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| **TIPS Meeting Minutes Guide****Individual Student Intervention Planning** | **School:** |  |
|  |
|  | **Date** | **Time** (begin and end) | **Location** | **Facilitator** | **Minute Taker** | **Time Keeper** |
| **Today’s Meeting** |  |  |  |  |  |  |
| **Next Meeting** |  |  |  |  |  |  |
| **Group Norms:** | * Engage in discussion
 | * Limit side-bars
 | * Be open to new ideas
 | * Keep a growth mind-set
 |  |  |

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| **Team Members & Attendance** (Place “X” to left of name if present) |
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| **Today’s Agenda Items:** | **Agenda Items for Next Meeting** |
| 1. | Review purpose of meeting | 4. | Develop a Follow Up Plan |  1. | Review FBA Data and Hypothesis |
| 2. | Review student referral and existing data | 5. |  | 2. | PTR Intervention Menu  |
| 3. | PTR Goal Setting (*problem identification*) | 6. |  | 3. | PTR Intervention Plan Development |
| 4. | Establish Daily Progress Monitoring Tool |  |  |  4. | Follow Up Plan |

*Team Purpose:
as a team, we will use the problem solving process to develop an effective, function based intervention plan that the student’s team can implement with fidelity to teach new skills that support academic, behavioral and socio emotional growth within the school setting*

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Goal Setting Meeting**  |
| **Time** | **Information for Team, or Issue for Team to Address** | **Discussion** | **Decisions and Tasks** | **Who?** | **By When?** |
| ***5*** | ***Welcome/agenda review**** *Ensure appropriate team members are in attendance*
* *Review purpose of the meeting*
 |  |  |  |  |
| ***10*** | ***Review of pre-meeting work/data**** *Review of pre-existing student data and reason for referral*
 |  |  |  |  |
| ***20*** | ***PTR Goal Setting*** * *Define primary problem to decrease*
* *Define potential primary behavior to increase*
 |  |  |  |  |
| ***20*** | ***Establish Daily Progress Monitoring Tool**** *Set up daily progress monitoring tool*
* *Ensure those collecting data understand and can use the tool*
 |  |  |  |  |
| ***5*** | ***Develop a Follow Up Plan**** *Schedule appropriate time for classroom observation(s)*
* *Implementer(s) complete PTR Checklist(s)*
* *Implementer(s) complete and send baseline data (e.g. IBRST) to facilitator*
* *Schedule time with the plan implementer(s) to:*
	+ *Compile information from the PTR assessment checklist into the assessment organization table*
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|  |
|  | **Date** | **Time** (begin and end) | **Location** | **Facilitator** | **Minute Taker** | **Time Keeper** |
| **Today’s Meeting** |  |  |  |  |  |  |
| **Next Meeting** |  |  |  |  |  |  |
| **Group Norms:** | * Engage in discussion
 | * Limit side-bars
 | * Be open to new ideas
 | * Keep a growth mind-set
 |  |  |

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| **Team Members & Attendance** (Place “X” to left of name if present) |
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| **Today’s Agenda Items:** | **Agenda Items for Next Meeting** |
| 1. | Review Agenda | 4. | Follow Up Plan |  1. | Review Hypothesis, Plan Components and Student Goal |
| 2. | Review pre-meeting work | 5. |  | 2. | Discuss Fidelity of Implementation |
| 3. | Complete PTR Intervention Menu | 6. |  | 3. | Discuss Effectiveness of Interventions |
| 4. | Develop PTR Plan |  |  |  4. | Follow Up Plan |

*Team Purpose:
as a team, we will use the problem solving process to develop an effective, function based intervention plan that the student’s team can implement with fidelity to teach new skills that support academic, behavioral and socio emotional growth within the school setting*

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Functional Behavior Assessment Review and Behavior Intervention Plan Development** |
| **Time** | **Information for Team, or Issue for Team to Address** | **Discussion** | **Decisions and Tasks** | **Who?** | **By When?** |
| ***5*** | ***Welcome/agenda review**** *Ensure appropriate team members are in attendance*
* *Review purpose of the meeting*
 |  |  |  |  |
| ***15*** | ***Review of pre-meeting work/data**** *Review IBRST or alternative daily progress monitoring tool*
* *Review results of classroom observation*
* *Review assessment organization summary table*
* *Gain consensus on hypothesis(es)*
 |  |  |  |  |
| ***30*** | ***PTR Intervention Menu**** *Rank order interventions*
* *Reach consensus on top ranked interventions from each category to be included in behavior intervention plan.*
 |  |  |  |  |
|  | ***PTR Behavior Intervention Plan Development**** *Task Analyze/Develop each intervention*
 |  |  |  |  |
| ***10*** | ***Follow Up Plan:**** *Schedule time with the plan implementer(s) to:*
	+ *Coach (and/or finish) the intervention plan*
	+ *Develop a plan to promote intervention fidelity*
	+ *Set student goal and timeline*
* *Create associated plan materials*
* *Teach the student the intervention*
* *Schedule follow up meeting with student team to review progress (e.g. 4 weeks after plan implementation)*
 |  |  |  |  |

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| **Today’s Meeting** |  |  |  |  |  |  |
| **Next Meeting** |  |  |  |  |  |  |
| **Group Norms:** | * Engage in discussion
 | * Limit side-bars
 | * Be open to new ideas
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| **Team Members & Attendance** (Place “X” to left of name if present) |
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| **Today’s Agenda Items: (For Each Student Discussed)** | **Agenda Items for Next Meeting** |
| 1. | Review Hypothesis, Plan Components and Student Goal | 4. |  |  1. |  |
| 2. | Discuss Fidelity of Implementation | 5. |  | 2. |  |
| 3. | Discuss Effectiveness of Interventions | 6. |  | 3. |  |
| 4. | Follow Up Plan |  |  |  4. |  |

*Team Purpose:
as a team, we will use the problem solving process to develop an effective, function based intervention plan that the student’s team can implement with fidelity to teach new skills that support academic, behavioral and socio emotional growth within the school setting*

**Previously Defined Problem – Follow Up Meeting(s)**

| **Date of Meeting(s):**  |  | **Student Name:** |   |
| --- | --- | --- | --- |
| **Precise Problem Statement****(Hypothesis Statement from FBA)** | **PTR Plan Components****(Prevent, Teach, Reinforce, Correct, Safety)** | **Goal & Timeline** | **Fidelity of Imp.** | **Effectiveness of Solution** | **Decisions/Tasks** | **Who?** | **By When?** |
|  |  |  | [ ] Not started[ ] Partial implementation[ ] Implemented with fidelity[ ] Stopped | [ ] In first six weeks of implementation[ ] Worse[ ] No change[ ] Improved but not to goal[ ] Met goal  | [ ] Give the plan more time/provide additional student instruction[ ] Retrain the teacher[ ] Modify the plan[ ] Conduct a more comprehensive FBA[ ] Refer for Additional Assessment[ ] Seek additional expertise for contributing factors (e.g. complex mental health needs)[ ] Discontinue the plan |  |  |