TRIGGER-BEHAVIOR-RESPONSE CHECKLIST

Child's Name: _____

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

PROBLEM BEHAVIOR

Location:	**Date:**	**Time:**
Trigger **What Happened Before?** ☐ Asked to do something _____ ☐ Bored-no materials or activities ☐ Could not get something he/she wanted _____ ☐ Stopped from doing a liked activity _____ ☐ Loud environment ☐ Another person provoked the child _____ ☐ Child needed to move from one activity _____ to another _____ ☐ Attention being given to others ☐ Nothing- the behavior was "out of the blue" ☐ Other (specify _____)	**Behavior** ☐ Fidgeting ☐ Noncompliance ☐ Off-task ☐ Physical Aggression ☐ Verbal Aggression ☐ Property Destruction ☐ Provoking or Teasing Others ☐ Running Away ☐ Screaming/Crying ☐ Tantrum ☐ Other (specify _____)	**Response** **What Happened After?** ☐ Discussed problem behavior ☐ Nothing/Ignored ☐ Interrupted/Blocked ☐ Verbal redirection to activity ☐ Physical redirection to activity ☐ Physical Restraint ☐ Removed from room/area ☐ Required to continue activity ☐ Time-out (duration: _____) ☐ Other (specify _____)

GOOD BEHAVIOR

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