**Behavior Intervention**

It is our responsibility as a network to create and sustain focused and joyful learning environments where scholars are deeply invested in building the academic and character skills necessary for success in college and life. Strong behavior intervention supports the socio-emotional development of all scholars achieving this goal.

Behavioral intervention is the process that provides scholars with systematically intensifying supports in order to achieve the same high behavioral outcomes as their peers. This includes, but is not limited to, individualized engagement strategies, explicit skill building, increased accountability structures, targeted positive reinforcement, and purposeful relationship building.  Meeting the needs of scholars and integrating strong support plans into core programming will result in increased academic success for all scholars.

# Guiding Principles to Implement Behavioral Intervention Support:

* Strong core culture is foundational. Effective routines, high expectations, and authentic engagement are essential foundations to building a vibrant joyous school culture.
* Early consistent behavior intervention is necessary.  If we wait until behavior escalates, the process of intervention becomes much more intense and resource consuming. Behavior intervention should be built into the fabric of school culture.
* Families are the primary partners in behavior interventions work.  Building relationships and trust is necessary for collaboration in order to best support scholars who are struggling the most.
* The most successful interventions are least invasive. They provide the most authentic interference to reduce the likelihood of the challenging behavior from occurring. They are intentionally matched to the student, situational context, timing, and environment.
* Explicit skill building is a vital component to intervention. Often students are lacking skills which lead to challenging behaviors. They are delayed in the development of crucial cognitive skills, such as flexibility/ adaptability, frustration tolerance, and problem-solving.
* Decision making is systematic and driven by data. Progress monitoring must guide selection, adoption, implementation, and evaluation of intervention decisions. In order to determine the effectiveness of an intervention, it is necessary to obtain baseline data and monitor progress frequently.
* Behavior Intervention is meant to be temporary. It is essential that when behavior support is put into place, there is a plan to de-scaffold support and build student autonomy. When crafting behavior support, it is necessary to carefully plan how a scholar will respond over time and how s/he will build towards independence.

Table of Contents

[Guiding Principles to Implement Behavioral Intervention Support: 1](#_Toc451891983)

[Positive Behavior Support 3](#_Toc451891984)

[Theory of Behavior Change: 3](#_Toc451891985)

[The Tiered Model 4](#_Toc451891986)

[Overview: structure of Behavior Intervention & the Child study team 5](#_Toc451891987)

[Tier 2 Interventions 6](#_Toc451891988)

[What is the HIGH LEVEL process of Building a Behavior Improvement Plan (BIP)? 9](#_Toc451891989)

[“At a Glance” Checklist for the FBA/BIP Process 10](#_Toc451891990)

[Assessing a Quality FBA 11](#_Toc451891991)

[Assessing a Quality BIP 13](#_Toc451891992)

[Child Study Team Procedures 17](#_Toc451891993)

[Roles and ResponsibilitIes 18](#_Toc451891994)

[Tier 2 - Grade Level Child Study Team Meeting 19](#_Toc451891995)

[Tier 3 - Child Study Team 21](#_Toc451891996)

[High Level CST Agenda 23](#_Toc451891997)

[Crisis Intervention Procedures: New York 25](#_Toc451891998)

[Crisis Intervention Procedures: Connecticut 26](#_Toc451891999)

[Connecticut Mobile Crisis Guide 27](#_Toc451892000)

# Positive Behavior Support

Across the country, too often increased negative consequences are relied on as the primary mechanism for changing behavior. For example, when approaching challenging behaviors, increased accountability for scholars (frequent phone calls home, increased parent meetings, tracking of credits/deductions, or even in and out of school suspension) is in place without addressing the fact that the unwanted behaviors are being reinforced in the school setting. Scholars often display certain challenging behaviors because they have yet to *learn* an appropriate replacement behavior.

Positive Behavior Support (PBS) is a problem-solving approach to understand reasons for challenging behaviors. Comprehensive interventions are designed to produce long lasting behavior change. PBS provides a framework so that students can revise their previous learning and respond adaptively to meet the demands of their environment.

## Theory of Behavior Change:

* Behavior is learned, predictable, and changeable. Students learn behavior over time through patterns of experiences given the demands of an environment. For the vast majority of scholars, simply setting and holding high expectations, with embedded positive incentives, will result in meeting school-wide behavior expectations. However, we know that some students need additional support to meet the same high expectations as their peers.
* Positive and negative consequences maintain, change, or shape behavior. In other words, a challenging behavior persists because it “works” for a student, meaning the behavior serves as a mechanism to achieve a highly desired reinforcement or end.
* To change behavior, it is necessary to identify the function that each problem behavior serves. Once the function has been hypothesized, a replacement behavior, that is more acceptable and will serve the same purpose for the scholar, can be identified. By determining the function(s) of the behavior, it is possible to make the problem behavior less effective and efficient, and make the desired behavior more functional.
* Challenging behavior occurs when the demands of the environment exceed a student’s current capacity to respond adaptively. Targeted skill building, coupled with robust positive reinforcement to “catch the student doing the right thing,” helps to motivate a student to perform the desired behavior because the payoff is incentivized. For example, if a student is seeking teacher attention, then a teacher’s response to calling out will get him/her more attention than simply raising his/her hand. Unless the replacement behavior is incentivized at a greater rate, the student will continue to call out (to get the teacher’s attention.)
* Durable and effective intervention focuses both on the scholar and their environment. Intervention should focus on the skills a student needs to learn and involve people in the child’s environment. In order for behavior change to take place, all stakeholders need to understand the true nature of the challenges, provide preventive supports (including relationship building), and afford the student opportunities to practice new skills.

# The Tiered Model

Behavioral intervention is any course of action designed to teach, reinforce, and ultimately replace students’ challenging behaviors with positive replacement behaviors. There are three levels of intervention implementation. While the three intervention tiers build upon one another, each tier has a specific intervention focus and process for implementation.

There is one overall owner for tiered behavior intervention who is a member of the School Leadership Team and also oversees the Child Study Team process.

**As scholars move through the tiers, supports become more comprehensive and more individualized.**

**Decision-making is data-driven throughout.**

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| **Examples of Intervention by Tiers** |
| **Tier 1:****Core School Culture** | Common Picture and Behavior Management SystemsCore TaxonomyRemoval/Reentry Procedures with Skill-building  |
| **Tier 2:****Increased Supports** | Daily Check-In Check-Out Social Skills Groups Student ContractBehavior Support Plan (“BIP-lite”) |
| **Tier 3:****Individualized Intensive Supports** | Behavior Improvement Plan (created using a Functional Behavior Assessment) |

## Overview: structure of Behavior Intervention & the Child study team

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| **Structure** | **Outcomes** |
| Tiered Interventions and the Child Study Team (CST) process is designed to meet the needs of students experiencing challenges with behavior, attendance, and academics through the development of specific interventions and strategies tailored to meet the student needs within the general education setting. | **Tier I Support: Core School Culture**Strong core management and instruction coupled with school wide behavior systems ensures all scholars reach high academic achievement and high levels of character development. | * Align school on school-wide vision and implementation strategy for Common Picture
* Teach and reinforce scholar actions so that they become habits conducive to academic success within the first two months of school
* Monitor the development of teachers and use data to align time to priorities around coaching and development
* Launch and maintain inspiriting rituals and traditions and increase belonging and cultivate school community
* Partner with families in authentic ways that support each child’s academic and social experience in school
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| **Tier II Support: Grade Level Child Study Teams** Grade Level Teams are the foundation of the Child Study Team and the first line of intervention for students who are struggling. GLTs are also responsible for the overall culture of their grade and plan individual initiatives to build a positive culture and foster investment amongst students in their education. | * Evaluate the current progress of the scholar to determine areas of concern and generate hypotheses for root causes
* Determine appropriate next steps to address the scholar’s concern, including providing tier 2 academic interventions, starting a behavior support plan, supporting teachers in the implementation of tier 1 instruction and behavior systems, or refer the child the building level Child Study Team
* Review student-level data to determine whether the student is making adequate progress
* Review aggregated intervention group data to evaluate the efficacy of the interventions provided
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| **Tier III Support: Child Study Team**The Child Study Team is the problem-solving unit responsible for identifying, recommending and evaluating intensive interventions specifically designed to meet the individual needs of students who have not been successful in Tiers I and II. | * Identify scholars who are persistently and/or significantly struggling and identify appropriate tier 3 interventions
* Accept and review referrals from GLCSTs to determine if tier 3 interventions are needed
* Review student-level data for scholars currently receiving tier 3 interventions to determine whether the student is making adequate progress
* Review school level data, including attendance, grades, IA results, detention data, restraint and seclusion, removal, and suspensions to identify systemic gaps in the school’s tier 1 instruction and behavior supports
* Determine when a prompt referral to the IPE Team is needed when a scholar is suspended repeatedly, or demonstrating marginal behavior, attendance, or progress in school that is unsatisfactory or at the marginal level of acceptance
* Provide support to GLCSTs to strengthen tier 2 processes
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## Tier 2 Interventions

Tier 2 small group interventions are strategies and procedures put into place to support a group of students who require more intensive supports to build a new skill, build fluency in a skill, or encourage the application of an existing skill to a new situation.

Tier 2 Interventions:

* Provide opportunities for the students to have a more personal, positive connection with at least one additional adult to increase scholars’ success at school.
* Are designed for students who continue to engage in frequent low level challenging behavior despite effective school wide Tier 1 prevention efforts as well as students who could benefit from extra attention or support at school before they are in crisis.
* Provide standardized interventions that efficiently and effectively support students, yet do not require the time and resources needed to develop individualized plans.
* Allows for continuity and generalization of instruction, skill, and teacher feedback across settings within a school for students who need additional support

**When determining if Tier 2 Behavior Intervention is the best path forward, the following questions should be considered. If the answers to the questions are yes, the student could be a candidate for Tier 2 Behavior Support.**

* Are the behaviors occurring in environments where there is strong Tier 1 management?
* Is the student not responding to other management strategies?
* Is the behavior consistent over time, across environments, and with multiple adults?
* Has the behavior been persistent - occurring for several weeks?
* Is the behavior disparate from other students at the same age?
* Does the behavior interfere with the student’s or others’ learning?

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|  | Sample Targeted Tier 2 Interventions |
| Behavior Function  |  | Check-In Check-Out | Social Skills Groups | Behavior Support Plan (“BIP-lite”) | Behavior Contract and Daily Tracker  |
| Increased Opportunity for Positive Adult Attention |  |  |  |  |
| Increased Opportunities for Peer Attention  |  |  |  |  |
| Provides Increased Positive Reinforcement  |  |  |  |  |
| Addresses Specific Social Skills Instruction on how to Relate with Others  |  |  |  |  |
| Promotes and Encourages a Positive Adult Relationship  |  |  |  |  |
| Increases Number of Proactive Prompts for “What to Do” throughout the Day  |  |  |  |  |
| Increases Opportunities for Incentives/Positive Relationships  |  |  |  |  |
| Creates an Increased  Home/School Communication System  |  |  |  |  |
| Increases Consistency in Proactive Teacher Strategies across Environments  |  |  |  |  |

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|  | What is it?  | Why does it work?  | What are the critical features?  |
| Check-in Check-Out | * A student checks in with their CICO mentor at the start of the school day. The adult gives the student a point sheet that has the student’s goals. They talk briefly student, and the CICO mentor reminds the scholar what they need to focus to help the student work toward their goals. A check-in conversation is typically 5 minutes long.
* The student goes through their day with the point sheet, working on their goals and having each teacher check how well they did on each goal on their sheet
* At the end of the day, the student checks out with their CICO mentor – they talk briefly discussing what went well and what was difficult about the day. The student then takes their point sheet home to show and discuss with their parents
* The student returns the next morning, hands in their signed tracker.
* The CICO mentor enters their daily points into a progress tracker and the student receives a new sheet from their CICO mentor, starting the process over
* The student and his/her CICO mentor decide what the overall average point goal for each week. The weekly average point goals may be used along with a reward system where the student receives a reward at the end of the week for attaining their weekly average point level.
* If additional support is needed, additional CICO sessions can occur throughout the day (before/after challenging classes, at lunch, etc.)
 | Increase the structure of the student’s day * Consistent Prompts are provided throughout the day for correct behavior.
* System for linking student with at least one positive adult.

Student is proactively “set up for success”* First contact each morning is positive.
* “Blow-out” days are pre-empted.
* First contact each class period (or activity period) is positive, and sets up successful behavioral momentum.

Increased feedback* Feedback occurs more often.
* Feedback is tied to student behavior.
* Inappropriate behavior is less likely to be ignored or rewarded.
 | * Training for CICO mentor, teachers, student, and parents
* Daily CICO Card
* Morning and afternoon Meetings with scholar
* Home reporting progress
* Daily tracking of progress
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| Social Skills Groups | Small groups of students meet regularly (daily, weekly) with a SSG facilitator in a practice based skill building session to role play activities and practice common skills. To make the SSG successful, there are a three key components: * Establish the Need to Learn the Skill - Ask students why the skill might be important to them, Point out potential consequences of using or not using the skill, Use examples from television, movies, books, etc. in which characters use the skills, Identify situations in which the skill could come in handy for students.
* Identify Skill Components - To help students know what steps and in what order they must perform the behavior in question, analyze the steps of the social skill.
* Model the Skill, Practice the Skill, and Provide Feedback (Call the shots before doing the model & reference a visual anchor while narrating the steps)
 | Social skills group interventions address three primary objectives: promote skill acquisition, enhance the performance of existing skills, and facilitate the generalization of skills across settings. When students have common lagging skills, their skills can be developed through group learning experiences.  | * Meetings happen at a minimum 1-2/week.
* Individual goals around skill acquisition and use with reinforecment
* Tips sheets are provided for teachers and parents for how to cue/integrate the skills
 |
| Behavior Support Plan (BIP Lite)  | The purpose of a Behavior Support Plan (BSP) is to define target behaviors, identify specific behavior replacement behaviors, behavior intervention strategies, and data collection systems.  | A behavior support plan is the most intensive type of Tier 2 support. It contains many of the components of a Tier 3 BIP, but is owned and conducted by the Grade Level Team. It increases the structure of the student’s day and provides all adults with consistent prompts to use throughout the day for desired behavior. | * The date of the plan
* The target behavior
* Specific replacement behaviors
* Preventative strategies
* Relationship building strategies
* Positive reinforcement strategies
* X week Goal
* Progress monitoring strategy
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| Behavior Contract + Daily Tracker  | A behavior contract is an agreement between the child and teacher and often includes the student's parent/guardian(s). A behavior contract should indicate the appropriate consequence should the student neglect to behave according to the contract and identify a reinforcer to be used for successful compliance. A daily tracker should accompany the contract with daily parent communication.  | The contract should be written in collaboration with the student and teacher.  | * The time-bound goal
* How/when/from whom will the student receive the reinforcement
* What is the consequence should the student not adhere to the behavior described in the contract
* Define who and how the behavior will be monitored. (teacher initials, stickers, check mark system, etc.)
* A date for reviewing the contract and student progress.
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## What is the HIGH LEVEL process of Building a Behavior Improvement Plan (BIP)?

The CST determines what types of indirect information will be collected as part of the FBA process, develops a system for gathering, organizing, and documenting these results, uses information from the FBA to develop a working hypothesis about setting events, antecedent conditions, function of the problem behavior, and consequence conditions. To conduct effective behavioral observations, the team identifies the best methods of behavior recording. FBA results are then used to write a clear and measurable description of behaviors and develop a summary statement of conditions under which problems are and are not most likely to occur.

The team uses information from the FBA to develop and implement a BIP and provides professional development and coaching to ensure all school staff understand plan, their role in providing implementation of the BIP, and use appropriate techniques to promote generalization of skills across multiple settings. Systems for communicating with and involving families as well as to monitor fidelity are also developed. Ongoing progress monitoring determines the effectiveness of the plan as well as data points as to fade or modify the plan over time.

Behavior Improvement Plans are teaching tools to ensure the environment is conducive to learning and to teach the student what “to do instead.” The plan is developed as a means of coordinating intervention activities.

The Individuals with Disabilities Act (IDEA) requires the development of a BIP after conducting a FBA on two occasions:

1. When a student’s behavior results in a suspension of 10 days or a change of placement.
2. When a pattern of behavior impedes the learning of the student or another student.

## “At a Glance” Checklist for the FBA/BIP Process

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| **Tier 3: FBA/BIP “At a Glance” Checklist** |
| **Step 1: Conduct Functional Behavior Assessment** | **Step 2: Build a Behavior Improvement Plan** | **Step 3: Create Communication and Investment Strategies** | **Step 4: Implement the Plan and Ensure Fidelity** |
| Collect comprehensive data and information to develop a clear understanding of the relationship of events and circumstances that trigger and maintain problem behavior including setting events.  | Once behavior hypotheses statement is developed to summarize the data gathered from the functional assessment process, the team can develop a behavior support plan. | Once the plan is developed, a norming plan with teachers needs to be developed as well as investing in and communicating with parents. Begin to practice the replacement strategies with the student and share a student friendly version. | The effectiveness of the behavior support plan must be monitored. This monitoring includes measurement of changes in problem behavior and the achievement of new skills and lifestyle outcomes. |
| * **Contact the parent** to discuss the process and obtain permission to evaluate.
* **Define the challenging behavior.**
* **Prioritize**: From all of the challenging behaviors, determine which one or two to prioritize.  Consider which behaviors: disrupt the entire class, interfere with meaning instructional time, place people at risk or harm, or interfere with a teacher’s ability to manage an activity.
* **Conduct Classroom** Observations conducted by multiple observers
* Review student records and other data
* Complete a **Student Interview** (reinforce survey and student interest survey)
* Complete a **Parent Interview**
* Complete **Staff Interviews**
* **Create a summary and establish a baseline of student behavior and hypothesize the functions** **of** the student’s **problem** **behavior**.
 | * .**Prevention Strategies**: Remove or support as many setting events and triggering antecedents as possible.
* Make a plan for **direct instruction of replacement behavior**s: what, who, when, and how
* Outline a clear **Consequence Chain**.
* Create a **Positive Reinforcement System** (behavior chart).
* **Culture Plan:** Script out how teachers will proactively teach the advisory/homeroom about how to support student.
* **Classroom Culture Plan:** Script out how teachers will explain the student’s behavior to the rest of the class if/when target behaviors occur.
 | * Write an **investment letter** and invite parent meeting to the meeting.
* Hold a **parent meeting**. (Call the day before to remind parent about meeting.)
* Schedule **meetings with teachers** to make sure they understand what’s in it and role play some potential situations with the scholar so that teachers can practice the strategies embedded in the plan.
* Plan the **rollout conversation** with scholar for investment
* Schedule times for the **scholar to practice** the replacement behavior.
* Script a **reset conservation** with scholar when/if he is removed
* Determine the **target** for the challenging behavior and sketch an **aim line**.
* Determine who/when/where/how will work with the student to **monitor his/her progress**.
* Create a **teacher implementation checklist**.
 | * Create a **fidelity checklist**.
* Explain the plan and the **behavior chart** to the student. Be excited!
* **Practice key elements** of the plan.
* Determine how to ensure **quick wins** in the first two weeks.
* Determine what **data needs to be collected to monitor** the plan to see if it’s working.
* Determine how members of the **SLT will ensure how the plan is being followed**.
* Give it at least three weeks and schedule a **follow up meeting** to determine when will the team reconvene to ensure the plan is being followed and determine how to improve the plan.
* Once progress is being made, plan to slowly **de-scaffold** supports.
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## Assessing a Quality FBA

Use this coaching guide to Review the core components of a FBA to seek increased clarity

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| **Component of the Behavior Intervention Plan**  | **This part of the Plan is effective when** | **Questions/Prompts to Ask to Increase Clarity** |
| **Describe the challenging behavior** | A challenging behavior must be described clearly – it must be specific, observable, and measurable. It ensures that all stakeholders are observing and monitoring the progress of the same behavior. A well-written challenging definition should include three parts:* Conditions. The condition(s) under which the behavior is likely to occur
* Problem Description. A specific objective description of the behavior
* Contextual Information. Additional information that provides a context for estimating the degree to which the behavior presents a problem in the setting(s) in which it occurs
 | The challenging behavior is clearly understood by anyone reading the plan and the evidence.  | * Tell me exactly what this behavior looks like and what it sounds like. What does this behavior NOT look like?
* Describe when, where, and with whom each behavior is most likely and least likely to occur. Note WHY the behavior is more/less likely to occur under these conditions. (Time of day, Day of the week, Classroom location, Subject , Teacher, Presence of peers, Type of learning activity - mini lesson, GP, IP, small group, etc)
* Are there other challenging behaviors that precede this behavior?
* Do you know what need the scholar is attempting to communicate with his misbehavior?
* What self-regulatory or social skills has the student not yet learned that are keep the student from managing his/her behavior?
* How is teacher skill impacting the ability of the scholar to meet expectations?
* Does the scholar have the academic or behavioral skills to meet expectations? If not, what skills are lagging that need to be taught and practiced?
 |
| **Determine the function of the challenging behavior** | The function of a student’s behavior provides information about why the challenging behavior occurs – it tells us the purpose the behavior serves. Determining the reason for a behavior occurring is critical to developing the positive behavior that will replace it. You may have to change your hypothesis about behavioral function several times until you find one that makes the most sense. Sometimes an intervention eliminates a challenging behavior for a short time, but a new or equally inappropriate behavior may replace it. Sometimes behavior that has at one time served a useful, obvious purpose may become so well established that students continue to practice it long after it is needed.  | The behavior’s function(s) is clearly defined. Thinking of an FBA as a problem solving process is important to designing and adapting behavior support plans.  | * Why is the problem behavior happening?
* What does the student seem to "get" by using that behavior?
* What would make the problem behavior stop?
* If you allowed the student to leave or stop, would the behavior stop?
 |
| **Setting Events** | Setting events are known as slow triggers. Slow triggers happen a period of time before the interfering behavior – they may occur simultaneously to the antecedent or even hours/days before. They are conditions that set up the possibility that a behavior may occur, but do not set off the behavior at that very moment. They influence behavior by temporarily changing the value or effectiveness of reinforcers. When linked to a challenging behavior, setting events increase the likelihood that an antecedent will trigger behavior. | The setting events take into consideration trends that include environmental, psychological, or social events.  | * Where did the behavior occur?
* What tasks or activities was the student participating in?
* Who was interacting with the student?
* What external factors lead to the increased chance that the behavior will occur? (eg – when the scholar is tired, when the scholar spends Tuesday nights at his grandmother’s house, when there is a whole school celebratory assembly, etc)
 |
| **Antecedent*****The straw that breaks the camel’s back*** | Events happen right before the behavior occurs is the antecedent. It is considered to be a fast trigger. In a behavior stream, sometimes the antecedent to a second behavior is the consequence of the first behavior. | The most common triggers are present for nearly all challenging behaviors.  | * What are the specific events that occurred immediately prior to the behavior?
* What were the specific events that triggered the challenging behavior?
* What prompts (happens right before) the challenging behavior to occurs? Examples:
	+ Curricular variables (tasks that are too hard, too easy, unstructured)
	+ Social variables (small group, large group, presence of particular individuals)
 |
| **Consequence*****The payoff for the behavior*** | The consequence occurs after the behavior. Consequences act as reinforcers to the behavior and increase the likelihood that the behavior will occur in the future. Behavior that is reinforced is made stronger. Consequences maintain the behavior and make the behavior “work” for the student.  | The responses to a student’s behavior that are reinforcing are clearly identified.  | * What happened immediately after the behavior occurred?
* What did the teacher/peers do after the behavior occurred?
* What is the consequence (happens immediately after) that follows the challenging behavior? Examples:
	+ Curricular variables (tasks that are too hard, too easy, unstructured)
	+ Social variables (small group, large group, presence of particular individuals)
 |

## Assessing a Quality BIP

Use this coaching guide to Review the core components of a BIP to seek increased clarity

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| **Component of the Behavior Intervention Plan**  | **This part of the Plan is effective when** | **Questions/Prompts to Ask to Increase Clarity** |
| **Preventive Strategies** | In combination with a well-planned educational environment, proactive strategies prevent the challenging behavior from occurring. They are choreographed exaggerations of good teacher moves that are intentionally matched to the student, situational context, timing, environment, and cycle of escalation.  | There is a decreasing likelihood that setting events or triggers lead to a challenging behavior, because adult preventive moves are planned to stop a behavior before it begins.  | * What are moves that teachers can do that are low prep and high payoff?
* Can you:
* Neutralize the effect?
* Improve ease of engagement?
* Enhance interest?
* Embed more non-verbal cues?
* Offer more predictability?
* Reduce complexity?
* Pay more attention?
* Change how YOU interact?
 |
| **Replacement Behavior** | A replacement behavior is an appropriate behavior that takes the place of the interfering behavior. The goal of the replacement behavior is that when the student encounters the antecedent conditions, s/he will engage in replacement behavior in order to satisfy the same function as the challenging behavior. The basic guideline for a replacement behavior is teaching students to do what you want them to do rather than telling them what you don’t want to do. Replacement Behaviors should be:* Actionable
* Incompatible with the challenging behavior
* Matched to the same function as the challenging behavior
 | In order for a plan to create change, there must be a method to teach and practice the replacement behavior with the student (so that the scholar can learn the new skill and move from acquisition to fluency to generalization.) | * What is the desired behavior?
* Can s/he demonstrate this skill in any other setting?
* Can s/he demonstrate part of this skill? Can the skill be taught?
* What replacement behavior can be put into place that:
* Meets the same function as the challenging behavior
* Is incompatible with the challenging behavior
* Is actionable and observable
* Is the skill easily acknowledged by the teacher (in order to reinforce it?)
* Who will teach the replacement behavior?
* When/where will the replacement behavior be taught and practiced?
* How will the behavior be practiced?
* How will the reinforcement behavior be signaled?
* When will teachers practice how to signal the replacement behavior?
* When will teachers practice how to reinforce the replacement behavior?
* When will parents learn the replacement behavior?
 |
| **Proactive Relationship Building** | The teacher-student relationship is one of the top influences on student achievement. Relationships matter…and they matter the most of the scholars who struggle the most and it is skill that needs to be acquired and practiced. Establishing and cultivating a strong teacher-student relationship is not a panacea for scholars who struggle the most, but it is key in ensuring that students perceive that the classroom is led by a fair, empathetic, and trustworthy leader - the teacher. | There is a multi-step plan in place to actively build the student teacher relationship.  | * Who is the building does the scholar have the best relationship?
* Is there a plan for teachers to spend time with the scholar outside of class?
* What does the positive/corrective ratio look like for the scholar? In comparison to his/her peers?
* Is there a plan to strive for at least one positive public verbal interaction each class period?
* Are there micro conversation plans in place?
 |
| **Planning for Reinforcement**  | Differential reinforcement interventions are highly structured versions of "catching students doing the right thing" and administering positive reinforcement. Reinforcement should occur when a replacement behavior is used effectively. With differential reinforcement, the student is reinforced for exhibiting progressively lower rates of the undesirable behavior with a decreasing amount of reinforcement over time. | The reinforcement chart is simple and as predictable processes that rewards the student for desired behavior. | * Create a reinforcement chart (STAR) and visual cues for the scholar. Who will fill out the chart?
* At what intervals will the chart be filled out? (15 minutes? 60 minutes?)
* Will all intervals be worth the same? (i.e. transitions or problem periods like the period after lunch can be worth more)
* Where will the sheet be kept? (i.e. – I n a plastic cover with the student, on the teacher’s clipboard, on the wall, etc.)
* How can the student remind a teacher to fill out the chart? What is the process?
* Who will check-in with the student about their chart progress throughout the day? At what times will those check-ins happen?
* Does the student need “turnaround” points for strong re-entry to class if removed?
* What is the student’s initial goal (# of stars/points)? Make sure it’s possible for the student to be successful the first week!
* How will the goal change over time? What data will the team need to collect to change the goal?
* Will the chart be sent home each night? What’s the procedure for getting it back?
* When does the student get reinforcement? What does the reinforcement look like?
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#### Behavior Intervention Data

Guidelines for Using and Interpreting Student Behavior Intervention Data – Establishing a Baseline, Crafting a Goal, and Progress Monitoring

Frequent progress monitoring enables goal-oriented data collection to inform instruction and measure student growth. It is powerful because all stakeholders know what is expected, where the student is starting, and the amount of progress being made. A basic indicator of a successful behavioral intervention is a reduction in the challenging behavior and/or an increase in desired replacement behaviors. To determine if progress is being made, the team should consider the following questions:

* Compared to the goal projected at the time of intervention planning, is the student’s progress toward the goal what the team expected?
* Given the current rate of progress, will a sufficient level be attained within a reasonable period of time?
* As a result of receiving the intervention, is the student catching up to peers or another identified standard of expected performance?

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| **Steps**  | **What does this tell me?** **Why is it Important?**  | **Additional Technical Information**  |
| Step 1: Establish a Baseline | A baseline provides you a starting point that later tells you if an intervention is working or isn’t working. Without objective measures, behavior change may be too gradual to determine. A baseline provides you a starting point that later tells you if an intervention is working or isn’t working so that the progress can be easily tracked. Depending on what you are looking to measure, the baseline data is grounded in either outcome or event data  | A minimum of 3-5 data-points are needed prior to starting the intervention to calculate the student’s baseline, or starting point, in the skill or behavior that is being targeted for intervention. In calculating baseline, the team has the option of selecting the median data-point, or calculating the mean baseline performance.The collection method should match data collection method in the goal. So, if you are using a tracker to measure growth, you should pilot the tracker while you are finishing up the FBA so you can have some (a few days, week) baseline data before the interventions start.  |
| Step 2: Set a Goal  | A goal demonstrates a commitment to improvement that is ambitious and achievable and indicates the anticipated progress that a student will make by a specified time.Goals help determine the level of student achievement believed possible when specific strategies identified in improvement plan have been implemented.  | Components of a strong goal:* Behavior
* Length of data collection
* Method of measurement
* Terminal date of review

The length of time reserved for the intervention should be sufficient to allow enough data to be collected to clearly demonstrate whether that intervention was successful. Typically, a behavior intervention should last for four to eight weeks.  |
| Step 2a: Determine the Aim Line  | An aim line shows the projected behavior or skill measure at a fixed point in intervention to assess the student’s progress to help determine if modifying the intervention is necessary. An aim line represents the expected rate of student progress over time. | The aim line is the line that connects the baseline data point to the goal. The slope of the aim line indicates the expected progress a student should make over smaller increments of time (day, week, etc.)  |
| Step 2b: Determine Small Wins and Plan to Celebrate. | Quick wins are small victories and notables successes that are attainable in 1 to 2 weeks. Quick wins are designed to create an atmosphere of change and create momentum, confidence, hope, and commitment for all stakeholders. | Whenever a behavior intervention is launched, it is essential that quick wins are planned for, achieved, and celebrated often throughout the process, but most importantly during the first two weeks.  |
| Step 3: Measure Student Progress to inform Data-Driven Decisions  | Progress Monitoring tells you if a student’s progress toward the goal what the team expected and given the current rate of progress, if a sufficient level of mastery be attained within a reasonable period of time. In comparison to the baseline, progress monitoring tells you if a behavior plan is effective and if the student catching up to peers or another identified standard of expected performance.  | Typically, decisions about student progress are based on at least 6-8 data points. When launching a new intervention, give it at least two to three weeks to see if it is working before changing course.  |

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| Assessing Progress | After two to three weeks of the intervention: * If the student trend line equals the aim line, make no change to the intervention
* If the student trend line is steeper than the aim line, increase the goal OR begin to implement the de-scaffolding plan. Continue to monitor progress.
* If the student trend line is flatter than the aim line, determine if the intervention is being implemented as intended.
* If No: Employ strategies in increase the implementation integrity and fidelity.
* If Yes: Increase the intensity of the current intervention for a short period of time and re-assess impact after one week.
* If the data improves, continue with the intervention.
* If the data does not improve, ask the following questions to determine how to revise/intensify the plan:
* Was challenging behavior identified correctly?
* Is the intervention matched to the function?
* Are there other functions to consider?
* Is the reinforcement still reinforcing to the student?
* Is skill building with the student happening regularly?
 |

# Child Study Team Procedures

The Child Study Team is a decision-making mechanism which incorporates collaborative problem solving and the tiered intervention model in order to address barriers to learning for students with poor attendance, discipline problems, academic challenges and health related issues through the development of specific interventions and strategies tailored to meet the student needs within the general education setting.

The CST seeks to promote greater participation and progress in the general education curriculum for all students and utilizes the collective expertise of personnel from across the school to analyze student-level data, initiate interventions, and monitor progress. The Child Study Team process plays an important role in creating a robust and effective Response to Intervention (RTI) system to serve as the primary apparatus for determining appropriate interventions and ensuring accountability.

At Achievement First, we believe that providing early and robust interventions, that are scientifically-based, can help stem the over-identification of students in special education. The RTI framework involves providing a high quality curriculum and instruction in the general education classroom, as well as increasing systematic tiers of support within the general classrooms for the scholars who need the most support.

We rely on regular progress monitoring and an active Child Study Team to determine which students may 1) require more intense interventions within the RTI framework and/or 2) should be referred to the IEP Team for an initial evaluation to determine eligibility for special education and related services.

To be clear, we rely on the RTI process to provide early interventions and identify scholars who should be evaluated for special education and related services; however, the lack of RTI data should never be used as the reason not to refer to the IEP Team when scholars are persistently struggling.

## Roles and ResponsibilitIes

##### **Child STudy Team Owner**

* Monitors the data based decision rules (“triggers”) for referring students to the GLCST/CST
* Provides school wide training on specialized behavioral assessment strategies, interventions, and supports
* Facilitates the weekly alignment meetings with Grade Level Leaders
* Observes Grade Level Child Study Team meetings and provide feedback
* Facilitates the Child Study Team (i.e. build the agenda, share with stakeholders, compile notes, etc.)
* Ensures completion of all CST action items
* Communicates CST progress and next steps to the larger school team
* Provides training and support to school personnel, students, and families regarding intervention program(s)
* Reviews intervention programs, monitor individual student progress, and review new referrals
* Coordinates school-wide implementation of the overall Tier 2 and 3 practices and systems
* Ensures the GLCST/CST Tracker is up-to-date
* Ensures that the CST reviews student’s progress monitoring data and adjusts/ descaffolds as necessary
* Collaborates with the SSL when the CST decides to refer a student for evaluation

###### **Grade Level Leader – GLCST**

* Participates in the alignment meeting with the CST owner
* Facilitates the GLCST meeting ( i.e. build the agenda, share with stakeholders, compile notes, etc.)
* Ensures completion of all GLCST action items
* Communicates GLCST progress and next steps to the grade level team school team
* Communicates GLCST progress and next steps to the school team
* Reviews intervention programs, monitor individual student progress, and review new referrals for all students in Tier 2
* Ensures the GLCST/CST Tracker is up-to-date
* In collaboration with the CST owner, review tier 1 supports for the grade level and support individual teachers struggling with the implementation of tier 1 supports.
* Collaborates with the CST owner when the GLCST decides to refer a student to the CST

## Tier 2 - Grade Level Child Study Team Meeting

The Grade Level Child Study Team is the first line of intervention for students who are struggling in the general education curriculum.

Through collaborative problem solving, grade level teams will identify root problem behaviors and common prevention strategies teachers can use in their everyday practice for student who need additional supports. By increasing the school-wide capacity to identify and analyze challenging behaviors, develop a strong support plans, communicate and invest key stakeholders in executing plans with fidelity, through the GLCST process, the team will be able to collectively support scholars who struggle to meet the rigorous school-wide expectations for behavioral outcomes.

Each Grade Level Team typically has 3-8 students on the “active docket.”

##### Purpose of the Grade Level Team:

* Evaluate the current progress of the scholar to determine areas of concern and generate hypotheses for root causes
* Determine appropriate next steps to address the scholar’s concern, including providing tier 2 academic interventions, starting a behavior support plan, supporting teachers in the implementation of tier 1 instruction and behavior systems, or refer the child the building level Child Study Team
* Review student-level data (e.g., attendance data; grades; IA data; student paycheck and detention data in Kickboard; discipline data) to determine whether the student is making adequate progress
* Review aggregated intervention group data to evaluate the efficacy of the interventions provided

##### Grade Level Child study Team Process:

* The GLCST is facilitated by the Grade Level Leader.
* The GLL and is responsible for coaching teachers through and managing the Tier 2 GLT Process in partnership with the owner of the CST.
* It is recommended that the team meet for at least 30 - 45 minutes weekly to collaboratively problem solve to and develop supports for the students who are struggling most with behavior, academics, and attendance so that all students can meet high expectations.

While the GLCST focuses on the use of tier 2 interventions to respond to student need, the Grade Level Leader (GLL) in partnership with the CST owner should also review the data to flag gaps in the school’s tier 1 supports. Strong tier 1 academic and behavior interventions should be effective in supporting at least 85% of our student population. By identifying gaps and strengthening tier 1 systems, the GLCST can work to minimize the number of students requiring additional interventions.

#### Members of the GLCST

At a minimum, the GLCST will be composed of:

* The Grade Level Leader
* The special education teacher(s) assigned to the grade level
* Grade level general education teachera
* Additional school personnel, such as the school social worker or an additional general education teacher may be added as needed.
* The team may also determine to incorporate other teachers or parent into relevant discussions.

#### Alignment meeting (GLL + cST owner meeting):

Prior to the GLCST Meeting, the Grade Level Leader and CST Owner should meet for 15 -20 minutes to:

* Review Data and Grade Level Trends
* Review Progress Data for students in Tiered Intervention
* Review all Referrals to the GLCST and ensure they are logged in the GLCST/CST Tracker
* Check-in on Progress for open next steps from prior GLCST meetings
* Determine which students to prioritize next for Tier 2 Interventions
* Review the Agenda for the GLT Meeting

#### GLCST Meeting structure and data procedures:

It is recommended that the GLCST should meet weekly for 30-45, but at a minimum bi-weekly. At each meeting, one team member will be the designated note taker (This can be either a permanent or rotating responsibility). Each standing meeting will have at least the following four agenda items:

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| --- | --- |
| Review high level grade level data  | The GLCST will review student level data for the grade (eg - attendance data; grades; discipline data) for all students in the grade to identify trends.  |
| Review new referrals to GLCST and determine next steps | The GLCST will review student data, and teacher/parent input to understand the current performance and needs of a scholar. Then the team will discuss next steps to address the scholar’s needs. Next steps may include:* Supporting a general education teacher with tier 1 instructions and/or behavior management
* Putting into place a Tier 2 Intervention
 |
| Review action plan and progress monitoring data of students currently receiving tier 2 interventions and determine next steps | At a minimum of **once a month,** the GLCST shall review the current data for each student receiving tier 2 interventions to assess the scholar’s current performance, in light of previous performance to determine whether the scholar has made adequate growth. Additionally, the GLCST will use the Behavior Intervention triggers to determine whether the scholar has met any triggers that call for increased interventions and/or a referral to an IEP Team.  |
| Review the programmatic efficacy of tier 2 intervention efforts | In addition to reviewing student-level data, the GLCST should regularly review aggregated intervention data for the interventions provided at this grade level. As part of this process, the team will analyze data trends based on intervention groups to identify which groups, if any, are making insufficient progress. While GLCST wants to provide slowly intensifying interventions to those students making insufficient progress, they must simultaneously ensure the interventions provided are effective and conducted with fidelity to protect against the improper identification of students.  |

## Tier 3 - Child Study Team

The building level CST is a secondary response team to address the needs of scholars needing the most significant supports.

##### Purpose of the Child Study Team:

* Identify scholars who are persistently and/or significantly struggling and identify appropriate tier 3 interventions
* Accept and review referrals from GLCSTs to determine if tier 3 interventions are needed
* Review student-level data for scholars currently receiving tier 3 interventions to determine whether the student is making adequate progress
* Review school level data, including attendance, grades, IA results, detention data, restraint and seclusion, removal, and suspensions to identify systemic gaps in the school’s tier 1 instruction and behavior supports
* Determine when a prompt referral to the IEP Team is needed when a scholar is suspended repeatedly, or demonstrating marginal behavior, attendance, or progress in school that is unsatisfactory or at the marginal level of acceptance
* Provide support to GLCSTs to strengthen Tier 2 processes

##### Child Study Team Process:

* The CST is facilitated by the owner of Behavior Intervention who is a member of the School Leadership Team – typically the Dean of Students or Special Services Leader.
* It is recommended that the team meet for at least 30 - 45 minutes every week to collaboratively problem solve to and develop supports for the students who are struggling most with behavior, academics, and attendance so that all students can meet high expectations.

#### Members of the CST:

At a minimum, the CST will be composed of:

* The principal
* The dean of students
* The academic deans
* The special services leader
* The social worker
* The team may also determine to incorporate additional teachers or parent into relevant discussions.

#### Referral Process:

If a student is not making adequate progress in with the GLCST, a student should be referred to the CST. This will primarily happen if either 1) the student has shown persistent inadequate progress with tier 2 interventions, or 2) the student level data reveals the student has met one of the school’s trigger for referral to CST.

Additionally, at the point of the GLCST initial referral, the CST owner and GLL may determine to refer a child directly to the CST. This will occur when the student data reveals that the student has already met the school’s trigger for referral to CST, or the student’s data reveals a persistent or acute problem.

#### Meeting structure and data procedures:

The CST should meet at minimum weekly. At each meeting, one team member will be the designated note taker (This can be either a permanent or rotating responsibility). Each standing meeting will have at least the following four agenda items.

|  |  |
| --- | --- |
| Review high level school wide data  | The CST will review student level data for the grade (eg - attendance data; grades; discipline data) for all students to identify trends.  |
| Review new referrals to the CST and determine next steps | During this process, the CST will review the referral form, previously attempted interventions, and student data (see below), as well as teacher and parent input, to understand the current performance and needs of a scholar. Then the team will discuss next steps to address the scholar’s needs. Next steps may include:* Refer the scholar to the GLCST if current data does not support tier 3 interventions
* Beginning tier 3 academic interventions for reading and/or math
* Conduction a functional behavior assessment and develop a behavior intervention plan
* Referring the scholar to the IEP Team (if current data warrants it)

  |
| Review action plan and progress monitoring data of students currently receiving tier 3 interventions and determine next steps | At a minimum of **every other week,** the CST shall review the current data for each student receiving tier 3 interventions. The team will review the scholar’s current performance, in light of previous performance to determine whether the scholar has made adequate growth.  |
| Review the programmatic efficacy of tier 3 intervention efforts | In addition to reviewing student-level data, the CST should regularly review aggregated intervention data for the interventions provided. As part of this process, the team will analyze data trends based on intervention groups to identify which groups, if any, are making insufficient progress. While the CST wants to provide slowly intensifying interventions to those students making insufficient progress, they must simultaneously ensure the interventions provided are effective and conducted with fidelity to protect against the improper identification of students.  |
| Review of school level data to determine systemic gaps in tier 1 instruction and behavior supports | In addition to reviewing the individual student data, the CST will monitor school level data to look for systemic gaps in the tier 1 and 2 supports provided. The team will then identify appropriate next steps such as changes/additional accountability to structures and procedures and will address gaps through training, coaching, and other supports.  |

## High Level CST Agenda

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| **Suggested Activities to Conduct a FBA & BIP Aligned to Meetings**  |
| **Meeting #1: FBA Alignment** * Review Tier 1 and Tier 2 Interventions previously attempted
* Using the 13 question template, preliminarily generate a challenging behavior statement with antecedents, and consequences to help ground the observation
* Determine details for completing observations by next meeting
* Schedule short “norming” observation by X date
* Determine who observes and in what settings – schedule observations for where the challenging behavior does and does not occur
* Assign team member to review student records by X date
* Assign team member to interview teachers, parents, student by X date
* Assign team member to summarize findings from interviews and record review by X date
* Assign point person to summarize all observation data into FBA Observation tracker and complete FBA summary by next meeting
 |
| **Between Meetings: FBA Data Collection** * File Review
* Interview – Student
* Interview – Family
* Interview – Staff
* Direct Observations
* Other
 |
| **Meeting #2: FBA Summary Review & BIP Development** * Review observation summaries in FBA Observation tracker and FBA summary
* Review findings from record review and interview information
* Confirm/revise the challenging behavior statement with antecedents, and consequences
* Determine if additional observations are needed
* Begin crafting the BIP – brainstorming replacement behaviors, preventive teacher moves, response to misbehavior
* Determine who will create the draft of the BIP by X date
* Team decides to review draft plan prior to next meeting
 |
|
| **Meeting #3: BIP Review (could happen via email if necessary)** * Team provides feedback of the final BIP (which includes the roll out plan, monitoring/evaluation plan, fidelity of implementation plan, and plan to descaffold)
 |
| **Meeting #4: Check-in on BIP Implementation & Progress** * Review the BIP Implementation plan – did everyone on the CST implement with fidelity?
* Review first round of monitoring data – based on the data, the team will determine whether to: increase practice with adults, increase practice with student, continue the plan, modify, descaffold, or intensify supports
 |

**Weekly Repeatedly-Do CST Procedures**

* Review student-level data for scholars currently receiving tier 3 interventions to determine whether students are making adequate progress
* Review data for scholars receiving Tier 2 intervention to determine what additional supports are needed to strengthen tier 2 processes at the Grade Level
* Review school level data, (including attendance, grades, detention data, restraint and seclusion, removal, and suspensions, etc ) to identify systemic gaps in the school’s tier 1 instruction and behavior supports

#### Parent Communication:

Parent involvement is essential for supporting our scholars who struggle the most. We believe deeply that parents are a valuable part of a holistic support plan. We strongly encourage schools to involve parents as much as possible. However, at a minimum, parent communication is required at the following points during the CST and GLCST process:

* Initial referral to the GLCST or CST (the contacting staff should conduct a parent interview or invite the parent to participate in the portion of the meeting which concerns their child)
* Commencement of tier 2 or tier 3 interventions
* Alteration to current tier 2 or tier 3 interventions
* Referral to the CST
* Referral to the IEP Team
* Exiting from tier 2 or tier 3 intervention

#### Referral to IEP Team

The RTI process, coupled with the GLCST and CST, are intended to provide early and proactive interventions to avoid unnecessary referrals to special education. This being said, at no point should a student’s referral to the IEP Team and consideration for evaluation be held up by the GLCST and CST process. At any time, our partner districts, the school, or parents may refer a student suspected of having a disability to an IEP Team to determine whether an initial evaluation to determine eligibility for special education services should be conducted.

#### Note for Connecticut Schools

Connecticut state special education requirements also allow for physicians, clinic workers, and social workers, with parent consent, to refer a student to a PPT to determine his/her eligibility for special education and related services. Parents have the right to refer their child to a PPT at any time they suspect their child may have a disability. Parents may complete a referral form or submit their concerns in writing. If a parent makes a referral, a PPT should be arranged with the district, and the parent should be notified at least 5 days prior to the PPT.

Additionally, Connecticut state special education requirements mandate that schools promptly refer to a PPT any student who has been suspended repeatedly, has unacceptable attendance, or who has made unsatisfactory behavioral or academic progress. Parents are to receive written notification of a referral no later than 5 school days prior after the date of the referral.

To ensure compliance with this state requirement, schools are encouraged to set clear “triggers” for when students are deemed to have been suspended repeatedly; have unacceptable attendance; or demonstrate unsatisfactory or a marginal level of acceptable progress in academics or behavior. These triggers should also include incremental triggers to determine when a student should be referred to the GLCST and CST.

A referral to PPT does not automatically lead to an evaluation for special education. The role of the PPT during the initial meeting is to review current student data and performance to determine the appropriate next steps. A PPT may determine to refer a student to either the GLCST or CST based on current student data. If the PPT determines an initial evaluation is warranted, the parent must consent to the initial evaluation and to initial special education services if the student is found eligible.

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## Crisis Intervention Procedures: New York

Achievement First Schools work hard to identify behaviors and plan interventions for children struggling with emotional regulation, behavior, and emotional crisis. The primary intervention for unsafe behaviors is prevention. There are times, when a child’s emotional state or behavior requires immediate assessment and crisis focused intervention to maintain the safety of the student, classroom, staff, and/or school. The response required may vary based on the child’s age, mental health, developmental, and educational needs. This purpose of this document is to provide guidance for crisis situations.

**Communicate with parents.** Can communicate need for additional support. 911 services can be offered or referrals to outside providers. There are **school –based consequences** and **safety plan**.

**Child de-escalates**. Child reflective of behavior and shows remorse, insight

Student **assessed** by social worker/ counselor

Student in crisis and unsafe while in **school**

**Parents /Guardians contacted immediately** and informed of child’s state. Parent offered Crisis intervention services (911). In some circumstances parents may want to start with their child’s pediatrician. If this is done, get a signed release for the pediatrician. Have parents sign a [Refusal of Emergency Services Form](https://afnet.achievementfirst.org/special%20education/Shared%20Documents/Forms/AllItems.aspx?RootFolder=%2fSpecial%20Education%2fShared%20Documents%2fAF%20Crisis%20Intervention&FolderCTID=&View=%7b94C1B675%2d8ADA%2d4109%2dB4BB%2d4E184505C2F7%7d) if declined. In some cases when the child is at imminent risk of injury to self or others, Administration for Children’s Services (ACS) will be contacted if services are declined.

**Child remains in agitated state**, does not show insight, unsafe behavior continues

1. Call 911, give age, name and brief description of what is happening today and **request an ambulance** for transport to the ER.
2. You will be transferred to dispatch and repeat need for ambulance.
3. Print out 3 copies of contact info for child & address.
4. Insurance will be billed for transport and evaluation (this may be an issue for a child who does not have insurance as the parents will receive a bill).
5. A staff member or parent (if they have arrived) will need to go with child.
6. Focus on today’s emergency – why does the child need hospitalization today? Stress safety and risk issues. In safety issues or imminent danger, parents do not have to give consent (although it is advised to attempt to get it).
7. Staff should stay at hospital until they speak to the social worker or resident to explain safety issues, can provide back ground information but stay focused on today’s crisis. It is helpful to use clinical language to describe behaviors.

**What to Expect:** Students in Brooklyn are typically taken to Kings’s County Hospital.

The child will be assessed to determine his/her level of crisis. Unless the child is admitted to the psychiatric unit, the child **will not** receive a medication evaluation or referrals to outsider providers directly from the ER.

**911**

## Crisis Intervention Procedures: Connecticut

Achievement First Schools work hard to identify behaviors and plan interventions for children struggling with emotional regulation, behavior, and emotional crisis. The primary intervention for unsafe behaviors is prevention. There are times, when a child’s emotional state or behavior requires immediate assessment and crisis focused intervention to maintain the safety of the student, classroom, staff, and/or school. The response required may vary based on the child’s age, mental health, developmental, and educational needs. This purpose of this document is to provide guidance for crisis situations.

**Communicate with parents.** Can communicate need for additional support. 211 services can be offered or referrals to outside providers. There are **school –based consequences** and **safety plan**.

**Child de-escalates**. Child reflective of behavior and shows remorse, insight

Student **assessed** by social worker/ counselor

Student in crisis and unsafe while in **school**

1. Call 211, give age, name and brief description of what is happening today requiring services.
2. You will be transferred to local agency for triage and clinician will be assigned.
3. Parent needs to come to school for evaluation.
4. Response can be about 60 minutes and is on-site.
5. Parents must give consent prior to contacting 211.
6. Free service, although they may attempt to bill some insurances.

**What to Expect:**  a rapid safety assessment, referrals to outside providers, crisis intervention services (short-term), safety planning and contracting, can recommend hospitalization if indicated.

**Parents /Guardians contacted immediately** and informed of child’s state. Parent offered Crisis intervention services (211, 911). In some circumstances parents may want to start with their child’s pediatrician. If this is done, get a signed release for the pediatrician. Have parents sign a [Refusal of Emergency Services Form](https://afnet.achievementfirst.org/special%20education/Shared%20Documents/Forms/AllItems.aspx?RootFolder=%2fSpecial%20Education%2fShared%20Documents%2fAF%20Crisis%20Intervention&FolderCTID=&View=%7b94C1B675%2d8ADA%2d4109%2dB4BB%2d4E184505C2F7%7d) if declined. In some cases when the child is at imminent risk of injury to self or others, Department of Children and Family (DCF) will be contacted if services are declined.

**211**

**911**

**Child remains in agitated state**, does not show insight, unsafe behavior continues

1. Call 911, give age, name and brief description of what is happening today and **request an ambulance** for transport to the ER.
2. You will be transferred to dispatch and repeat need for ambulance.
3. Print out 3 face sheets with contact info for child & address.
4. Insurance will be billed for transport and evaluation (this may be an issue for a child who does not have insurance as the parents will receive a bill).
5. A staff member will need to go with child.
6. Focus on today’s emergency – why does the child need hospitalization today? Stress safety and risk issues. In safety issues or imminent danger, parents do not have to give consent (although it is advised to attempt to get it).
7. Staff should stay at hospital until they speak to the social worker or resident to explain safety issues, can provide back ground information but stay focused on today’s crisis. It is helpful to use clinical language to describe behaviors.

**What to Expect:** typically it will be several hours in the ER, child will receive a brief, emergency evaluation, and possible admission to a children’s psychiatric unit. The child **will not** receive a medication evaluation or referrals to outsider providers directly from the ER.

## Connecticut Mobile Crisis Guide

Mobile Crisis should be called when a scholar is endangering their safety or the safety of other people. We must always call 211 before trying 911 unless it is an extreme situation. Mobile Crisis is a hands off organization and does not use physical management techniques (for example, a scholar has brought a gun into school or school staff are considering physical management to restrain the scholar).

Mental health crisis intervention services are provided by teams of mental health workers (psychiatrists, RN's, MSW's, psychologists, psychiatric technicians) who intervene in situations where an individual's mental or emotional condition results in behavior which constitutes an imminent danger to him or herself or to another. Mobile crisis teams visit people in their homes or community sites, and others meet clients in clinics or hospital emergency rooms. Psychiatric emergency rooms and mental health facilities can provide crisis services to people in crisis who can travel or get help with transportation to a facility.

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| **When to Call:** | **When Not to Call:** |
| * Harm likely to occur to scholar or others if there isn’t immediate assistance
* Scholar is in distress and uncommunicative
* Scholar is depressed and you are concerned
* Scholar threatens suicide
* Threats of violence
* Scholar is victimized or traumatized
* Poses suicidal risk
* School has already called the police
* Scholar is in crisis
 | * No risk of immediate harm to scholar or others and you can wait for a routine referral
* For routine referral or information
* When scholar needs immediate medical attention (overdosed, currently intoxicated, seriously injured, etc.)
* When immediate police intervention is required (weapons, serious assault)
 |

Please remember that parents must a) be informed and b) give consent before a school can call 211.

If a parent refuses or if the school cannot get in touch with anyone from the scholar’s emergency list, proceed immediately to calling 911 when there is immediate risk to either scholar’s safety or safety of others.

We should have parental consent prior to calling 211 (prior signed agreement or verbal consent on phone.)

We should always call a parent first for background information and to let them know we will be calling 211.

If Mobile Crisis strongly recommends therapy and a parent continues to refuse, then a school and Mobile Crisis can file with DCF for neglect.