

Pulaski County Intervention System (PCIS)

Pulaski County Preschool/Lake Cumberland Head Start



The Pulaski County School System will ensure a quality, comprehensive education for each student.

2016-2017

Table of Contents

I.	Introduction	.....	3
II.	Preschool Enrollment Requirements	.....	4
III.	Head Start Enrollment Requirements	.....	5
IV.	Multi-tiered Delivery Model	.....	5
V.	Problem Solving Process Model	.....	9
VI.	Appendices		
	1. Information for Parents		
	a. Child Development Skills	.....	12
	b. Tips for Parents	.....	18
	c. Screening Results Form	.....	19
	2. Forms		
	a. PCIS Preschool Summary of Data and Intervention Form	.....	20
	b. Parent Permission	.....	32
	c. Data Monitoring Forms	.....	33
	3. PBIS Manual	.....	42

Introduction

On December 3, 2004, Congress reauthorized the Individuals with Disabilities Education Improvement Act (IDEA 2004). The language that Congress uses in IDEA 2004 and No Child Left Behind (NCLB 2001) stresses the use of professionally sound interventions and instruction based on defensible research, as well as the delivery of effective academic and behavior programs to improve student performance. Congress believes that as a result, fewer children will require special education services. Provisions of IDEA 2004 allow school districts to use scientific, research-based interventions as an alternative method for identifying students with specific learning disabilities (SLD). This process is generally referred to as Response to Intervention (RTI).

"Response to Intervention (RTI) integrates assessment and intervention within a multi-level prevention system to maximize student achievement and to reduce behavior problems. With RTI, schools identify students at risk for poor learning outcomes, monitor student progress, provide evidence-based interventions and adjust the intensity and nature of those interventions depending on a student's responsiveness, and identify students with learning disabilities" (National Center on Response to Intervention).

The components of RTI serve as a framework in the design of the Pulaski County Intervention System (PCIS):

- Universal screening
- Measurable definition of problem area
- Baseline data prior to an intervention
- Establishment of a written plan detailing accountability
- Progress monitoring
- Comparison of pre-intervention data to post-intervention data for efficacy
- Multi-tiered service delivery
- Data-based decision making
- Parent involvement
- Fidelity of implementation
- Professional development

Information regarding child find requirements and referral system from the Kentucky Administrative Regulations revised August 26, 2008.

707 KAR 1:300

Section 1. Child Find Requirements. (1) An LEA shall have in effect policies and procedures that plan and implement a child find system to locate, identify, and

evaluate each child: (a) Whose age is three (3) to twenty-one (21); (b) Who resides in a home, facility, or residence within the LEA's geographical boundaries, including children with disabilities who attend private schools located within the LEA boundaries, children who are highly mobile such as migrant children, homeless children as described in 704 KAR 7:090, children who are wards of the state or are in state custody, and students who are advancing grade to grade resulting from passing a grade but who still may have a disability; (c) Who is either in or out of school; and (d) Who may need special education and related services.

(2) For preschool age children with disabilities, an LEA must ensure a smooth and effective transition from the early intervention program to preschool.

(3) Each LEA shall participate in transition planning conferences for children with disabilities served by early intervention programs.

Section 3. Referral System. (1) An LEA shall have a referral system that explains how referrals from district or non-district sources will be accepted and acted upon in a timely manner. (2) The referral system shall be conducted in such a manner as to prevent inappropriate over identification or disproportionate representation by race and ethnicity of children in special education by ensuring that each child has been provided appropriate instruction and intervention services prior to referral. (3) The LEA shall ensure that: (a) Prior to, or as a part of the referral process, the child is provided appropriate, relevant research-based instruction and intervention services in regular education settings, with the instruction provided by qualified personnel; and (b) Data-based documentation of repeated assessments of achievement or measures of behavior is collected and evaluated at reasonable intervals, reflecting systematic assessment of student progress during instruction, the results of which were provided to the child's parents. (4) If the child has not made adequate progress after an appropriate period of time during which the conditions in subsection (3) of this section have been implemented, a referral for an evaluation to determine if the child needs special education and related services shall be considered.

Preschool Enrollment Requirements

If your child is 3: The child must have a disability

If your child is 4: The child must have a disability or be income eligible. Some tuition spots available.

Head Start Enrollment Requirements

Children from birth to age five from families with income below the poverty line are eligible for Head Start (preschool age children) and Early Head Start services (birth to age three and pregnant women). Children from families receiving public assistance (TANF or SSI) are also eligible for Head Start and Early Head Start services regardless of family income. Foster children are also Head Start and Early Head Start eligible regardless of their foster family's income. (Programs may, however, enroll up to 10% of their children from families that do not meet the above requirements.)

Multi-tiered Service Delivery Model & Data-Based Decision Making

The PCIS approach incorporates a three-tiered system of service delivery in which each tier represents an increasingly intense level of services. Students move fluidly from tier to tier. A three-tiered concept aligns all available resources to support and address students' needs. PCIS is not a placement model of defining where students are placed within the tiers, but a service delivery model that guides the services to the students in an organized structured format.

In Tier 1, all students receive high quality, scientifically-based, developmentally appropriate academic and behavior instruction within the general education classroom or the core instruction.

Screening Procedures:

Age/Enrollment Status	Screening Process
3- and 4-year-old: Not enrolled in school	<ul style="list-style-type: none">• District screening days are scheduled throughout the school year.• Parent/guardian takes child to the local school to participate in the screening.• Child is screened in 5 developmental areas (cognition, language, personal-social, adaptive and motor).• All screening results are discussed with the parent/guardian.

3-year-old: Attending preschool due to a disability	<ul style="list-style-type: none"> If the teacher has a concern in an additional area the teacher will screen the student in the area of concern. A screening will occur for all First Steps students in areas not receiving services.
4-year-old: Enrolled in preschool due to income	<ul style="list-style-type: none"> All income eligible 4-year-olds will be screened within the first 30 school days of enrollment.

If screening results indicate that children are not meeting standards, those children will receive appropriate instruction in the classroom that is differentiated to meet their needs.

If no concerns are noted during the screening process, these children will not proceed any further in the screening process. If concerns are noted, the children will have the opportunity to receive interventions. The problem solving team will meet and develop an intervention plan for the child.

* For children currently enrolled in preschool, interventions will be provided in the preschool classroom.

- * For children not enrolled in preschool, interventions may be provided by:
- a) the child attending an intervention group at the preschool; or
 - b) the parent

Interventions are implemented for a minimum of 12 sessions. The child will be screened after approximately 6 sessions of interventions and then again after approximately 6 sessions of interventions.

If the problem solving team determines the student has made sufficient progress based on data during the interventions, the student will not proceed any further in the intervention process and will not be eligible to attend preschool, unless already enrolled as a 4-year-old or as a student with a disability.

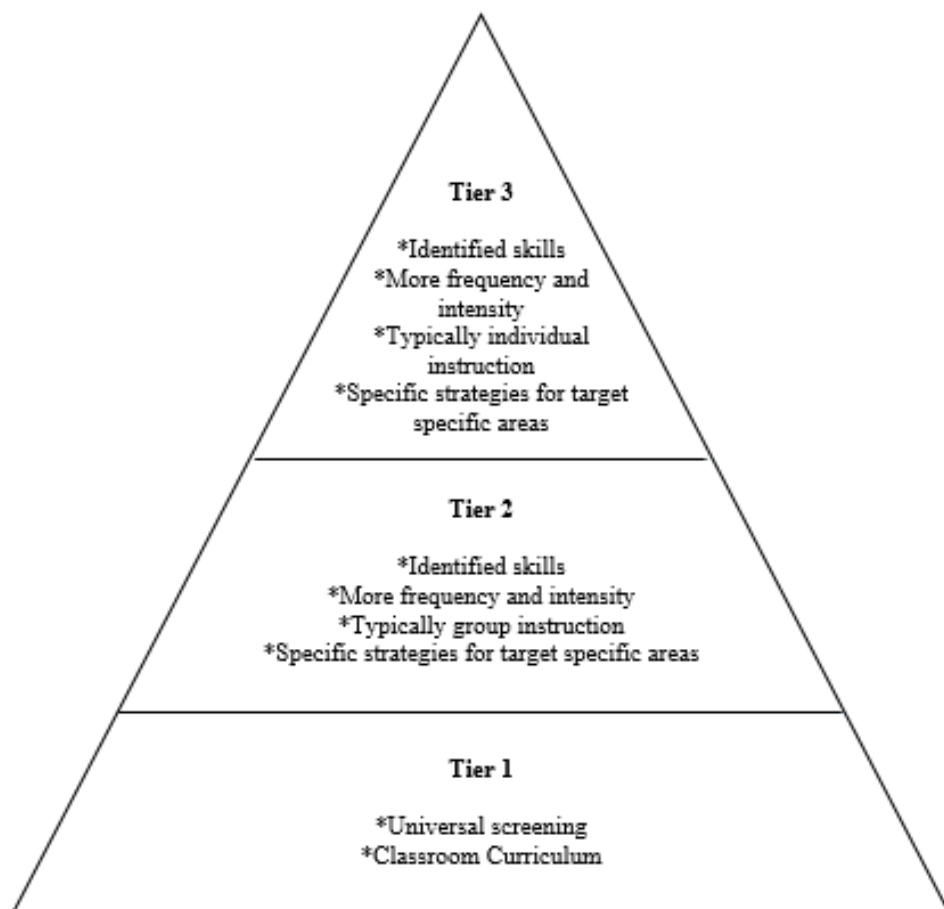
If the problem solving team determines the child has made insufficient progress during the interventions, the problem solving team may recommend to continue interventions, increase the intensity and duration of the interventions or refer for

a special education evaluation.

In addition to the core instruction provided in Tier 1, Tier 2 and Tier 3 provides interventions for students not making adequate progress in the core curriculum. Students in Tier 2 receive academic and/or behavior instruction matched to their needs, based on screening results. Instruction in Tier 2 typically involves small groups of students focused on the targeted area(s) identified by the screener. Students in Tier 3 receive increasingly intensive academic and/or behavior instruction matched to their needs, based on results of continuous progress monitoring. Instruction in Tier 3 typically involves individual instruction focused on the targeted area(s). The frequency and duration of the intervention(s) is determined by the data.

Interventions and strategies may include: modeling, direct instruction, small group, paraphrasing, redirection, controlled choices, most to least prompting, least to most prompting, constant time delay, delayed responses, social narratives, task analysis, hand over hand, redirection, prompting/cueing, paraphrasing, etc.

Tiered Pyramid



Sample Decision-Making Rubric

	Entry	Exit
Tier I	N/A	N/A
Tier II	Student that demonstrates below average scores or potential delay based on screening indexes.	Progress monitoring reflects a minimum of 6 data points demonstrating progress and/or average scores based on screening indexes.
Tier III	Student does not demonstrate adequate progress during Tier II interventions.	Progress monitoring reflects a minimum of 6 data points demonstrating progress and/or average scores based on screening indexes.

Matrix Using Three-Tiered Model

This matrix represents corresponding roles and activities for implementation of universal screening, progress monitoring, and scientific, research-based interventions within a two-tiered system.

SCREENING	Tier I	Tier II	Tier III
<i>When:</i>	Universal screening	N/A	N/A
<i>What:</i>	<i>Brigance Dial - 3 Lap-3</i>	N/A	N/A
<i>Who:</i>	All school staff	N/A	N/A
PROGRESS MONITORING	Tier I	Tier II	Tier III
<i>When:</i>	N/A	Weekly	Weekly
<i>What:</i>	N/A	<i>Interventions Goals Data</i>	<i>Interventions Goals Data</i>
<i>Who:</i>	N/A	Interventionist, classroom teacher, instructional assistants, and other trained personnel	Interventionist, classroom teacher, instructional assistants, and other trained personnel
INTERVENTIONS	Tier I	Tier II	Tier III
<i>When:</i>	N/A	Minimum 30-90 minute sessions, 1 or more times per week	Minimum 30-90 minute sessions, 2 or more times per week

<i>What:</i>	N/A	Research based interventions and strategies	Research based interventions and strategies
<i>Who:</i>	N/A	Interventionist, classroom teacher, instructional assistants, and other trained personnel	Interventionist, classroom teacher, instructional assistants, and other trained personnel

Problem Solving Process Model

In the event that progress monitoring data indicates current interventions are not effective, each school will create problem-solving teams composed of school-based individuals and parents. These problem-solving teams will clarify the needs of the individual student, gather information to assist in decision making, and analyze available data for modification and planning of academic and/or behavioral interventions. The problem-solving team may consist of, but not limited to the following individuals: parent(s), principals, student's teacher(s), school psychologists, liaisons, FRYSC and community providers. Additional members may be included on the problem-solving team when their area of expertise is of assistance to the team.

To facilitate the problem-solving process at Tier II and Tier III, the information collected during assessment must inform instructional decision-making. Data is gathered by sampling information from instruction, curriculum, and the environment before focusing on the learner. Consideration of data includes a review of records and products, interviews of teachers and parents, observations and assessment of specific concerns.

In making decisions, teams should use the following approach:

- **Define the problem** - When a concern is raised, the first step is to review the concern and attempt to identify the problem. The problem-solving team should first review existing student data to determine specific problems. For example, a student should not be identified as simply having an academic or a behavior problem. The team should try to narrow the problem (based upon available data) to identify the deficit skill area(s) (e.g., concepts, language, articulation, motor, social-emotional skills, adaptive behavior skills).
- **Analyze the cause** - Once the problem is defined, the problem-solving team needs to develop a hypothesis as to why the problem is occurring and continuing. This involves analyzing those variables that can be altered through instruction in order to find a solution. This includes questions of fidelity,

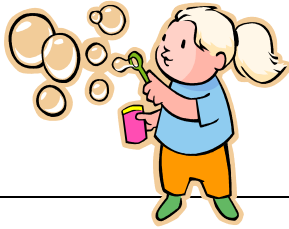
missing skills, motivational factors, or lack of exposure to the general curriculum. The team should focus on explanations of the problem that can be addressed through intervention. In addition to the cause of the problem, the team needs to consider the student's rate of learning and/or adaptive behavior. In doing this, the team reviews the student's progress (e.g., learning trend) and exposure to skills in the identified areas.

- **Develop a plan** - Once the problem has been analyzed, the problem-solving team identifies academic and/or behavioral interventions that will meet the student's needs. The team does this by developing a plan that includes: an implementation timeframe (e.g., 4 weeks, 6 weeks, or 8 weeks); the frequency of the interventions (how often the intervention will be provided and for how many minutes per week); who will provide the intervention (e.g., general education teacher, therapist); and a timeframe to evaluate the effectiveness of the intervention. The student's plan will outline the goal for progress.
- **Implement the plan**- Academic and/or behavioral interventions must be implemented with fidelity. To ensure fidelity, qualified staff must deliver the interventions according to the prescribed process and timeframe. Problem-solving teams should document their delivery of the interventions.
- **Evaluate the plan**- In order to determine if the academic and/or behavioral intervention is working for a student, the problem-solving team must collect data through progress monitoring. The frequency of progress monitoring depends on the tier, but in all cases the process is similar. For example, a student's current performance and progress is compared to their projected level of performance. If the student is not making adequate progress, the problem-solving team should revisit the intervention plan to make appropriate modifications or revisions.

Pulaski County Intervention System (PCIS)

**Pulaski County Preschool/Lake Cumberland Head
Start**

Appendices



Child Development Skills for Three-to Four-Year-Old Children

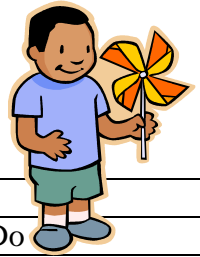


GROSS AND FINE MOTOR DEVELOPMENT	
Normal Characteristics	What Parents Can Do
Runs, jumps, and begins to climb ladders; starts to ride tricycles; is very active.	Carefully supervise physical activities. Set necessary limits. Expose children to playground settings while monitored.
Scribbles spontaneously (circles, etc); likes to play with mud, sand, finger paints, etc; begins to put together simple puzzles and constructs with blocks.	Provide materials and activities to develop coordination, e.g. sand, crayons, paint, puzzles and blocks.
Dresses self fairly well; cannot tie shoes.	Provide opportunities for your child to dress themselves. Let him or her choose their clothes.
Uses scissors to snip paper	Monitor child while snipping paper with scissors.
Can feed self with a spoon or fork with some spillage.	Let your child feed themselves.
Takes care of toilet needs more independently, but may need some assistance; can stay dry all day but perhaps not all night; becomes very interested in own body and how it works.	Label all body parts without judgment and answer questions about body functions simply and honestly.
INTELLECTUAL DEVELOPMENT	
Normal Characteristics	What Parents Can Do
Continues to learn through senses.	Provide many sensory experiences, e.g. sand, water, pictures, music...
Uses imagination a lot; starts dramatic play and role playing; likes to play grown-up roles e.g. Mommy, Daddy, firefighter, teacher	Provide props for dramatic play, e.g. old clothes, shoes, paper, pencils...
Begins to see cause and effect relationships.	Point out and explain common cause and effect relationships—how rain helps flowers grow, how dropping makes glass break and hitting hurts a person.
Is curious and inquisitive.	Explain things to your child, answer questions honestly, and help your child put feelings and ideas into words.
Demonstrates matching skills, finding items that are the same	Have children to help match socks while doing laundry, find pictures in books that are the same, label items
Shows interest in age-appropriate books	Read books with your child, label pictures in books, have child to discuss what they see in the book
SOCIAL AND EMOTIONAL DEVELOPMENT	
Normal Characteristics	What Parents Can Do
Is sensitive about the feelings of other people and understands some emotions.	Develop a warm relationship with your child. Express and show love for and confidence in your child.
Is developing some independence and self-reliance.	Encourage independent activity.

May have fear of strangers, animals, or the dark.	Never force your child to participate in frightening activities. Don't ridicule. Provide a night light if necessary.
Is anxious to please adults and is dependent on their approval, love and praise.	Give approval through facial expressions, gestures, and verbal responses. Avoid negative remarks about your child. Emphasize the family's love for your child.
May strike out emotionally at situations or person when having troublesome feelings.	Offer love, understanding, and patience. Help your child work with and understand his own emotions. (Note: Some temporary regression and jealousy are common if a new baby arrives.)
Can leave caregivers for short periods of time.	Express interest in what your child has been doing while away from you.
Begins to notice differences in the way men and women act, imitates adults.	Model the things you want your child to do since at the start of gender role development your child will imitate adults.
Starts to be more interested in others; begins group play; likes company. Is not ready for games or competition; groups are not well formed.	Provide enough materials so that several children can use them together. Help your child find socially acceptable ways of dealing with others.
LANGUAGE DEVELOPMENT	
Normal Characteristics	What Parents Can Do
Produces basic four to five word sentences Vocabulary includes pronouns (I, you, me), plurals, prepositions, verbs, and nouns.	Talk to child using complete sentences. Model language.
Answers questions logically, Understands most simple questions	Ask questions relating to activities children are completing or understand.
Understands some concepts including quantity, color, and more/most	Count items, identify colors, discuss size comparison during play or activities.
Begins to categorize objects	Categorize items at home and in community
Follow multi-step directions	Begin with simple directions and increase in difficulty
ADAPTIVE SKILLS DEVELOPMENT	
Normal Characteristics	What Parents Can Do
Wipes nose when reminded.	Model and encourage practice.
Initiates and completes dressing and undressing, except fasteners.	Provide opportunities for your children to dress themselves. Let him or her choose their clothing.
Snaps or hooks clothing.	Allow opportunity for the child to snap or hook clothing while getting dressed.
Avoid common dangers (i.e., broken glass)	Remove your child from the area in which may be of danger. Explain to child why it is dangerous.



Child Development Skills for Four-to Five-Year-Old Children



GROSS AND FINE MOTOR DEVELOPMENT	
Normal Characteristics	What Parents Can Do
Is very active and consistently on the go.	Provide plenty of play space both indoors and out. Provide for rest, as your child will tire easily. Promote safety during play.
Has rapid muscle growth.	Provide ample protein in diet since nutrition is important.
Walks up and down stairs without assistance.	Monitor child while walking up and down stairs. Encourage independence.
Running is more controlled. Can start, stop, and turn.	Ensure safety when children are running. Provide opportunities to play outside.
Can easily catch, throw and bounce a ball.	Play ball with children, demonstrate turn taking skills.
Can brush teeth, comb hair, wash and dress with little assistance.	Model skills for children while teaching. Provide encouragement.
Copies vertical and horizontal lines, crosses, and circles.	Provide models and opportunities for children to draw or write.
Prints some letters.	Provide models and opportunities for children to play with letters and write letters.
Uses table utensils skillfully.	Let children explore with spoon and fork, age appropriate size. Monitor use and safety.
Cuts on a line.	Provide opportunities for children to cut using child safe scissors. Monitor use and safety. Do not leave children alone with scissors.
INTELLECTUAL DEVELOPMENT	
Normal Characteristics	What Parents Can Do
Has large vocabulary, 1500+ words; has strong interest in language; is fascinated by words and silly sounds.	Provide interesting words and stories. Play word games.
Understands words that relate one idea to another-if, why, when	Answer questions with detailed, but brief information.
Demonstrates curiosity, talks consistently, and asks numerous questions.	Answer questions patiently.
Nightmares are common	Accept the fright as real. Help your child gain power over the experience (e.g. a “magic” light to freeze the monster.)
Understands, mostly, the difference between fantasy and reality	Pretend plays but also realizes the rules of games.
Continues to learn through experience and the senses.	Encourage play and provide learning experiences.
Understands number and space concepts-more, less, bigger, in, under, behind	Talk about position of items and self (the book is on the table).
Thinks literally; starting to develop logical thinking	
Begins to grasp that pictures and symbols can represent real objects.	Labels items in pictures.

Starts to recognize patterns among objects- round things, soft things, animals	Characterize items in the home or environment.
Grasps the concepts of past, present, and future but does not understand the duration of time	Discuss what child did yesterday, today, and plans to do tomorrow.
SOCIAL AND EMOTIONAL DEVELOPMENT	
Normal Characteristics	What Parents Can Do
Takes turns, shares, cooperates	Plays games with children, demonstrate turn taking and sharing.
Often tests people to see who can be controlled.	Establish limits and adhere to them.
Expresses anger verbally rather than physically.	Teach child to express feelings in appropriate manner.
Has growing confidence in self and world.	Strengthen positive self-esteem by pointing out the things your child can do for himself.
Is beginning to develop some feeling of insecurity, can feel jealousy.	Assure your child that she/he is loved.
Really needs to play with others; has relationships that are often stormy; when playing in groups, will be selective about playmates.	Send your child to a good preschool or play group. If not possible, encourage group play but don't be surprised by disagreements or child's behavior toward different children.
Likes to imitate adult activities; has good imagination.	Allow your child to participate in adult activities which he/she can manage, e.g. dusting, setting the table, filling pets' water dish.
Relies less on physical aggression; is learning to share, accept rules, takes turns.	Expect your child to take simple responsibilities and follow simple rules such as taking turns.
LANGUAGE DEVELOPMENT	
Normal Characteristics	What Parents Can Do
Names object by use or description, Names categories.	Can identify that a cup is something you drink from, describe items while using them (spoon, shoes, etc).
Repeats longer words and sentences.	State clear sentences for child to repeat.
Expresses ideas and feelings rather than just the world around them.	Encourage children to express thoughts and describe feelings.
Responds to more complex questions.	Be patient while child answers questions.
Understands more descriptive language such as adjectives.	Describe items using adjective, play description games (I see something that is big, blue, and bounces)
ADAPTIVE SKILLS DEVELOPMENT	
Normal Characteristics	What Parents Can Do
Avoid poisons and harmful substances.	Discuss dangers with children. Explain and show children warning labels (i.e., labels/signs for danger).
Unbutton own clothing.	Allow opportunity for child to practice with buttons.
Washes hands and face.	Model task and teach steps for washing hands and face. Give child opportunity to practice.
Use correct utensils for foods.	Let children explore with spoon and fork, age appropriate sized. Monitor the use and safety.
Bathes self except for back, neck and ears.	When child starts to show interest in bathing self, allow child to practice. Monitor and assist with back, neck and ears.



Child Development Guide Five to Six Years



GROSS AND FINE MOTOR DEVELOPMENT	
Normal Characteristics	What Parents Can Do
Can dress and undress self.	Allow independence with clothing.
May be farsighted, a common condition, causing hand and eye coordination problems.	Have your child's eyes examined if problem persists. Accept awkwardness as normal condition at this time.
Is able to care for own toilet needs independently.	Praise achievement.
May have stomachaches or vomit when asked to eat disliked foods; prefers plain cooking but accepts wider choice of foods; may have larger appetite.	Offer appealing varieties in food, but don't force child to eat anything.
INTELLECTUAL DEVELOPMENT	
Normal Characteristics	What Parents Can Do
May stutter if tired or nervous; may lisp.	Do not emphasize language disturbance since it is probably only temporary.
Tries only what he/she can accomplish; will follow instructions and accept supervision	Reinforce mastered skills and give your children opportunities to be successful in new, simple activities.
Knows colors, numbers, etc.; can identify penny, nickel, dime; may be able to print a few letters; a few children learn to read on their own.	Provide opportunities for your child to make change (e.g. in restaurants, stores) and to print own name and short names of favorite people and objects.
SOCIAL AND EMOTIONAL DEVELOPMENT	
Normal Characteristics	What Parents Can Do
In general, is reliable and well-adjusted.	Treat child with love and patience.
May show some fear of the dark, falling, dogs, or bodily harm, though this is not a particularly fearful age.	Don't dismiss fears as unimportant.
If tired, nervous, or upset, may exhibit the following behaviors; nail biting, eye blinking, throat clearing, sniffing, nose twitching, and/or thumb sucking.	Try not to appear overly concerned since an increase in nervous habits is temporary and normal. Deal with the cause of the tension rather than the habit exhibited. Help your child structure time to include quiet play and rest. Read your child a story.
Is concerned with pleasing adults.	Show your love by recognizing positive behaviors.
Is easily embarrassed.	Be sensitive about embarrassing things and help your child avoid them.
May fear mother won't return, since mother is the center of your child's world.	Avoid leaving until your child is prepared for mother's departure and return.
Copies adults and likes their praise.	Your child needs reassurance.
Plays with boys and girls; is calm and friendly; is not too demanding in relations with others; can play with one child or a group of children, though prefers members of the same sex.	Give opportunities for group play.
Likes conversation during meals.	Allow and respond to child-initiated conversation.

Knows differences in sexes and is more modest.	Don't shame your child for interest in sexual differences or for touching self.
Is interested in where babies come from.	Offer simple accurate explanations.
If doesn't like school, may develop nausea and vomiting.	Encourage your child to find enjoyable activities at school.
Is experiencing an age of conformity; is critical of those who do not conform.	Help your child learn the value of individual differences.
Is interested in being good, but may tell untruths or blame others for wrongdoings because of intense desire to please and do right.	Do not be shocked by your child's untruthfulness. "Lying" is not a trait to come down hard on at this age. Help your child learn to accept responsibility for her own actions in a positive, caring manner.
Wants to do what he/she believes is right and avoid what is wrong	Acknowledge your child's attempt to act in accordance with own beliefs. Don't punish him for inability to always behave properly.
LANGUAGE DEVELOPMENT	
Normal Characteristics	What Parents Can Do
Understands passive voice.	
Continues to understand more complex sentences and concepts such as time sequence and complex quantity concepts.	
Demonstrates appropriate syntax or sentence structure and can identify grammatically incorrect sentences.	
Formulates meaningful and grammatically correct questions and sentences.	
Describes similarities and differences.	
ADAPTIVE SKILLS DEVELOPMENT	
Normal Characteristics	What Parents Can Do
Selects appropriate clothing for temperature and occasions.	Allow child to help pick out clothing. Discuss weather with child and explain why they should pick certain articles of clothing.
Stops at curb/street, looks both ways, and crosses street without verbal reminders.	Explain dangers of crossing the road without looking.
Is responsible for one daily household tasks (i.e., setting table, taking out trash).	Assign child a daily household chore to teach responsibility of completing tasks. Make sure to choose a chore that can easily be accomplished. Praise child for even attempting the task.
Finds correct (male/female) bathroom in public place.	Teach child to understand bathroom symbols for male and female.
Opens ½ pint milk carton.	Monitor performance. Allow for practice and independence.

Playing the Role

Role-playing is great fun for both you and your child, and it also helps build self-confidence and self-awareness. Your child will learn to see herself from different angles and explore new feelings and ideas in a safe environment. It also helps prepare your child for real situations that may someday occur.

Many preschoolers love to pretend they're keeping house, going to work, flying an airplane, and so on, and they especially love it when you play along. Once a child reaches eight or so, inhibitions about performing often kick in. So reassure your child that there's no such thing as a mistake in these imaginary interactions.

DISPLAYING YOUR CHILD'S MASTERWORKS

Does your child want his/her pictures hanging in their room, or would it mean more to him/her to have their work displayed on a wall in the family room, dining room, kitchen or living room? Frames for the artwork can be simple; after all, it's what's inside the frame that counts. Here are some suggestions for framing and display:

- 😊 Tape several small pictures on a large sheet of construction paper or colored poster board.
- 😊 Set aside a large bulletin board just for your child's work.
- 😊 Hang a long, broad strip of colored ribbon on the wall, and then attach several pictures up and down the length of the ribbon. That way, you avoid lots of tape marks or holes in the wall and you can easily change the display.
- 😊 Frame art projects with a border of wallpaper, newspaper, or wrapping paper.

Memorial Education Center

222 Langdon Street
Somerset, KY 42501
(606) 678-4100

SCREENING RESULTS FOR THE BRIGANCE® SCREEN

Child's Name: _____
Parent's/Guardian's Name: _____
Date of Screening: _____ Conference Date: _____
Teacher's/Scorer's Name: _____

Developmental Screening is to determine the child's strengths and weaknesses in order to make appropriate instructional decisions for the child. The BRIGANCE® screener provides an easy and accurate screening of skills that are predictors of school success in the areas of physical development, language, academic/cognitive, self-help and social-emotional skills.

Results of the BRIGANCE® Screen:

Score Compared to Cutoffs: ☐ Below Cutoff ☐ Above Cutoff ☐ Above Gifted Cutoff

TOTAL BRIGANCE® SCORE: _____ **Chronological Age:** _____

Domain levels:

	Below Average	Average	Above Average
Physical Development			
Language Development			
Academic Skills/Cognitive Development			
Self-Help Skills			
Social-Emotional Development			

Note: Indicate the score received for each area in the box provided above.

Area(s) of Strength: _____

Area(s) of Weakness: _____

Recommendations: (Refer for interventions, rescreen in 6+ months, provide interventions for family, etc.)

Resources provided for family (please list-speech information, RTI information, parent guides to standards, etc.)

Thank you for the opportunity to screen _____ (child's name). Please contact us if you have any questions or information to share.

Sincerely,

Amy Smith

Pulaski County Schools
Preschool Coordinator

I have received recommended activities/strategies to improve my child's skill levels.

Parent/Guardian Signature

Date

Pulaski County Preschool Intervention System

Summary of Data & Intervention Form

Student Name:	SSID:	Age:	DOB:
School:	Gender:	Race/Ethnicity:	
Student represented by: <input type="checkbox"/> Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Self <input type="checkbox"/> Surrogate			
Does student live with parents? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If No , with whom does the student live?(name)			Relationship:
Mother's Name:		Father's Name:	
Home Address:		Home Address:	
Home Address:		Home Address:	
Home Phone:	Work :	Cell:	Home Phone: Work : Cell:
Primary mode of communication? Used by Student: Used in the Home:			
Is Student Currently Enrolled? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Current Teacher(s):		Grade:	
Referred By:			

Major Areas(s) of Concern: *Ensure that major areas of concern are addressed by relevant, research-based instruction and intervention services with data-based documentation of repeated assessments of achievement or measures of behavior. Data must be collected and evaluated at reasonable intervals, delivered in the regular education setting, and delivered by qualified personnel.* Check all that apply:

☐ **Communication**

☐ Cognitive-communication (difficulty with thinking skills including perception, memory, awareness, reasoning, judgment, intellect and imagination)

☐ Expressive Language

☐ Articulation

☐ Voice Quality

☐ Knowledge of Sound/Letter Association

☐ Receptive Language

☐ Other - Specify:

☐ Non-verbal

☐ Communicates through gestures

☐ Pragmatic Communication

Comments:

☐ **Pre-Academic Performance**

☐ Attending to adult direction

☐ Follows simple directions

☐ Responds to reading materials

☐ Shows interest & understanding of print

☐ Knowledge of the alphabet

☐ Emergent phonemic/phonological awareness

☐ Draws meaning from pictures

☐ Tells a story

☐ Understanding of numbers & counting

☐ Recognize shapes

☐ Understand writing is for communication

☐ Produces marks or pictures and symbols

☐ Understanding of units of measure

☐ Recognize colors

☐ Rote count

☐ Other- Specify:

Comments:

Summary of Data & Intervention Form

Student's Full Name: _____

☐ General Intelligence

- | | |
|--|---|
| <input type="checkbox"/> Understanding New Concepts
<input type="checkbox"/> Complete Simple Puzzles
<input type="checkbox"/> Uses Attributes to Describe Objects
<input type="checkbox"/> Perceptual Discrimination
<input type="checkbox"/> Knows Personal Information
<input type="checkbox"/> Identifying Pictures
<input type="checkbox"/> Other-Specify: _____ | <input type="checkbox"/> Predicting Events/Results
<input type="checkbox"/> Problem Solving
<input type="checkbox"/> Applying Knowledge
<input type="checkbox"/> Memory (recall from previous experiences)
<input type="checkbox"/> Identifying Colors
<input type="checkbox"/> Identifying Body Parts |
|--|---|

Check all assessments/screeners below that apply to the student. MUST attach scores.

- | | |
|---|--|
| <input type="checkbox"/> Kindergarten Screener
<input type="checkbox"/> Developmental Screener | <input type="checkbox"/> Classroom Assessment
<input type="checkbox"/> Communication Screener |
|---|--|

Comments:

Health, Vision, Hearing and Motor Abilities

- | | |
|--|---|
| <input type="checkbox"/> Gross Motor Skills
<input type="checkbox"/> Body Control
<input type="checkbox"/> Locomotion
<input type="checkbox"/> Vision
<input type="checkbox"/> Developmental History | <input type="checkbox"/> Fine Motor Skills
<input type="checkbox"/> Perceptual Motor
<input type="checkbox"/> Sensory
<input type="checkbox"/> Hearing
<input type="checkbox"/> Other-Specify _____ |
|--|---|

Student has a current Health, Vision, Hearing or Motor condition? ☐ Yes ☐ No If yes, specify: _____

Is student currently on medication? ☐ Yes ☐ No Specify type and dosage: _____

Comments:

Physical Functioning:

Attach documentation for results of each screening. A NEW screening MUST be completed if current ones are more than a year old.

VISION	HEARING	MOTOR <input type="checkbox"/> Currently Not Applicable	COMMUNICATION <input type="checkbox"/> Currently Not Applicable
Required for all students referred for special education		<i>Required when Specific Learning Disability suspected as determined by the ARC</i>	<i>Required as determined by the ARC</i>
Screening Date: <input type="checkbox"/> Passed <input type="checkbox"/> Failed	Screening Date: <input type="checkbox"/> Passed <input type="checkbox"/> Failed	Screening Date: <input type="checkbox"/> Passed <input type="checkbox"/> Failed	Screening Date: <input type="checkbox"/> Passed <input type="checkbox"/> Failed

Summary of Data & Intervention Form

Student's Full Name:

Social and Emotional Status

- | | |
|---|--|
| <input type="checkbox"/> Interaction with Peers | <input type="checkbox"/> Mood Swings |
| <input type="checkbox"/> Interaction with Adults | <input type="checkbox"/> Repetitive Behaviors |
| <input type="checkbox"/> Acceptance of Rules | <input type="checkbox"/> Self-Concept |
| <input type="checkbox"/> Acceptance of Correction | <input type="checkbox"/> Inactivity or Withdrawal |
| <input type="checkbox"/> Acceptance of Redirection | <input type="checkbox"/> Cooperation |
| <input type="checkbox"/> Self-Help Skills/Play Skills | <input type="checkbox"/> Self-Control |
| <input type="checkbox"/> Team or Membership | <input type="checkbox"/> Expression of Feelings/Affect |
| <input type="checkbox"/> Other Specify: _____ | |

- ☐ Student is currently monitored in PBIS (behavior RTI). **MUST** attach documentation.
- ☐ Attach Discipline Reports and any behavioral screening data if this is an area of concern.

Comments:

☐ Work Skills/Technical/Vocational Functioning

- | | |
|--|---|
| <input type="checkbox"/> Attending to Task | <input type="checkbox"/> Sustains working on activities |
| <input type="checkbox"/> Following Directions | <input type="checkbox"/> Completing Work |
| <input type="checkbox"/> Independent Work Habits | <input type="checkbox"/> Organizing Materials/Belongings |
| <input type="checkbox"/> Seeking Assistance When Needed | <input type="checkbox"/> Recognizing Personal Limitations |
| <input type="checkbox"/> Identifying Preferences/Interests | <input type="checkbox"/> Other-Specify |
| <input type="checkbox"/> Maintaining Physical Stamina | |

Comments:

Specialized equipment used by student: ☐ Yes ☐ No Explain:

School Information:

Student Attendance: Please complete and check all that apply. **MUST** attach copy of attendance/enrollment report.

- ☐ Attended RTI sessions
- ☐ Participated in First Steps therapy sessions
- ☐ Student has attended multiple schools/daycares
- ☐ Student has preschool curriculum data

Comments:

Summary of Data & Intervention Form

Student's Full Name:

Summary of Past and Present Support:

Has this student been evaluated for special education previously? ☐ Yes ☐ No

If yes,

- when was the student evaluated?
- what was the suspected area of disability?

Does student currently or has he/she had an IFSP? ☐ Current ☐ Past

If yes,

- when was the student evaluated?
- what was the suspected area of delay?

Involvement with outside agency(ies): ☐ Yes ☐ No Agency:

Describe services that are being provided to this student by agency(ies) listed above:

Describe the parental involvement in the RTI process, including any training received:

Has this student attended any previous daycares or preschool settings? ☐ Yes ☐ No

List:

INTERVENTION STRATEGIES AND DOCUMENTATION OF STUDENT PROGRESS:

DOCUMENT ATTEMPTS TO MEET STUDENT NEEDS WITHIN UNIVERSAL/CORE INSTRUCTION (TIER I)

Indicate strategies/accommodations/modifications used to in response to this student's need(s).

- ☐ Alternative reading materials
- ☐ Provide study sheet for review and drill
- ☐ Flexible small groups (teacher directed)
- ☐ Cooperative learning groups
- ☐ Individualized reading instruction
- ☐ One-on-one with teacher
- ☐ Increase use of manipulatives
- ☐ Help from parent/volunteer tutor/paraeducator
- ☐ Alternative math materials
- ☐ Increase repetition and drill
- ☐ Skill-based learning groups

- ☐ Additional use of graphic organizers
- ☐ Instruction using similarities
- ☐ Increase positive reinforcement
- ☐ Break assignments into small steps
- ☐ Frequent feedback by teacher
- ☐ Provide rewards for task completion
- ☐ Enlist parent support to review skills at home
- ☐ Other _____
- ☐ Other _____
- ☐ Other _____
- ☐ Other _____

Summary of Data & Intervention Form

Student's Full Name:

INTERVENTIONS IMPLEMENTED: (Documentation of progress data **MUST** be attached for **EACH** intervention listed.)

DOCUMENT RESEARCH BASED INTERVENTIONS PROVIDED TO MEET STUDENT NEEDS

TIER 2 Cognitive Interventions (first attempt to intervene beyond attempts in core instruction)					
Title of Intervention(s)	Frequency of Service	Amount of Time	Dates		Impact on Targeted Area (progress data must show impact)
			From	To	
<input type="checkbox"/> Modeling <input type="checkbox"/> Direct Instruction <input type="checkbox"/> Delayed Response <input type="checkbox"/> Most-to-Least Prompts <input type="checkbox"/> Least-to-Most Prompts <input type="checkbox"/> Time Delay <input type="checkbox"/> Social Stories <input type="checkbox"/> Prompting/Cueing <input type="checkbox"/> Other: <input type="checkbox"/> Other:					
Notes:					

TIER 3 Cognitive Interventions (second attempt to intervene beyond attempts in core instruction)					
Title of Intervention(s)	Frequency of Service	Amount of Time	Dates		Impact on Targeted Area (progress data must show impact)
			From	To	
<input type="checkbox"/> Modeling <input type="checkbox"/> Direct Instruction <input type="checkbox"/> Delayed Response <input type="checkbox"/> Most-to-Least Prompts <input type="checkbox"/> Least-to-Most Prompts <input type="checkbox"/> Time Delay <input type="checkbox"/> Social Stories <input type="checkbox"/> Prompting/Cueing <input type="checkbox"/> Other: <input type="checkbox"/> Other:					
Notes:					

Summary of Data & Intervention Form

Student's Full Name:

INTERVENTIONS IMPLEMENTED: (Documentation of progress data **MUST** be attached for **EACH** intervention listed.)

DOCUMENT RESEARCH BASED INTERVENTIONS PROVIDED TO MEET STUDENT NEEDS

TIER 2 Self-Help/Adaptive Interventions (first attempt to intervene beyond attempts in core instruction)					
Title of Intervention(s)	Frequency of Service	Amount of Time	Dates		Impact on Targeted Area (progress data must show impact)
			From	To	
<input type="checkbox"/> Modeling <input type="checkbox"/> Direct Instruction <input type="checkbox"/> Delayed Response <input type="checkbox"/> Most-to-Least Prompts <input type="checkbox"/> Least-to-Most Prompts <input type="checkbox"/> Time Delay <input type="checkbox"/> Social Stories <input type="checkbox"/> Prompting/Cueing <input type="checkbox"/> Other: <input type="checkbox"/> Other:					
Notes:					

TIER 3 Self-Help/Adaptive Interventions (second attempt to intervene beyond attempts in core instruction)					
Title of Intervention(s)	Frequency of Service	Amount of Time	Dates		Impact on Targeted Area (progress data must show impact)
			From	To	
<input type="checkbox"/> Modeling <input type="checkbox"/> Direct Instruction <input type="checkbox"/> Delayed Response <input type="checkbox"/> Most-to-Least Prompts <input type="checkbox"/> Least-to-Most Prompts <input type="checkbox"/> Time Delay <input type="checkbox"/> Social Stories <input type="checkbox"/> Prompting/Cueing <input type="checkbox"/> Other: <input type="checkbox"/> Other:					
Notes:					

Summary of Data & Intervention Form

Student's Full Name:

INTERVENTIONS IMPLEMENTED: (Documentation of progress data **MUST** be attached for **EACH** intervention listed.)

DOCUMENT RESEARCH BASED INTERVENTIONS PROVIDED TO MEET STUDENT NEEDS

TIER 2 Social/Emotional Interventions (first attempt to intervene beyond attempts in core instruction)					
Title of Intervention(s)	Frequency of Service	Amount of Time	Dates		Impact on Targeted Area (progress data must show impact)
			From	To	
<input type="checkbox"/> Modeling <input type="checkbox"/> Direct Instruction <input type="checkbox"/> Delayed Response <input type="checkbox"/> Most-to-Least Prompts <input type="checkbox"/> Least-to-Most Prompts <input type="checkbox"/> Time Delay <input type="checkbox"/> Social Stories <input type="checkbox"/> Prompting/Cueing <input type="checkbox"/> Other: <input type="checkbox"/> Other:					
Notes:					

TIER 3 Social/Emotional Interventions (second attempt to intervene beyond attempts in core instruction)					
Title of Intervention(s)	Frequency of Service	Amount of Time	Dates		Impact on Targeted Area (progress data must show impact)
			From	To	
<input type="checkbox"/> Modeling <input type="checkbox"/> Direct Instruction <input type="checkbox"/> Delayed Response <input type="checkbox"/> Most-to-Least Prompts <input type="checkbox"/> Least-to-Most Prompts <input type="checkbox"/> Time Delay <input type="checkbox"/> Social Stories <input type="checkbox"/> Prompting/Cueing <input type="checkbox"/> Other: <input type="checkbox"/> Other:					
Notes:					

Summary of Data & Intervention Form

Student's Full Name:

INTERVENTIONS IMPLEMENTED: (Documentation of progress data **MUST** be attached for **EACH** intervention listed.)

DOCUMENT RESEARCH BASED INTERVENTIONS PROVIDED TO MEET STUDENT NEEDS

TIER 2 Motor Interventions (first attempt to intervene beyond attempts in core instruction)					
Title of Intervention(s)	Frequency of Service	Amount of Time	Dates		Impact on Targeted Area (progress data must show impact)
			From	To	
<input type="checkbox"/> Modeling <input type="checkbox"/> Direct Instruction <input type="checkbox"/> Delayed Response <input type="checkbox"/> Most-to-Least Prompts <input type="checkbox"/> Least-to-Most Prompts <input type="checkbox"/> Time Delay <input type="checkbox"/> Social Stories <input type="checkbox"/> Prompting/Cueing <input type="checkbox"/> Other: <input type="checkbox"/> Other:					
Notes:					

TIER 3 Motor Interventions (second attempt to intervene beyond attempts in core instruction)					
Title of Intervention(s)	Frequency of Service	Amount of Time	Dates		Impact on Targeted Area (progress data must show impact)
			From	To	
<input type="checkbox"/> Modeling <input type="checkbox"/> Direct Instruction <input type="checkbox"/> Delayed Response <input type="checkbox"/> Most-to-Least Prompts <input type="checkbox"/> Least-to-Most Prompts <input type="checkbox"/> Time Delay <input type="checkbox"/> Social Stories <input type="checkbox"/> Prompting/Cueing <input type="checkbox"/> Other: <input type="checkbox"/> Other:					
Notes:					

Summary of Data & Intervention Form

Student's Full Name:

INTERVENTIONS IMPLEMENTED: (Documentation of progress data **MUST** be attached for **EACH** intervention listed.)

DOCUMENT RESEARCH BASED INTERVENTIONS PROVIDED TO MEET STUDENT NEEDS

TIER 2 Communication Interventions (first attempt to intervene beyond attempts in core instruction)					
Title of Intervention(s)	Frequency of Service	Amount of Time	Dates		Impact on Targeted Area (progress data must show impact)
			From	To	
<input type="checkbox"/> Modeling <input type="checkbox"/> Direct Instruction <input type="checkbox"/> Delayed Response <input type="checkbox"/> Most-to-Least Prompts <input type="checkbox"/> Least-to-Most Prompts <input type="checkbox"/> Time Delay <input type="checkbox"/> Social Stories <input type="checkbox"/> Prompting/Cueing <input type="checkbox"/> Other: <input type="checkbox"/> Other:					
Notes:					

TIER 3 Communication Interventions (second attempt to intervene beyond attempts in core instruction)					
Title of Intervention(s)	Frequency of Service	Amount of Time	Dates		Impact on Targeted Area (progress data must show impact)
			From	To	
<input type="checkbox"/> Modeling <input type="checkbox"/> Direct Instruction <input type="checkbox"/> Delayed Response <input type="checkbox"/> Most-to-Least Prompts <input type="checkbox"/> Least-to-Most Prompts <input type="checkbox"/> Time Delay <input type="checkbox"/> Social Stories <input type="checkbox"/> Prompting/Cueing <input type="checkbox"/> Other: <input type="checkbox"/> Other:					
Notes:					

Summary of Data & Intervention Form

Student's Full Name: _____

TIER 2 Other Interventions (first attempt to intervene beyond attempts in core instruction)

List Area Targeted: _____

Title of Intervention(s)	Frequency of Service	Amount of Time	Dates		Impact on Targeted Area (progress data must show impact)
			From	To	

Notes: _____

TIER 3 Other Interventions (must reflect a change in type or intensity of Tier 2 intervention)

List Area Targeted: _____

Title of Intervention(s)	Frequency of Service	Amount of Time	Dates		Impact on Targeted Area (progress data must show impact)
			From	To	

Notes: _____

Summary of Data & Intervention Form

Student's Full Name: _____

Date of RTI Team Meeting: _____

Names of Those in Attendance: _____

Committee Decisions:

- ☐ Move from Tier 2 to Tier 3 Intervention Level
- ☐ Continue Tier 3 Interventions with modifications/adaptations (continue tracking data and updates)

Next RTI team meeting scheduled for: (date) _____

- ☐ Refer to 504 committee
- ☐ Refer for multi-disciplinary evaluation (all information goes to special education liaison)
- ☐ Other services needed: _____
(Inform appropriate staff members) _____

Meeting Notes:

Summary of Data & Intervention Form

Student's Full Name: _____

Date of RTI Team Meeting: _____

Names of Those in Attendance: _____

Committee Decisions:

- ☐ Move from Tier 2 to Tier 3 Intervention Level
- ☐ Continue Tier 3 Interventions with modifications/adaptations (continue tracking data and updates)

Next RTI team meeting scheduled for: (date) _____

- ☐ Refer to 504 committee
- ☐ Refer for multi-disciplinary evaluation (all information goes to special education liaison)

☐ Other services needed: _____
(Inform appropriate staff members) _____

Meeting Notes:

Pulaski County Schools
Preschool/Head Start Intervention

Parent Permission Letter

Date: _____

Dear Parent,

Pulaski County School Preschool or Lake Cumberland Head Start is requesting your consent for your child to participate in the intervention process provided by your local school.

You have been explained the intervention process and by providing the consent, you are allowing your child to participate in the intervention process.

You also have the opportunity to deny this process.

☐ Yes, I accept the opportunity for my child to participate in the intervention process. I have been explained the process and will provide information needed.

☐ No, I deny the opportunity for my child to participate in the intervention process, although I have been explained the concerns identified through screenings.

Signature of parent

Date



Adaptive Skills

Student Name: _____

Person responsible for interventions: _____

Child ☐ is/ ☐ is not enrolled at _____ (school).

Goal: _____

***Highlight only weaknesses identified by screener.**

Adaptive Skills	Date:												
		+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -
Avoids common dangers													
Puts toys away when asked													
Uses utensils to eat with assistance													
Uses utensils to eat without assistance													
Drinks from a cup with assistance													
Drinks from a cup without assistance													
Removes clothing without fasteners with assistance (shoes, coat, shirt, pants)													
Removes clothing without fasteners without assistance (shoes, coat, shirt, pants)													
Puts on simple clothing with assistance													
Puts on simple clothing without assistance													
Washes and/or dries hands with assistance													
Expresses the need to go to the bathroom through gestures or words													
Accurately responds to “yes/no” when asked to go to the bathroom													
<i>Teacher/Parent/Guardian contact: Please initial.</i>													
<u>*Interventions/ Strategies:</u> List number here:													
*Interventions/Strategies	1 - prompting/cueing 4 – small group 7 – choices 10 – least to most prompting	List the percentage of data or the number of trials: EX- 80% or 4/5											
	2 – modeling 5 – paraphrasing 8 – delayed response 11- time delay												
	3 – direct instruction 6 – redirection 9 – most-to-least prompting 12-Social Stories												

Parent ☐ **accepts/** ☐ **denies** the opportunity to bring their child into the school district for developmental interventions due to low screening scores on _____.
(date)

Interventions began on _____ and ended on _____.
(date) (date)

Parent Signature

Teacher Signature

Articulation Skills

Student Name: _____

Person responsible for interventions: _____

Child ☐ **is/** ☐ **is not** enrolled at _____ (school).

Goal: _____

***Highlight only weaknesses identified by screener.**

[illegible]

Parent ☐ **accepts**/ ☐ **denies** the opportunity to bring their child into the school district for developmental interventions due to low screening scores on _____ .
(date)

Interventions began on _____ and ended on _____.
(date) (date)

Parent Signature

Teacher Signature

Cognitive Skills

Student Name: _____

Person responsible for interventions: _____

Child ☐ is/ ☐ is not enrolled at _____ (school).

Goal: _____

***Highlight only weaknesses identified by screener.**

Cognitive Skills	Date:												
		+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -
Joins in saying nursery rhymes													
Identifies objects in a picture													
Recalls information													
Repeats 3 word phrases													
Sorts objects by color, shape, or type													
Follow directions (in, out, on)													
Identifies _____ (#) primary colors													
Identifies circle and square, other:													
Identifies <i>up</i> and <i>down</i>													
Understands <i>fast</i> and <i>slow</i>													
Understands <i>big</i> and <i>little</i>													
Understands <i>one</i> and <i>one more</i>													
Understands quantity (2 or 3)													
Attends to activities for 3 minutes													
Understands <i>tall</i> and <i>short</i>													
Understands a “ <i>why do</i> ” question e.g., “ <i>why do we wear clothes</i> ”													
Places shapes in a form board													
Completes a two-piece puzzle													
Match shapes (circle, square, triangle)													
Attends to activities for 5 minutes													
Teacher/Parent/Guardian contact; Please initial.													
<u>*Interventions/ Strategies:</u> List number here:													

*Interventions/Strategies	1 - prompting/cueing	4 – small group	7 – choices	10 – least to most prompting
	2 – modeling	5 – paraphrasing	8 – delayed response	11- time delay
	3 – direct instruction	6 – redirection	9 – most-to-least prompting	12- social stories

**List the percentage of data or the number of trials:
EX- 80% or 4/5**

Parent ☐ **accepts**/ ☐ **denies** the opportunity to bring their child into the school district for developmental interventions due to low screening scores on _____ .
(date)

Interventions began on _____ and ended on _____ .
(date) (date)

Parent Signature

Teacher Signature

Expressive Language Skills

Student Name: _____

Person responsible for interventions: _____

Child ☐ is/ ☐ is not enrolled at _____ (school).

Goal: _____

***Highlight only weaknesses identified by screener.**

<u>Expressive Skills</u>	<u>DATE:</u>												
		+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -	+ / -
Names common objects when seen/heard													
Names 8 or more pictures of common objects													
Uses at least <input type="checkbox"/> 50 words (3 years) <input type="checkbox"/> 100 words (4 years)													
Names pictures of familiar objects e.g., ball, doll, truck													
Requests objects or activities with words/signs													
Greets familiar people with words/signs													
Asks simple questions													
Asks “yes/no” questions													
Requests assistance (help?)													
Conversational turn taking													
Uses words to describe toys (size, color, shape, texture)													
Uses <input type="checkbox"/> 2-word/ <input type="checkbox"/> 3-word utterances													
Uses “s” on the ends of some words to form plurals (cats, dogs)													
Uses “ing” on verbs (e.g., helping)													
Uses personal pronouns (e.g., me, your, mine)													
Teacher/Parent/Guardian contact: Please initial.													
<u>*Interventions/ Strategies:</u>													
List number here:													
*Intervention/Strategies	1 - prompting/cueing	4 – small group	7 – choices	10 – least to most prompting	List the percentage of data or the number of trials: EX-80% or 4/5								
	2 – modeling	5 – paraphrasing	8 – delayed response	11- time delay									
	3 – direct instruction	6 – redirection	9 – most-to-least prompting										

Parent ☐ **accepts**/ ☐ **denies** the opportunity to bring their child into the school district for developmental interventions due to low screening scores on _____ .
(date)

Interventions began on _____ and ended on _____ .
(date) (date) Parent Signature Teacher Signature

Fine Motor Skills

Student Name: _____

Person responsible for interventions: _____

Child ☐ is/ ☐ is not enrolled at _____ (school).

Goal: _____

***Highlight only weaknesses identified by screener.**

<u>Fine Motor Skills</u>	<u>DATE:</u>												
		<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>
Plays with messy materials such as Play-Doh													
Builds a tower of 6 blocks													
Unscrews cap from small bottle													
Screws on lids													
Makes simple forms with Play-Doh (e.g., balls, worms)													
Strings large beads													
Pulls apart large popbeads													
Holds bowl and stirs													
Transfers material with a spoon													
Uses small wood hammer to pound in objects													
Imitates vertical stroke													
Imitates horizontal stroke													
Spontaneously scribbles													
Copies a circle													
Copies a cross (4 years)													
Draws with intent for representation (e.g., picture of self, family, house, pets)													
Snips with scissors (3 years)													
Cuts on thick line within ½ inch (4 years)													
Teacher/Parent/Guardian contact: Please initial.													
<u>*Interventions/Strategies:</u> List number here:													

*Interventions/Strategies	1 - prompting/cueing	4 – small group	7 – choices	10 – least to most prompting
	2 – modeling	5 – paraphrasing	8 – delayed response	11- time delay
	3 – direct instruction	6 – redirection	9 – most-to-least prompting	

List the percentage of data or the number of trials: EX- 80% or 4/5

Parent ☐ **accepts**/ ☐ **denies** the opportunity to bring their child into the school district for developmental interventions due to low screening scores on _____ .
(date)

Interventions began on _____ and ended on _____ .
(date) (date)

Parent Signature

Teacher Signature

Gross Motor Skills

Student Name: _____

Person responsible for interventions: _____

Child ☐ is/ ☐ is not enrolled at _____ (school).

Goal: _____

***Highlight only weaknesses identified by screener.**

<u>Gross Motor Skills</u>	<u>DATE:</u>												
		<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>
Walks backward 5 feet													
Walks on all types of surfaces, rarely falling													
Runs 10 feet without falling													
Spontaneously avoids large obstacles when running													
Walks up 3 steps, using same-step placement, holding rail or with support													
Walks down 3 steps, using same-step placement, holding rail or with support													
Jumps with both feet													
Stands on 1 leg for 1 -2 seconds													
Walks along a 10" line													
Kicks a ball 1' to 3' without falling													
Kicks a ball 4' to 6' without falling													
Throws an 8" ball in intended direction													
Catches an 8" ball, arms straight out													
Climbs on playground equipment													
Teacher/Parent/Guardian contact: Please initial.													
<u>*Interventions/ Strategies:</u> List number here:													

*Interventions/Strategies	1 - prompting/cueing	4 – small group	7 – choices	10 – least to most prompting
	2 – modeling	5 – paraphrasing	8 – delayed response	11- time delay
	3 – direct instruction	6 – redirection	9 – most-to-least prompting	12-social stories

List the percentage of data or the number of trials: EX- 80% or 4/5

Parent ☐ **accepts**/ ☐ **denies** the opportunity to bring their child into the school district for developmental interventions due to low screening scores on _____ .
(date)

Interventions began on _____ and ended on _____ .
(date) (date)

Parent Signature

Teacher Signature

Personal Social Skills

Student Name: _____

Person responsible for interventions: _____

Child ☐ is/ ☐ is not enrolled at _____ (school).

Goal: _____

***Highlight only weaknesses identified by screener.**

<u>Social Skills</u>	<u>DATE:</u>												
		<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>
Expresses feelings (happy, sad, mad)													
Tells his/her first name													
Shows pride in accomplishments (claps hands, smiles)													
Answers correctly when asked if he/she is a boy/girl													
Tells his/her first and last name													
Greets familiar adults spontaneously													
Shares food/toys with familiar adults													
Plays alongside with other children without disturbing play													
Expresses affections for certain peers													
Initiates interactions with peers													
Takes turns with peers													
Separates easily from parent in familiar surrounding													
Participates in group activities with minimal guidance													
Teacher/Parent/Guardian contact: Please initial.													
<u>*Interventions/ Strategies:</u>													
List number here:													

Interventions/Strategies	1 - prompting/cueing	4 – small group	7 – choices	10 – least to most prompting
	2 – modeling	5 – paraphrasing	8 – delayed response	11- time delay
	3 – direct instruction	6 – redirection	9 – most-to-least prompting	12- Social Stories

List the percentage of data or the number of trials: EX- 80% or 4/5

Parent ☐ **accepts/** ☐ **denies** the opportunity to bring their child into the school district for developmental interventions due to low screening scores on _____ .
(date)

Interventions began on _____ and ended on _____ .
(date) (date) Parent Signature Teacher Signature

Receptive Language Skills

Student Name: _____

Person responsible for interventions: _____

Child ☐ is/ ☐ is not enrolled at _____ (school).

Goal: _____

***Highlight only weaknesses identified by screener.**

<u>Receptive Skills</u>	<u>DATE:</u>												
		<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>	<u>+ / -</u>
Understands <i>look, stop, no</i>													
Identifies pictures of familiar objects													
Follows 1 step directions (3 years)													
Follows 2 step directions (4 years)													
Identifies up to 6 body parts													
Identifies objects by usage													
Responds appropriately to “ <i>where</i> ” questions													
Responds appropriately to “ <i>why</i> ” questions													
Responds appropriately to “ <i>yes/no</i> ” questions with words/gestures													
Identifies pictures of objects by use													
<i>Teacher/Parent/Guardian contact: Please initial.</i>													
*Interventions/ Strategies: List number here:													

*Interventions/Strategies	1 - prompting/cueing	4 – small group	7 – choices	10 – least to most prompting
	2 – modeling	5 – paraphrasing	8 – delayed response	11- time delay
	3 – direct instruction	6 – redirection	9 – most-to-least prompting	

List the percentage of data or the number of trials: EX- 80% or 4/5

Parent ☐ **accepts**/ ☐ **denies** the opportunity to bring their child into the school district for developmental interventions due to low screening scores on _____ .
(date)

Interventions began on _____ and ended on _____ .
(date) (date)

Parent Signature

Teacher Signature

Sensory

Student Name: _____

Person responsible for interventions: _____

Child ☐ **is**/ ☐ **is not** enrolled at _____ (school).

Goal: _____

***Highlight only weaknesses identified by screener.**

[illegible]

Parent ☐ **accepts**/ ☐ **denies** the opportunity to bring their child into the school district for developmental interventions due to low screening scores on _____ .
(date)

Interventions began on _____ and ended on _____.
(date) (date)

Parent Signature

Teacher Signature

MEMORIAL EDUCATION CENTER

PBIS Manual

2015-2016



Building a Better Foundation

TABLE OF CONTENTS

PBIS MANUAL	42
MISSION AND OVERVIEW	44
LEADERSHIP TEAM	44
FACULTY & FAMILY INVOLVEMENT	45
SCHOOL-WIDE BEHAVIORAL EXPECTATIONS	45
TEACHING SCHOOL-WIDE EXPECTATIONS	45
ENCOURAGING & ACKNOWLEDGING EXPECTATIONS	45
RESPONDING TO CHALLENGING BEHAVIOR	45
PROCEDURES FOR MONITORING & EVALUATING EFFECTIVENESS	46
MULTI-TIERED SYSTEMS OF BEHAVIORAL SUPPORT	47
PROFESSIONAL DEVELOPMENT & STAFF SUPPORT	48
APPENDICES	49
APPENDIX A: LEADERSHIP TEAM ROSTER	49
APPENDIX B: ACTION PLAN	50
APPENDIX C: EXPECTATIONS MATRIX	52
APPENDIX D: MEC BEHAVIOR SCREENING TOOL	53
APPENDIX E: DISCIPLINE REFERRAL FORM & DEFINITIONS	54

Mission Statement

Memorial Education Center provides early childhood experiences for all eligible children, birth through five, including those with special needs; focusing on their physical, intellectual, social, and emotional development thus ensuring their access to comprehensive developmentally appropriate programs and services.

Goals

1. To provide a developmentally appropriate early childhood curriculum.
2. To provide developmentally appropriate evaluation in alignment with the curriculum.
3. To provide qualified teachers and assistants trained in early childhood development.
4. To involve parents as partners.
5. To provide free and appropriate preschool education and related services for all three-and four-year-old children with disabilities.

PBIS Overview

Our school district has chosen to participate in a state initiative called Positive Behavior Intervention and Supports (PBIS). According to the National Center for PBIS (www.pbis.org), “PBIS is a framework or approach for assisting school personnel in adopting and organizing evidence-based behavioral interventions into an integrated continuum that enhances academic and social behavior outcomes for all students.”

Critical elements of this framework include:

- 1) Oversight of implementation by a leadership team
- 2) Faculty and family involvement
- 3) Development of school-wide behavioral expectations
- 4) Procedures for teaching these expectations
- 5) A continuum of procedures to encourage and acknowledging meeting of the school-wide expectations
- 6) A continuum of procedures for responding to challenging behavior
- 7) Procedures for monitoring and evaluating the effectiveness of these practices
- 8) A multi-tiered system of behavioral supports
- 9) Ongoing professional development and staff support

Leadership Team

Our leadership team provides development, support and oversight for our framework of PBIS. The team is to have broad representation, administrative involvement and support, meet at least monthly, and include family involvement as appropriate (in some cases confidential information will be discussed). See Appendix A for our current leadership team listing and Appendix B for the current PBIS Action Plan developed by the leadership team.

Faculty and Family Involvement

Our leadership team works to ensure active involvement, buy-in and awareness from all stake holders including staff, families and community members. Input will be obtained through surveys, invitations to meetings, and other means. Information about program implementation and outcome and progress monitoring data will be shared on an ongoing basis with these stake holders as appropriate.

School-Wide Behavioral Expectations

Our PBIS mission statement is: To provide a positive, safe, and nurturing learning environment for all students and stakeholders. Expectations we will teach our students are:

The Three B's at MEC

Be Safe, Be Kind, Be Helpful



Teaching School-Wide Behavioral Expectations

During the school year, these expectations are posted on bulletin boards, in newsletters, and in classrooms. These expectations are explicitly taught in class-wide lessons four times per year; after summer break, fall break, Christmas break, and spring break. They are also taught and reinforced daily through formal lessons, teacher interactions with students, daily announcements and newsletters. Rewards for good behavior are directly connected to these expectations as are corrections of inappropriate behavior. The Expectations Matrix in Appendix C outlines how these expectations apply to various settings in our building.

Encouraging and Acknowledging School-Wide Behavioral Expectations

Throughout the school day staff will watch for students to display our school-wide behavior expectations. As these behaviors are observed they will be acknowledged verbally and through other means. Parents and other stake holders are also encouraged to acknowledge and reward students for displaying these behavioral expectations.

Each teacher chooses one student weekly to receive a bee bracelet. The bee bracelet represents a student who has met all behavior expectations during the week. Bee stamps are used throughout the day when students demonstrate appropriate behavior.

Responding to Challenging Behavior

A continuum of procedures are in place to respond to challenging behaviors. Staff work with students to correct challenging behavior through reminders and re-teaching of the school-wide expectations. Other methods used to teach correct behavior are social narratives, task-analysis and modeling.

Staff and families are also trained in procedures from the 1-2-3 Magic behavior program by Thomas W. Phelan. When used at school and at home it has proven to be very effective. Corporal punishment is never used a Memorial. It is the goal of our program to teach self-control, to verbally give students the words to settle their conflicts, and to model correct behavior for them.

Procedures for Monitoring and Evaluating Effectiveness

In PBIS, three types of assessments are used:

- 1) Screening data
- 2) Diagnostic and intervention planning data
- 3) Progress monitoring

Screening data is for the purpose of identifying the need for additional support. We use this data to determine individual students in need of additional support, as well as, the need for other program supports (such as the need to provide additional support to groups of students in certain locations like the cafeteria).

All students are screened with the Memorial Education Center Behavior Screening Tool along with other applicable methods. See Appendix D for the Memorial Education Center Behavior Screening Tool. Another method used in collecting behavior data is through the use of a Discipline Referral Form (see Appendix E). Data regarding specific challenging behaviors are collected and entered into a data management system to allow for efficient analysis of both individual and school-wide behavior challenges. “Minor” challenging behaviors are generally managed by the classroom teacher, while “major” challenging behaviors may involve increased support and involvement from the student’s family and school administrator.

Screening and other data that are collected are used to guide the selection of evidence-based practices and interventions that will be used with students. Information such as the time of day, type and function of problem behavior, location, etc. will be considered when selecting appropriate interventions. The effectiveness of selected interventions will be monitored through ongoing data collection and analysis.

Screening Procedures:

Age/Enrollment Status	Screening Process
3- and 4-year-old: Not enrolled in school	<ul style="list-style-type: none"> • District screening days are scheduled throughout the school year. • Parent/guardian takes child to the local school to participate in the screening. • Child is screened in 5 developmental areas (cognition, language, personal-social, adaptive and motor).

	<ul style="list-style-type: none"> • All screening results are discussed with the parent/guardian.
3-year-old: Attending preschool due to a disability	<ul style="list-style-type: none"> • If the teacher has a concern in an additional area the teacher will screen the student in the area of concern. A screening will occur for all First Steps students in areas not receiving services.
4-year-old: Enrolled in preschool due to income	<ul style="list-style-type: none"> • All income eligible 4-year-olds will be screened within the first 30 school days of enrollment.

If no concerns are noted during the screening process, these children will not proceed any further in the screening process. If concerns are noted, the children will have the opportunity to receive interventions. The problem solving team will meet and develop an intervention and progress monitoring plan for the child as described in the Multi-tiered Service Delivery Section on p. 5 and in the Problem Solving Process Model on p.9.

Multi-tiered Systems of Behavioral Support

PBIS, as with PCIS, incorporates a multi-tiered system of service delivery in which each tier represents an increasingly intense level of services. Students move fluidly from tier to tier.

Tier 1 provides all students high quality, scientifically-based, developmentally appropriate behavioral instruction within the general education classroom or the core instruction. As previously described, the behavioral expectations taught to our students include:

The Three B's at MEC

Be Safe, Be Kind, Be Helpful

These expectations are posted on bulletin boards, in newsletters, and in classrooms. These expectations are explicitly taught in class-wide lessons four times per year; after summer break, fall break, Christmas break, and spring break. They are also taught and reinforced daily through formal lessons, teacher interactions with students, daily announcements and newsletters. Rewards for good behavior are directly connected to these expectations as are corrections of inappropriate behavior.

At Tier 2 and Tier 3, students receive additional behavior instruction matched to their needs, based on screening results and teacher observations of behavior. Specific behavioral skills will be identified, instructed and reinforced. A plan for monitoring progress with these new interventions will be developed. If the progress monitoring data indicates that this additional level of support is insufficient, additional support will be added. If needed, additional data on the behaviors of concern may be collected including Functional Behavioral Assessments.

Instruction in Tier 3 typically involves individual instruction focused on the targeted area(s). The frequency and duration of the intervention(s) is determined by the assessment data collected.

Professional Development and Staff Support

The PBIS Leadership team is comprised of members who have received professional development in PBIS practices. Ongoing professional development will occur with this leadership team as needed for areas of development to stay abreast of ongoing research and emerging information regarding changes in evidence-based practice. The PBIS coach and administrator are primarily responsible for coordinating and facilitating this ongoing professional development. The PBIS Leadership team will share this information with staff, families and other stake-holders as it is made available to them.

Kentucky Center for Instructional Discipline

SCHOOL-WIDE POSITIVE BEHAVIORAL INTERVENTIONS AND SUPPORTS LEADERSHIP TEAM KENTUCKY PBIS IMPLEMENTATION

School Name: _____ Memorial Education Center _____ District: ___Pulaski_____ Date: _____

Name	School Position	Team Role	Email
Amy Smith	Principal	Team Leader/Recorder	
Jamie Godby	*Parent	Communicator/Team Member	
Andrea England	School Psychologist	Coach/Data Technology	
Keena Norton	Teacher	Communicator/List & Time Keeper/Team Member	
Amy Wooldridge	Teacher	Communicator/Team Member	
Stacy Brown	Teacher	Communicator/Team Member	
Oreida Whiles	Teacher	Communicator/Team Member	
Dot Rowe	Clerical Aide	Keeper of Manual	

PBIS Team Meeting Dates

Month	Meeting Date(s)	Month	Meeting Date(s)	Month	Meeting Date(s)
July		November		March	
August		December		April	
September		January		May	
October		February		June	

***The school leadership team should contain a representative who is uniquely a parent, not a staff member who also has children in the school. It is acceptable, but less beneficial if the parent is unable to attend the training but will participate on the leadership team at the school level. If the team can recruit more than one parent, the benefit for the students, families, staff and school can increase exponentially.**

****If the school has a Family Resource Center or a Youth Service Center the Director of the FRYSC should be a member of the team.**

PBIS TIER 1 ACTION PLAN
POSITIVE BEHAVIORAL INTERVENTIONS AND SUPPORTS

SCHOOL YEAR:

Include the development, implementation, and management activities of your plan. All Critical Elements should be addressed within your plan.

Critical Element	Action/Activity	Who is responsible?	When will it be started?	When will it be completed?	How will it be monitored?	When will we evaluate it?

CRITICAL ELEMENTS

<ol style="list-style-type: none">1. PBIS Team established (membership, meeting times, roles, mission)2. Faculty commitment3. Effective procedures for dealing with discipline4. Data entry and analysis plan established5. Expectations and rules developed	<ol style="list-style-type: none">6. Reward/recognition program established7. Lesson plans for teaching expectations/rules8. Implementation plan9. Classroom systems10. Evaluation
--	--



Memorial Education Center

Ways to Be



Ways To Be	Classroom	Hallways	Playground/ Recess	Cafeteria	Restrooms	Arrival/ Dismissal	Gross Motor	Bus
Be Safe	Feet on floor Hands to self	Walking feet Stay in line	Ask for help when needed Use equipment appropriately	Stay in line Walk Stay in seat	Wash and dry hands Walk	Walk with your grown-up	Use equipment appropriately Good hands, good feet Follow directions	Back to back and bottom to bottom Follow directions
Be Kind	Talk nicely Share Take turns	Inside voices Listening ears Hands to yourself	Share with your friends Good hands, good feet	Have inside voice Good hands, good feet	Wait your turn on the waiting wall	Walk in the hallway Say hello and goodbye to teachers and staff	Take turns Share Inside voices	Inside voices Good hands, good feet
Be Helpful	Clean up with friends Push in chairs Put garbage in trash	Stay in line	Put toys away when finished Line up when asked to go in	Clean up your area	Go, flush, wash Throw away towel Stay in line	Put backpack/folder away Wash hands	Put toys/equipment away Line up when asked	Keep backpacks zipped and safe



Memorial Education Center Behavioral Screening Tool

DIRECTIONS:

Listed below is your student roster. Please rate the degree to which each student listed meets your school-wide expectations based on the key at the bottom of the page. Please mark every item. If you don't know or are unsure of your response to an item, then give your best approximation.

Last Name	First Name	DOB	Safe	Kind	Helpful

Key

1 = Always

2 = Almost

Always

3 = Sometimes

4 = Rarely

5 = Almost Never

Appendix E – Discipline Referral Form and Definitions

Student:	Memorial Education Center DISCIPLINE REFERRAL FORM	Date of Incident:
Grade/Team:	Time of Offense: Location:	Referring Staff's Signature:

Guidelines for Success not followed: _____ Be Safe _____ Be Kind _____ Be Helpful																		
The teacher has used the following interventions or consequences:																		
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <input type="checkbox"/> Re-teaching (practicing) correct behavior <input type="checkbox"/> Parent contact (phone, note, etc) <input type="checkbox"/> Restructuring environment <input type="checkbox"/> Behavior improvement plan <input type="checkbox"/> Recording behavior on daily chart <input type="checkbox"/> Discipline log <input type="checkbox"/> Refer to counselor </div> <div style="width: 33%;"> <input type="checkbox"/> Time Out <input type="checkbox"/> Changed Student Seat <input type="checkbox"/> Loss of privileges <input type="checkbox"/> Sit with Teacher <input type="checkbox"/> Intra-team Time out <input type="checkbox"/> Restitution/Repair/Replace <input type="checkbox"/> Referral to FRC </div> <div style="width: 33%;"> <input type="checkbox"/> Increased positive intervention <input type="checkbox"/> Classroom problem solving meeting <input type="checkbox"/> Self-monitoring plan <input type="checkbox"/> Student/Teacher conference <input type="checkbox"/> Parent Conference <input type="checkbox"/> Planned ignoring <input type="checkbox"/> Other _____ </div> </div>																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">Problem Behavior</th> <th style="width: 15%;"> <input type="checkbox"/> Minor Offense </th> <th style="width: 15%;"> <input type="checkbox"/> Major Offense </th> <th style="width: 20%;">Perceived Motivation</th> <th style="width: 15%;">Action Taken</th> </tr> </thead> <tbody> <tr> <td> Primary Tracked Behaviors: <input type="checkbox"/> Defiance/Insubordination/Non-Compliance <input type="checkbox"/> Physical Aggression <input type="checkbox"/> Property Damage/Vandalism <input type="checkbox"/> Running Away/AWOL <input type="checkbox"/> Self-Injurious Behaviors <input type="checkbox"/> Profanity/Obscenity <input type="checkbox"/> Bullying </td> <td></td> <td> <input type="checkbox"/> Cheating/Lying <input type="checkbox"/> Disrespect <input type="checkbox"/> False Fire Alarm <input type="checkbox"/> Fighting <input type="checkbox"/> Forgery <input type="checkbox"/> Gang Affiliation Display <input type="checkbox"/> Harassment/Discrim <input type="checkbox"/> Physical Aggression <input type="checkbox"/> Possession/Use of Tobacco <input type="checkbox"/> Inappropri Display of Affection <input type="checkbox"/> Tardy <input type="checkbox"/> Technology Violation <input type="checkbox"/> Theft <input type="checkbox"/> Weapons Use/Poss <input type="checkbox"/> Other: </td> <td> <input type="checkbox"/> Obtain Peer Attention <input type="checkbox"/> Obtain Adult Attention <input type="checkbox"/> Obtain Item/Activity <input type="checkbox"/> Avoid Task/Activity <input type="checkbox"/> Avoid Peers <input type="checkbox"/> Avoid Adults <input type="checkbox"/> Unclear/Unknown <input type="checkbox"/> Other </td> <td> <input type="checkbox"/> Time in office <input type="checkbox"/> Loss of privileges <input type="checkbox"/> Student Conference <input type="checkbox"/> Parent Contact <input type="checkbox"/> Time Out/Detention <input type="checkbox"/> Restitution/Repair/Replace <input type="checkbox"/> Individualized Instruction <input type="checkbox"/> Bus Suspension <input type="checkbox"/> Action Pending <input type="checkbox"/> Other </td> </tr> <tr> <td> Other Possible Problem Behaviors: <input type="checkbox"/> Alcohol <input type="checkbox"/> Arson <input type="checkbox"/> Bomb Threat <input type="checkbox"/> Bullying </td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Problem Behavior	<input type="checkbox"/> Minor Offense	<input type="checkbox"/> Major Offense	Perceived Motivation	Action Taken	Primary Tracked Behaviors: <input type="checkbox"/> Defiance/Insubordination/Non-Compliance <input type="checkbox"/> Physical Aggression <input type="checkbox"/> Property Damage/Vandalism <input type="checkbox"/> Running Away/AWOL <input type="checkbox"/> Self-Injurious Behaviors <input type="checkbox"/> Profanity/Obscenity <input type="checkbox"/> Bullying		<input type="checkbox"/> Cheating/Lying <input type="checkbox"/> Disrespect <input type="checkbox"/> False Fire Alarm <input type="checkbox"/> Fighting <input type="checkbox"/> Forgery <input type="checkbox"/> Gang Affiliation Display <input type="checkbox"/> Harassment/Discrim <input type="checkbox"/> Physical Aggression <input type="checkbox"/> Possession/Use of Tobacco <input type="checkbox"/> Inappropri Display of Affection <input type="checkbox"/> Tardy <input type="checkbox"/> Technology Violation <input type="checkbox"/> Theft <input type="checkbox"/> Weapons Use/Poss <input type="checkbox"/> Other:	<input type="checkbox"/> Obtain Peer Attention <input type="checkbox"/> Obtain Adult Attention <input type="checkbox"/> Obtain Item/Activity <input type="checkbox"/> Avoid Task/Activity <input type="checkbox"/> Avoid Peers <input type="checkbox"/> Avoid Adults <input type="checkbox"/> Unclear/Unknown <input type="checkbox"/> Other	<input type="checkbox"/> Time in office <input type="checkbox"/> Loss of privileges <input type="checkbox"/> Student Conference <input type="checkbox"/> Parent Contact <input type="checkbox"/> Time Out/Detention <input type="checkbox"/> Restitution/Repair/Replace <input type="checkbox"/> Individualized Instruction <input type="checkbox"/> Bus Suspension <input type="checkbox"/> Action Pending <input type="checkbox"/> Other	Other Possible Problem Behaviors: <input type="checkbox"/> Alcohol <input type="checkbox"/> Arson <input type="checkbox"/> Bomb Threat <input type="checkbox"/> Bullying				
Problem Behavior	<input type="checkbox"/> Minor Offense	<input type="checkbox"/> Major Offense	Perceived Motivation	Action Taken														
Primary Tracked Behaviors: <input type="checkbox"/> Defiance/Insubordination/Non-Compliance <input type="checkbox"/> Physical Aggression <input type="checkbox"/> Property Damage/Vandalism <input type="checkbox"/> Running Away/AWOL <input type="checkbox"/> Self-Injurious Behaviors <input type="checkbox"/> Profanity/Obscenity <input type="checkbox"/> Bullying		<input type="checkbox"/> Cheating/Lying <input type="checkbox"/> Disrespect <input type="checkbox"/> False Fire Alarm <input type="checkbox"/> Fighting <input type="checkbox"/> Forgery <input type="checkbox"/> Gang Affiliation Display <input type="checkbox"/> Harassment/Discrim <input type="checkbox"/> Physical Aggression <input type="checkbox"/> Possession/Use of Tobacco <input type="checkbox"/> Inappropri Display of Affection <input type="checkbox"/> Tardy <input type="checkbox"/> Technology Violation <input type="checkbox"/> Theft <input type="checkbox"/> Weapons Use/Poss <input type="checkbox"/> Other:	<input type="checkbox"/> Obtain Peer Attention <input type="checkbox"/> Obtain Adult Attention <input type="checkbox"/> Obtain Item/Activity <input type="checkbox"/> Avoid Task/Activity <input type="checkbox"/> Avoid Peers <input type="checkbox"/> Avoid Adults <input type="checkbox"/> Unclear/Unknown <input type="checkbox"/> Other	<input type="checkbox"/> Time in office <input type="checkbox"/> Loss of privileges <input type="checkbox"/> Student Conference <input type="checkbox"/> Parent Contact <input type="checkbox"/> Time Out/Detention <input type="checkbox"/> Restitution/Repair/Replace <input type="checkbox"/> Individualized Instruction <input type="checkbox"/> Bus Suspension <input type="checkbox"/> Action Pending <input type="checkbox"/> Other														
Other Possible Problem Behaviors: <input type="checkbox"/> Alcohol <input type="checkbox"/> Arson <input type="checkbox"/> Bomb Threat <input type="checkbox"/> Bullying																		

Others Involved in Incident: ☐ None ☐ Peer(s) ☐ Teacher ☐ Staff ☐ Substitute ☐ Other ☐ Unknown

Restraint/Seclusion: ☐ None ☐ Restraint ☐ Seclusion ☐ Restraint & Seclusion

Description of Incident:							
Administrator's Comments:							
Administrative Referral to:							
<input type="checkbox"/>	Counselor	<input type="checkbox"/>	FRC	<input type="checkbox"/>	Outside Agency	<input type="checkbox"/>	SRO
<input type="checkbox"/>	Student Services	<input type="checkbox"/>	RTI	<input type="checkbox"/>	PBIS Team	<input type="checkbox"/>	Other

Student Signature

Parent Signature

Principal Signature

Office Discipline Referral Definitions

Note: Running Away/AWOL is to be recorded as “Inappropriate Location” in SWIS. Self-Injurious Behaviors will be recorded as “Other Behavior” in SWIS, and Profanity/Obscenity will be recorded as “Abusive Language.”

<u>SWIS - PROBLEM BEHAVIOR</u>	<u>Definition for Problem Behavior</u>
ABUSIVE LANGUAGE/INAPPROPRIATE LANGUAGE/PROFANITY	Student engages in profane, vulgar or obscene behaviors. Student causes, creates or distributes or attempts to cause, create or distribute profane, vulgar, or obscene material.
ARSON	Student plans and/or participates in malicious burning of property.
BOMB THREATS/FALSE ALARM	Student delivers a message of possible explosive materials being on-campus, near campus, and/or pending explosion.
BULLYING	The student engages in behaviors such as, hazing, menacing, taunting, intimidation, subjecting others to physical contact, or other threatening language or behavior, including but not limited to the use of electronic or online methods.
DEFIANCE/INSUBORDINATION/NON-COMPLIANCE	Student engages in refusal to follow directions or talks back.
DISRESPECT	Student delivers socially rude or dismissive messages to adults or students.
DISRUPTION	Student engages in behavior causing an interruption in a class or activity. Disruption includes sustained loud talk, yelling, or screaming; noise with materials; horseplay or roughhousing; and/or sustained out-of-seat behavior, any conduct that materially or substantially interferes with another student’s access to educational opportunities or programs, including the ability to attend, participate in and benefit from instructional and extracurricular activities.
DRESS CODE VIOLATION	Student wears clothing that does not fit within the dress code guidelines practiced by the school/district.
FIGHTING	The student assaults, batters, or physically, sexually or verbally abuses a teacher, another student or other school personnel.
FORGERY/THEFT/PLAGIARISM	Forgery: The student has signed a person’s name without that person’s permission or claims someone else’s work as their own. Theft: Student is involved by being in possession of, having passed on, or being responsible for removing someone else's property.
GANG AFFILIATION DISPLAY	Student uses gesture, dress, and/or speech to display affiliation with a gang.

Office Discipline Referral Definitions

HARASSMENT	Harassment/Discrimination is intimidation, annoyance, or alarm to another person by threats of or actual physical contact or violence; the creation, by whatever means, of a climate of hostility, intimidation, fear of harm, humiliation, or embarrassment; or the use of language, conduct or symbols in such manner as to be commonly understood to convey hatred, contempt, or prejudice or to have the effect of insulting or stigmatizing an individual. Harassment/Discrimination is behavior based on race, color, national origin, age, religion, marital status, political beliefs, sex or disability that is sufficiently severe, pervasive, or objectively offensive that it adversely affects a student's education or creates a hostile or abusive educational environment. <i>Threats that are independent of discrimination should be coded in Infinite Campus as "Threats". ... Students shall not threaten to cause injury or harm to another person. Threat shall refer to a communication made by any means including but not limited to electronic and/or online methods.</i>
INAPPROPRIATE DISPLAY OF AFFECTION	Student engages in inappropriate, consensual (as defined by school) verbal and/or physical gestures/contact, of a sexual nature to another student/adult.
INAPPROPRIATE LOCATION/ OUT OF BOUNDS AREA	Student is in an area that is outside of school boundaries (as defined by school).
LYING/CHEATING	Cheating: The student falsifies a document, delivers a message that is not true, or claims someone else's work as their own. Lying: Student delivers message that is untrue.
OTHER BEHAVIOR	Student engages in problem behavior not otherwise listed.
PHYSICAL AGGRESSION	Student engages in actions involving serious physical contact where injury may occur (e.g., hitting, punching, hitting with an object, kicking, hair pulling, scratching, etc.).
PROPERTY/DAMAGE/ VANDALISM (Also Property Misuse)	Any student, organization, or group of students that participates in activities that destroy, deface, damage or remove school property or personal property on school property or at school-sponsored activities.
SKIP CLASS	Student leaves or misses class or leaves the building without permission.
TARDY	Student is late (as defined by the school) to class or the start of the school day.
TECHNOLOGY VIOLATION	Student engages in inappropriate (as defined by Acceptable Use Policy and Procedure) use of cell phone, pager, music/video players, camera, computer and/or other device.
USE POSSESSION OF WEAPONS	Student is in possession of knives and/or fire arms (real or look alike). See school/district policy.

Office Discipline Referral Definitions

USE/POSSESSION OF ALCOHOL	Includes the purchase, possession, attempt to possess, use, being under the influence, selling, or transferring of alcoholic beverages on school property, at any location of a school-sponsored activity, or en route to or from school or a school-sponsored activity.
USE/POSSESSION OF DRUGS	Includes the purchase, possession, attempt to possess, use, being under the influence, selling, or transferring of the following on school property, at any location of a school-sponsored activity, or en route to or from school or a school-sponsored activity: 1) Controlled drug substances and drug paraphernalia; 2) Substances that "look like" a controlled substance. In instances involving look-alike substances, there must be evidence of the student's intent to pass off the item as a controlled substance; or 3) Unauthorized prescription, OTC (over-the-counter), and other abused or controlled substances.
USE/POSSESSION OF TOBACCO	Student is in possession of or is using tobacco.