

Handout #9.9 Trigger-Behavior-Response Checklist

(http://www.lehigh.edu/education/adhd/assets/pdf/trigger_br_checklist.pdf)

Directions: For each instance, check all triggers, behaviors, and responses that apply.

PROBLEM BEHAVIOR

Location:	Date:	Time:
<p>Trigger What Happened Before?</p> <p><input type="checkbox"/> Asked to do something</p> <p>_____</p> <p><input type="checkbox"/> Bored – no materials or activities</p> <p><input type="checkbox"/> Could not get something he/she wanted</p> <p><input type="checkbox"/> Stopped from doing a like activity</p> <p><input type="checkbox"/> Loud environment</p> <p><input type="checkbox"/> Another person provoked the child</p> <p><input type="checkbox"/> Child needed to move from one activity _____ to another ---</p> <p>_____</p> <p><input type="checkbox"/> Attention being give to others</p> <p><input type="checkbox"/> Nothing – the behavior was “out of the blue”</p> <p><input type="checkbox"/> Other: (specify: _____)</p> <p>_____</p>	<p>Behavior</p> <p><input type="checkbox"/> Fidgeting</p> <p><input type="checkbox"/> Noncompliance</p> <p><input type="checkbox"/> Off-task</p> <p><input type="checkbox"/> Physical aggression</p> <p><input type="checkbox"/> Verbal aggression</p> <p><input type="checkbox"/> Property destruction</p> <p><input type="checkbox"/> Provoking or teasing others</p> <p><input type="checkbox"/> Running away</p> <p><input type="checkbox"/> Screaming/crying</p> <p><input type="checkbox"/> Tantrum</p> <p><input type="checkbox"/> Other (specify: _____)</p> <p>_____</p>	<p>Response: What Happened After?</p> <p><input type="checkbox"/> Discussed problem behavior</p> <p><input type="checkbox"/> Nothing/ignored</p> <p><input type="checkbox"/> Interrupted/blocked</p> <p><input type="checkbox"/> Verbal redirection to activity</p> <p><input type="checkbox"/> Physical redirection to activity</p> <p><input type="checkbox"/> Physical restraint</p> <p><input type="checkbox"/> Removed from room/area</p> <p><input type="checkbox"/> Required to continue activity</p> <p><input type="checkbox"/> Time-out (duration: _____)</p> <p><input type="checkbox"/> Other (specify: _____)</p> <p>_____</p>

GOOD BEHAVIOR

Location:	Date:	Time:
<p>Trigger What Happened Before?</p> <p><input type="checkbox"/> Asked to do something</p> <p><input type="checkbox"/> Receiving attention (parents/siblings)</p> <p><input type="checkbox"/> Alone</p> <p><input type="checkbox"/> Preferred toys/activities available</p> <p><input type="checkbox"/> Another child initiated play</p> <p><input type="checkbox"/> Playing with another child</p> <p><input type="checkbox"/> Given transition warning (e.g. in 5 minutes you will need to turn off the TV)</p> <p><input type="checkbox"/> Other: (specify: _____)</p>	<p>Behavior</p> <p><input type="checkbox"/> Following directions</p> <p><input type="checkbox"/> Sitting quietly</p> <p><input type="checkbox"/> Staying on-task</p> <p><input type="checkbox"/> Waiting for turn</p> <p><input type="checkbox"/> Cleaning up</p> <p><input type="checkbox"/> Sharing</p> <p><input type="checkbox"/> Waiting</p> <p><input type="checkbox"/> Being kind to other</p> <p><input type="checkbox"/> Transitioning smoothly</p> <p><input type="checkbox"/> Playing nicely with other children</p> <p><input type="checkbox"/> Other (specify: _____)</p> <p>_____</p>	<p>Response: What Happened After?</p> <p><input type="checkbox"/> Given reinforcement</p> <p><input type="checkbox"/> Received attention from others</p> <p><input type="checkbox"/> Ignored</p> <p><input type="checkbox"/> Play continued</p> <p><input type="checkbox"/> Other (specify: _____)</p> <p>_____</p>