



## Behaviour support plan (BSP) template (PBS.B4)

Date of plan: \_\_\_\_\_ Scheduled for review: \_\_\_\_\_

Details of client	
Name:	DOB:
Address:	
Parent/Carer Name:	
School:	Setting:

Contributors to the plan		
Reason for referral		
Sources of information		
Date	Data collection	Attached



Problem behaviour		
Behaviour	Frequency	Duration

Possible reason for behaviour

Proactive strategies	
<i>Behaviour 1:</i>	
Antecedent	Environmental support
<i>Behaviour 2:</i>	
Antecedent	Environmental support



<i>Behaviour 3:</i>	
<b>Antecedent</b>	<b>Environmental support</b>
<b>New behaviour</b>	<b>Teaching strategies/reinforcement</b>
<b>Old behaviour</b>	<b>Reinforcement</b>

<b>Reactive strategies</b>	
<i>General tips:</i>	
<b>Behaviour</b>	<b>Staff response</b>
<b>Level 1</b>	
<b>Level 2</b>	
<b>Level 3</b>	
<b>Level 4</b>	



Training		
Tool	Staff to be trained	Trainer/s

Endorsements	
<b>Teacher:</b>	
Name:	
Phone:	Email:
Signature:	Date:
<b>Coordinator:</b>	
Name:	
Phone:	Email:
Signature:	Date:
<b>Parent/Carer:</b>	
Name:	
Signature:	Date:
<b>Learning Support Team representative:</b>	
Name:	
Phone:	Email:
Signature:	Date:



Endorsements	
<b>Learning Support Team representative:</b>	
Name:	
Phone:	Email:
Signature:	Date:
<b>Learning Support Team representative:</b>	
Name:	
Phone:	Email:
Signature:	Date:
<b>Principal:</b>	
Name:	
Position/role:	Team/location:
Phone:	Email:
Signature:	Date:
<b>Additional endorsements required:</b>	
Name:	
Position/role:	Team/location:
Phone:	Email:
Signature:	Date:



## Training record form

<b>Delivered by:</b>	
<b>Site name:</b>	
<b>Site location:</b>	
<b>Subject:</b>	
<b>Date of training:</b>	
<b>Acknowledgement:</b>	I have received the consultation as stated above and I fully understand the consultation given.

Employee Name (Print)	Employee Signature



Employee Name (Print)	Employee Signature