

POSITIVE BEHAVIOR SUPPORT PLAN

What's inside?

The following packet contains materials and resources that will help you rethink discipline and create opportunities for student learning and engagement.

The materials included use both preventative and responsive strategies to inspire and support positive student behaviors. We hope to equip you with the tools to embrace Restorative Justice Practices and Bullying Prevention in your classroom.

Restorative Justice Practices are a set of informal and formal strategies intended to:

- (a) build relationships and a sense of community to prevent conflict and wrongdoing; and (b) respond to wrongdoings, with the intention to repair any harm that was a result of the wrongdoing.
- Preventative strategies include community or relationship building circles, and the use of restorative language. Some responsive strategies include the use of restorative questions within a circle or conferencing format, again with the intention of repairing the wrong that happened as a result of the behavior. The restorative questions, while varied in exact language, ask the student to consider: what happened? who did it impact? how do you make it right?

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THINK SHEET

| NAME: | AME: DATE: | | | |
|----------------------|-----------------|--------|-------------|-----------|
| I WAS NOT (CIRCLE AL | L THAT APPLY): | | | |
| FOLLOWING RULES BE | EING RESPECTFUL | BEING | RESPONSIBLE | LISTENING |
| FOLLOWING DIRECTIONS | BEING COOPE | RATIVE | BEING SAFE | OTHER |
| AND | | | | |
| | | | | |
| | | | | |
| I SHOULD HAVE | | | | |
| | | | | |
| | | | | |
| THEN | | | | |
| | | | | |
| | | | | |
| SO FROM NOW ON I | | | | |
| | | | | |
| | | | | |
| | | | | |



RECOVERY TIME THINK SHEET

| NAME: | DATE: | | | | |
|------------|-------------|-------------|----------|--------------------|-------------|
| I'M FEELII | NG: | | | | |
| 00 | | | (C) | 0_0 | 00 |
| ANGRY | HAPPY | FRIGHTENED | GUILTY | EMBARRASSED | SAD |
| O I CH | IOSE TO: | | | I COULD HAVE: | |
| | | | | | |
| DID I APO | LOGIZE? | YES NO | 0 | | |
| DO I NEEI | D TO APOLO | OGIZE? YE | s No | | |
| Student | t Signature | — Teacher S | ignature | Parent/Guardia | n Signature |



RECOVERY TIME THINK SHEET

| NAME: | DATE: | |
|---|---------------|--|
| I FEEL: Sad Alone Angry | | |
| Angry Foolish Embarrassed Silly | | |
| I CHOSE TO: Be loud Talk out of turn Ignore direction Sass | | |
| I COULD HAVE: Been more respectful Been more responsible Kept our classroom safe | | |
| DO I NEED TO APOLOGIZE? YES NO | MY SIGNATURE: | |



DAILY BEHAVIOR SHEET

(NAME)

| WILL BE A FRIEND BY | | | |
|-----------------------|---------|-------|-----------|
| | MORNING | LUNCH | AFTERNOON |
| SAYING KIND THINGS | | | |
| DOING KIND THINGS | | | |
| | | | |

GOAL: TO EARN POINTS

TOTAL POINTS EARNED:



STOP AND THINK

| Today we're learning how to make better choic | es. |
|---|--------------|
| NAME: | |
| had some trouble making the best choice for his a talk with me and we completed this form tog | - |
| Please discuss this form with your child. Thank | you. |
| HERE'S WHAT HAPPENED: | |
| | |
| | |
| NEXT TIME, THIS WOULD BE A BETTER CHO | DICE: |
| | |
| | |
| PARENT COMMENTS: | |
| | |
| | |
| DADENT SIGNATURE: | DATE: |



THINK SHEET

| NAME: | DATE: |
|--------------------------------|------------------|
| 1. WHAT EXPECTATION DID I NOT | MEET? |
| | |
| | |
| 2. WHY WAS MY BEHAVIOR A PRO | BLEM? |
| | |
| 3. WHAT COULD I HAVE DONE INS | TEAD? |
| | |
| | |
| 4. DO YOU NEED TO APOLOGIZE TO | O ANYONE? YES NO |
| 5. DID YOU APOLOGIZE? YES | NO TO WHOM? |



FIXING BROKEN RULES

| THE RULE I BROKE WAS: | I BROKE THE RULE BECAUSE: |
|--|---------------------------|
| WHAT SHOULD HAPPEN BECAUSE I BROKE THE RULE? | FROM NOW ON I: |
| HERE IS MY APOLOGY: | |
| SIGNATURE: | DATE: |



POSITIVE BEHAVIOR SUPPORT PLAN

| STUDENT NAME: | GRADE: | DATE: |
|-------------------------|------------|------------------|
| DESIRED BEHAVIORS: | INTERVEN | TION STRATEGIES: |
| 1. | 1. | |
| 2. | 2. | |
| 3. | 3. | |
| SKILLS TO BE TAUGHT: | POSITIVE I | NCENTIVES: |
| 1. | 1. | |
| 2. | 2. | |
| 3. | 3. | |
| PROCEDURES FOR MANAGING | SAFETY SU | JPPORT |
| INAPPROPRIATE BEHAVIOR: | PLAN: | |
| 1. | 1. | |
| 2. | 2. | |
| 3. | 3. | |
| STUDENT: | | |
| TEACHER: | | |
| PARENT/GUARDIAN: | | |



BEHAVIOR IMPROVEMENT FORM

| NAME: | DATE: |
|---|---|
| DID YOU FOLLOW DIRECTION | IS APPROPRIATELY? YES NO |
| WHAT WAS YOUR BEHAVIOR | ? |
| WHAT DID YOU WANT? (CHE | CK OFF THE APPROPRIATE STATEMENT) |
| I wanted attention from the street of t | rom others. |
| I wanted to be in co | ntrol. |
| I wanted to avoid do | oing my homework. |
| I wanted to cause p | roblems because I am sad inside. |
| I wanted to cause p | roblems for others because they don't like me |
| I wanted to | |
| DID YOU GET WHAT YOU WA | NTED? YES NO |
| WHAT COULD YOU DO DIFFE | RENTLY? |
| WILL YOU BE ABLE TO RETUR | RN TO CLASS? YES NO |
| STUDENT: | TEACHER: |



BECOMING A PROBLEM SOLVER

| WHAT IS THE PROBLEM? WHO, WHAT, HOW, and WHY it happened. | STOP and calm down. THINK of a plan. PROBLEM solve wisely. |
|---|--|
| WHAT WAS THE RESULT? | |
| | |
| HOW SHOULD I HAVE SOLVED THE PROBLEM | M? List two better methods. |
| 2. | |
| HOW COULD I HAVE PREVENTED THE PROBI | LEM? |
| | |
| WHAT WILL I DO FROM NOW ON? | |
| MY SIGNATURE: | |



CONFLICT-RESOLUTION

| NAME: | DATE: |
|--|--------------------------------------|
| IDENTIFY THE CONFLICT. WHA | AT'S YOUR PERCEPTION OF THE PROBLEM? |
| | |
| THERE ARE OFTEN SEVERAL OTHERS' PERCEPTIONS OF T | PERSPECTIVES OF A CONFLICT. WHAT ARE |
| | |
| BRAINSTORM POSSIBLE SOL | UTIONS TO RESOLVE THE CONFLICT(S). |
| | |
| WHAT ARE YOU WILLING TO | DO TO RESOLVE THE CONFLICT(S)? |
| | |



CONFLICT-RESOLUTION

| PRIORITIZE THE SOLUTIONS. |
|---|
| |
| DEVELOP AN AGREEMENT AND ACTION PLAN. |
| |
| IDENTIFY A TIMELINE FOR IMPLEMENTATION. |
| |
| HOW WILL YOU EVALUATE THE PROGRESS? |
| |
| MODIFY THE ACTION PLAN IF NECESSARY. |
| |



BEHAVIORAL REFLECTION

| AM WRITING THIS REFLECTION BECAUSE | TODAY, | , I, | | |
|------------------------------------|--------------------|----------------|-----|--|
| | | | | |
| | AM WRITING THIS RE | EFLECTION BECA | USE | |
| | | | | |
| | | | | |
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REFLECTIVE BEHAVIORAL JOURNAL

| WHAT HAPPENED AND WHAT WERE YOU THINKING ABOUT AT THE TIME OF THE INCIDENT? |
|---|
| |
| |
| |
| |
| |
| |
| WHAT HAVE YOU THOUGHT ABOUT SINCE? |
| |
| |
| |
| |
| |
| WHO HAS BEEN AFFECTED BY WHAT HAPPENED AND HOW? |
| |
| |
| |
| |
| |
| |



REFLECTIVE BEHAVIORAL JOURNAL

| WHAT ABOUT THIS HAS BEEN T | HE HARDEST FOR YOU? |
|--------------------------------------|------------------------------------|
| | |
| | |
| | |
| WHAT DO YOU THINK NEEDS TO POSSIBLE? | BE DONE TO MAKE THINGS AS RIGHT AS |
| | |
| | |
| | |
| NAME: | DATE: |
| | |
| SIGNATURE: | |



REFLECTIVE LISTENING FORMULA



Any of the following can show that you understand how your child is feeling or can help your child tell you how he or she feels.

| YOU'RE E | BECAUSE | |
|---|--|--|
| (INSERT FEELING WORD) | (STATE REASON FOR THE FEELING) | |
| SOUNDS LIKE YOU'RE: | | |
| (IN | SERT FEELING WORD OR PHRASE) | |
| YOU SEEM: | | |
| (INSERT F | EELING WORD OR PHRASE) | |
| IT SEEMS LIKE YOU ARE FEELING: | | |
| | (INSERT FEELING WORD OR PHRASE) | |
| LOOKS LIKE YOU'RE FEELING SORT OF: | | |
| | (INSERT FEELING WORD OR PHRASE) | |
| EXAMPLES: | | |
| "You're upset because Bobby took your favorite toy. It is hard when others take things from you." | "You seem sad today." | |
| | "Sounds like you're frustrated." | |
| "You're angry with me because I would not let you go to Sarah's house." | "It seems like you are feeling left out because Joey wouldn't let you play." | |



COUNSELOR REFERRAL FORM

| STUDENT: | DOB: |
|--|---------------------|
| SCHOOL: | GRADE: |
| REFERRED BY: | |
| PARENT/GUARDIAN: | |
| BRIEFLY STATE THE REASON FOR REFERRAL: | |
| | |
| PLEASE LIST ANY BEHAVIORAL, ACADEMIC, OR ENVIR | RONMENTAL CONCERNS: |
| | |
| PLEASE LIST ANY INTERVENTIONS DONE: | |
| | |
| PRINCIPAL'S SIGNATURE: | DATE: |

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