

1068–THERAPEUTIC BEHAVIORAL SERVICES (TBS) ASSESSMENT

1. **IDENTIFY THE TARGET BEHAVIOR:** (Frequency of behavior: number of times a behavior occurs in a given period of time, what antecedent events increase or decrease frequency?; Intensity of behavior: severity of the behavior, likelihood to harm self or others, what antecedent events increase or decrease intensity?; Duration of behavior: total length of time of the behavior from start to finish, what antecedent events increase or decrease intensity?)

2. **HISTORY OF BEHAVIOR:**

3. **PREVIOUS INTERVENTIONS UTILIZED:**

4. **ANTECEDENT EVENTS:** (Who is around when the behavior occurs?; What is the activity when the behavior occurs?; When in the day or night do the behaviors occur?; Where do the behaviors occur?; Periods of time when the behavior **never** occurs?)

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- 5. CONSEQUENCES OF THE BEHAVIOR:** (What is the effect of the behavior?; How do others respond?; Are there any physiological effects?; Are there any social interaction effects? An increase or decrease in social demands?; Are there any effects in participation in or access to recreational activities?; Are there any self-stimulatory or self-regulation effects?; Is the youth getting anything tangible?; Is the youth avoiding anything undesirable?; Is the youth receiving additional attention?; Is the behavior self-regulating or self-stimulating?; Is the behavior playful or entertaining?)

- 6. MEANING OF THE BEHAVIOR:** (Working hypothesis about the function or goal of the behavior based on an analysis of the antecedent events, consequences, and mediating factors.; TBS assessment needs to document the “meaning” of the behavior including the relationship between antecedent events and consequences.; The assessment of behavior needs to occur in the context of the youth’s gender and culture.)

- 7. MEDIATING FACTORS:** (Does the youth experience difficulty with perception or interpretation?; Does the youth experience cognitive distortions or cognitive delays?; Does the youth adhere to maladaptive beliefs or attitude?; Is there documented evidence of brain injury or other neurological disorder?) TBS assessment needs to document mediating factors including the youth’s perceptions, cognitions, expectations, etc.

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8. REPLACEMENT BEHAVIORS:

9. SOURCES OF INFORMATION:

- Review of past assessments and other records.
- Interviews of key informants including parents, caregivers, teachers, other service providers.
- Interview of the youth.
- Observation of the youth in key settings including residence, school, and community.

Signature/Title _____
Date

Signature/Title _____
Date

Signature/Title _____
Date

For DHHS-BH office use only:

- Approved
- Does not meet approval, reason: _____

Signature/Title _____
Date

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