

**BEHAVIOURAL SUPPORT PLAN**

Name:	Date of Birth:
Parent or Guardian:	Team Contact:
Home Address:	Child Care Address:
Phone:	Phone:
	Fax: E-mail:

**TEAM MEMBERS**

**Relevant History:** (e.g., social factors, health conditions, medications, previous treatments):

List persons to be involved in child's program planning:	Role	Relationship to Child
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

# SUPPORTED INCLUSION

CITY OF TORONTO | EARLY CHILDHOOD SERVICES TEAM: COMMUNITY LIVING TORONTO | SURREY PLACE CENTRE

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## 1. Description of the Behaviour of Concern:

*Where and when does the behaviour occur?*

## 2. The Function of the Behaviour:

*Why does the behaviour occur? What is the child's motivation for the behaviour? List the any assessments conducted, and the general conclusions (i.e., what is motivating this behaviour).*

## 3. Previous Behaviour Management Strategies:

*What interventions have been tried? What has worked in the past?*

## 4. Setting Behaviour Goals:

*What more appropriate behaviour(s) should the child learn to replace the current inappropriate behaviour(s)?*

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## 5. Prevention Strategies- restructuring antecedents:

*Are short-term prevention procedures needed? Be sure to include **who is responsible** for each procedure.*

At the Child Care Centre:

At Home:

## 6. Teaching New Behaviours:

*What is the new, more appropriate behaviour that is going to be taught? How will this alternative appropriate behaviour help the child to get what they want?*

**7. Consequence Plan:**

*If problem behaviour occurs again, what will the response be?*

At the Child Care Centre:

At Home:

Crisis Plan (if needed):

**8. Description of Success:**

*What criteria will be used to evaluate progress? What data will be collected?  
How will it be recorded, and by whom?*

**9. Follow-up Activities:**

*When will this plan be implemented? If further instruction of staff is needed, when will it occur?*

**10. Communication Regarding the Plan:**

*How will this plan be communicated to all who need to know?*

**11. Monitoring the Child's Progress:**

*Who is responsible to ensure the above items are in place/completed? When will the team review the plan?*