

FUNCTIONAL ASSESSMENT INTERVIEW FORM - YOUNG CHILD

Child with Problem Behavior(s): Jackson Date of Interview: 9/25

Age: 4 Yrs _____ Mos _____ Sex: M* F

Interviewer: Lise Respondent(s): Carey

A. DESCRIBE THE BEHAVIOR(S)

1. What are the behaviors of concern? For each, define how it is performed, how often it occurs per day, week, or month, how long it lasts when it occurs, and the intensity in which it occurs (low, medium, high).

	<u>Behavior</u>	<u>How is it performed?</u>	<u>How often?</u>	<u>How long?</u>	<u>Intensity?</u>
1.	<u>Screams</u>		<u>4-10x/day</u>	<u>Brief</u>	<u>Very disruptive</u>
2.	<u>Throws toys, objects</u>		<u>4-10x/day</u>	<u>Brief</u>	<u>Very disruptive</u>
3.	<u>Yells shut-up</u>		<u>4-10x/day</u>	<u>Brief</u>	<u>Very disruptive</u>
4.	<u>Throws chair</u>		<u>2x in past 6 months</u>		<u>Dangerous</u>
5.					
6.					

2. Which of the behaviors described above occur together (e.g., occur at the same time; occur in a predictable "chain"; occur in response to the same situation)?

May start with screaming or saying shut-up and then will throw object.

B. DEFINE POTENTIAL ECOLOGICAL EVENTS THAT MAY AFFECT THE BEHAVIOR(S)

1. What *medications* does the child take, and how do you believe these may affect his/her behavior?

None

2. What *medical complication* (if any) does the child experience that may affect his/her behavior (e.g., asthma, allergies, rashes, sinus infections, seizures)?

None

3. Describe the *sleep cycles* of the child and the extent to which these cycles may affect his/her behavior.

No issues

4. Describe the *eating routines and diet* of the child and the extent to which these routines may affect his/her behavior.

Eats well, very healthy 4 year old



5. Briefly list the child's typical daily schedule of activities and how well he/she does within each activity.

DAILY ACTIVITIES

Activity	Child's Reaction
6:00am	<i>Arrival.....A little stiff; looks out window; difficulty joining group</i>
7:00am	<i>Planning.....Needs prompts</i>
	<i>Centers.....Does o.k.; rigidity of activities; favorite activities are computer/blocks with cars; may have problems with peers or when asked to do an activity</i>
8:00am	
9:00am	<i>Hand washing/Snack.....Does o..k. unless it's not the snack he wants</i>
	<i>Wiggle time/Small group.....Reluctant to participate; needs prompts; sometimes refuses to participate; moves to books; is explosive when redirected</i>
10:00am	
11:00am	<i>Story Time.....Resists, gets own book</i>
12:00pm	<i>Outside.....No problem; restricted repertoire of activities and partners</i>
1:00pm	<i>Lunch.....Does well</i>
2:00pm	<i>Outdoor play.....No problem; restricted repertoire of activities and partners</i>
	<i>Afternoon circle.....Can be difficult, often does not want to participate, resists and if I insist, can be explosive</i>
3:00pm	
4:00pm	<i>Dismissal.....Animated to see parents, leaves without problems</i>
5:00pm	
6:00pm	
7:00pm	
8:00pm	
9:00pm	

6. Describe the extent to which you believe activities that occur during the day are *predictable* for your child. To what extent does the child know what he/she will be doing and what will occur during the day (e.g., when to get up, when to eat breakfast, when to play outside)? How does your child know this?

Knows schedule

7. What choices does the child get to make each day (e.g., food, toys, activities)?

Understands choices

C. DEFINE EVENTS AND SITUATIONS THAT PREDICT OCCURRENCES OF THE BEHAVIOR(S)

1. **Time of Day:** *When* are the behaviors most and least likely to happen?

Most likely: *Early morning*



Least likely: *Outdoor play in morning and afternoon*

2. **Settings:** *Where are the behaviors most and least likely to happen?*

Most likely: *Classroom, small group*

Least likely: *Outside*

3. **Social Control:** *With whom are the behaviors most and least likely to happen?*

Most likely: *Teacher*

Least likely: *Peers who will not make demands on him*

4. **Activity:** *What activities are most and least likely to produce the behaviors?*

Most likely: *Structured activity, demands, social interactions, sharing objects*

Least likely: *Reading a book by himself*

5. Are there particular situations, events, etc. that are not listed above that "set off" the behaviors that cause concern (particular demands, interruptions, transitions, delays, being ignored, etc.)?

If he falls or gets bumps

6. What one thing could you do that would most likely make the problem behavior occur?

Insist on participation in something he does not want to do

7. What one thing could you do to make sure the problem behavior did not occur?

Give him all the cars he wants; talk about cars



2. Describe the child's most typical response to the following situations:

a. Are the above behavior(s) more likely, less likely, or unaffected if you present him/her with a difficult task?

More likely

b. Are the above behavior(s) more likely, less likely, or unaffected if you interrupt a desired event (eating ice cream, watching a video)?

More likely

c. Are the above behavior(s) more likely, less likely, or unaffected if you deliver a "stern" request/command/reprimand?

More likely

d. Are the above behavior(s) more likely, less likely, or unaffected if you are present but do not interact with (ignore) the child for 15 minutes.

Less likely

e. Are the above behavior(s) more likely, less likely, or unaffected by changes in routine?

More likely

f. Are the above behavior(s) more likely, less likely, or unaffected if something the child wants is present but he/she can't get it (i.e., a desired toy that is visible but out of reach)?

More likely

g. Are the above behavior(s) more likely, less likely, or unaffected if he/she is alone (no one else is present)?

Less likely

F. DEFINE THE EFFICIENCY OF THE UNDESIRABLE BEHAVIOR(S)

1. What amount of physical effort is involved in the behaviors (e.g., prolonged intense tantrums vs. simple verbal outbursts, etc.)?

Simple outburst that are brief, but highly disruptive

2. Does engaging in the behaviors result in a "payoff" (getting attention, avoiding work) every time? Almost every time? Once in a while?

We try to keep him calm, we usually give in right away



3. How much of a delay is there between the time the child engages in the behavior and gets the “payoff”? Is it immediate, a few seconds, longer?

Immediate

G. DEFINE THE PRIMARY METHOD(S) USED BY THE CHILD TO COMMUNICATE

1. What are the general expressive communication strategies used by or available to the child? (e.g., vocal speech, signs/gestures, communication books/boards, electronic devices, etc.) How consistently are the strategies used?

Good verbal communication; advanced in his language on some topics

2. If your child is trying to tell you something or show you something and you don’t understand, what will your child do? (repeat the action or vocalization? modify the action or vocalization?)

Doesn't repair well; is mumbly if you don't get it the first time

3. Tell me how your child expresses the following:

MEANS

	GRAB & REACH	GIVE	POINT	LEAD	GAZE SHIFT	MOVE TO YOU	MOVE AWAY FROM YOU	HEAD NOD/HEAD SHAKE	FACIAL EXPRESSION	VOCALIZE	IMMEDIATE ECHO	DELAYED ECHO	CREATIVE SINGLE WORD	CREATIVE MULTI WORD	SIMPLE SIGNS	COMPLEX SIGNS	SELF - INJURY	AGGRESSION	TANTRUM	CRY OR WHINE	OTHER	NONE	
<u>FUNCTIONS</u>														X									
Requests an Object														X									
Requests an Action														X									
Protests or Escapes														X									
Requests Help														X									
Requests a Social Routine																							
Requests Comfort						X																	
Indicates Illness														X									
Shows you something														X									



NOTES:

4. With regard to receptive communication ability:

a. Does the child follow verbal requests or instructions? If so, approximately how many? (List, if only a few).

Understands everything you may say

b. Is the child able to imitate someone demonstrating how to do a task or play with a toy?

Yes, but may refuse

c. Does the child respond to sign language or gestures? If so, approximately how many? (List, if only a few.)

Understands well

d. How does the child tell you “yes” or “no” (if asked whether he/she wants to do something, go somewhere, etc.)?

Speaks

H. WHAT EVENTS, ACTIONS, AND OBJECTS ARE SUPPORTIVE OR PRESENT CHALLENGES TO THE CHILD

1. Describe the things that your child really enjoys. For example, what makes him/her happy? What might someone do or provide that makes your child happy?

Computer, cars, blocks, round food, chairs with the word taped to it, the color yellow, and things that are yellow

2. What kinds of things have you or your child’s care providers done to try and change the problem behaviors?

*Warnings – effective
Follow through – “I’ll help you”
Don’t rush him. Reprimand may set him off more.*



I. DEVELOP SUMMARY STATEMENTS FOR EACH MAJOR PREDICTOR AND/OR CONSEQUENCE

Distant Setting Event	Triggers	Problem Behavior	Maintaining Consequence	Function

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