Intervention Plan			
Date	Initials		
		Behavioral Intervention Plan implementation documented	Yes <input type="checkbox"/> Proceed to next question No <input type="checkbox"/> Skip next question and go to the following one.
		Compare present levels of behavior to prior levels of behavior to determine plan is effective. Is there improvement?	Yes <input type="checkbox"/> Continue to implement the Behavioral Intervention Plan No <input type="checkbox"/> Proceed to next question
		Does student require an FBA to identify behavioral needs?	Yes <input type="checkbox"/> Proceed to next question No <input type="checkbox"/> Modify existing BIP through IEP process based on current data
		Identify who will collect what data during what time period to revise the BIP.	Who _____ What _____ When _____ Proceed to next step
		Determine when IEP team will meet to present draft of revised BIP	When _____ Where _____ Who will bring draft _____ Proceed to next step
		Convene IEP meeting and implement revised BIP	