

PBSP Workbook

Assess it. Plan it. Implement it. Review it.

For families and support teams navigating Positive Behaviour Support Planning within Alberta's PDD program

★ **Read this page before you begin**

This workbook is meant to grow with you through your child's PBSP journey. It will help you understand how a Positive Behaviour Support Plan is built, how to participate meaningfully in developing the plan, and how to monitor whether the plan is working.

Individual's Name:	
Date of Birth:	
PDD / FSCD File #:	
Parent / Guardian Name:	
Caseworker Name:	
Caseworker Phone / Email:	
Service Provider / Agency:	
Behaviour Consultant (Qualified Person):	
Date Workbook Started:	

How to Use This Workbook

This workbook is your planning toolkit. It follows Alberta's Positive Behaviour Supports best-practice guidelines (ACDS / AHS), adapted for families. Work through each section in order with your Behaviour Support Team. Fill in every section as completely as possible before your planning meeting — and keep updating it as your child's strategies change.

Section	What You Will Do
1	Build Your Behaviour Support Team
2	Complete a Risk Assessment
3	Conduct the Functional Behaviour Assessment (FBA)
4	Define Behaviours of Concern
5	Develop Proactive (Green) Strategies
6	Develop Active / Early Warning (Amber) Strategies
7	Develop Reactive (Red) Strategies
8	Develop Post-Reactive (Blue) Strategies
9	Write PBSP Goals and Objectives
10	Complete the PBSP Summary Table
11	Train the Team and Obtain Consent
12	Monitor, Review, and Fade

★ *Best Practices for Using This Workbook*

Bring this workbook to every meeting with your caseworker, behaviour consultant, and support team.

The individual should be central to every conversation — their voice matters most.

Document changes as they happen — strategies and team members evolve over time.

If you have concerns about how the PBSP process is being conducted, connect with the Parent Partnership Project for support.

1

Build Your Behaviour Support Team

A Behaviour Support Team is the group of people who work together to create, implement, and monitor the PBSP. The individual receiving supports is always at the centre. For complex needs within PDD, the team often includes both community and clinical members.

Role	Description
The Individual	The person the PBSP is for — their voice, dignity, and goals are the priority in every decision.
Parents / Guardians	Provide history, context, and advocacy. Give or withhold informed consent for the plan.
PDD Caseworker	Monitors the PBSP as part of the ISP; ensures it meets PDD program requirements.
Qualified Person / Behaviour Consultant	Psychologist or professional with 2+ years behavioural training and 3+ years experience (ACDS). Leads the FBA and writes the PBSP.
Service Provider / Agency	Coordinates day-to-day implementation; delivers staff training on the plan.
Direct Support Staff	Implement strategies in real time; collect behavioural data; participate in training.
AHS Community Support Team (CST)	For dual diagnosis (IDD + mental health): may include psychologist, psychiatrist, behaviour therapist, OT, nurse, social worker.
Therapists / Specialists	Provide OT, SLP, physiotherapy, or psychology assessments that inform the plan.
Natural Supports	Family friends, community members — informal supports who may also implement strategies.

My Behaviour Support Team — Record Here

Name	Role / Relationship	Phone / Email	Responsibilities in the PBSP

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Complete a Risk Assessment

A risk assessment is the required first step before a PBSP is developed. It provides the big-picture view of situations where the individual may become a danger to themselves, others, or property, and determines whether a Risk Management Plan is also needed.

★ **For PDD Complex Needs / CSND:**

A risk assessment and Risk Management Plan are required before any PBSP strategies — especially restrictive procedures — can be implemented or approved.

Risk Assessment Summary — Record Here

Who completed the risk assessment and their qualifications:	
Date completed:	
Settings / situations where risk is highest:	
Nature of the risk (to self / others / property):	
Severity rating and rationale:	
Is a Risk Management Plan required? (Yes / No — details):	
Where is the Risk Management Plan filed?	

★ ***Risk levels must be re-assessed whenever: behaviour escalates, significant life changes occur, a new placement begins, or the PBSP is reviewed. Always date-stamp updates.***

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Conduct the Functional Behaviour Assessment (FBA)

A Functional Behaviour Assessment (FBA) is a systematic, data-driven process to understand WHEN, WHERE, and WHY behaviours occur. It must be conducted by a Qualified Person and completed before a Comprehensive PBSP is written.

FBA Method	What It Involves	Who Provides Information
Record Review	Review of previous plans, assessments, incident reports, medical and psychiatric history.	Caseworker, agency, family, therapists.
Interviews	Structured conversations about when, where, and why the behaviour occurs.	Individual, family, support staff, educators.
Direct Observation	Observing the individual in natural settings — tracking frequency, duration, intensity.	Behaviour consultant, trained staff.
A-B-C Data Collection	Antecedent (before), Behaviour (what occurred), Consequence (after) — recorded daily.	Direct support staff, family — daily data sheets.
Rating Scales / Tools	Standardised tools: Motivation Assessment Scale (MAS), FAST, Aberrant Behavior Checklist.	Qualified Person, with support team input.
Functional Analysis (if needed)	Structured conditions that test hypotheses about behaviour function. Complex cases only.	Qualified Person (psychologist-level) only.

FBA Summary — Record Here

FBA methods used and dates:	
Identified function(s) of the behaviour (e.g. escape, attention, sensory, access to tangibles):	
Key antecedents / triggers identified:	
Key setting events / establishing operations:	
Consequences maintaining the behaviour:	
Trauma history considered? Summary of findings:	
Environmental or social factors contributing:	
Hypothesis statement (summary of why the behaviour occurs):	

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Define Behaviours of Concern

Every behaviour targeted in the PBSP must have a clear operational definition — one that is observable, measurable, and specific enough that any team member would identify it the same way. Vague labels like 'aggression' or 'non-compliance' are not sufficient.

★ *A good operational definition answers: What does it look like? What does it sound like?*

What does it NOT include? Anyone reading it should identify the behaviour the same way.

Behaviour Definition Table — Record Here (one row per behaviour of concern)

Behaviour Label	Operational Definition (observable and measurable)	How Measured	Baseline Data

Replacement Behaviours (FERBs) — Record Here

For each behaviour of concern, identify the functionally equivalent replacement behaviour (FERB) — one that serves the same function but is socially appropriate and easier to use.

Behaviour of Concern	Function	Replacement Behaviour (FERB)	How It Will Be Taught

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Develop Proactive (Green) Strategies

Proactive strategies address the root causes of behaviour BEFORE it occurs. A strong PBSP has more proactive strategies than reactive ones. These strategies improve quality of life and reduce the need for reactive responses.

Strategy Type	What It Involves
Modify the Physical Environment	Reduce noise, crowding, clutter. Lock away hazards. Create predictable spaces with visual cues.
Modify the Social Environment	Adjust staff tone, group size, interaction style. Reduce demands during high-risk periods.
Address Setting Events	Ensure adequate sleep, nutrition, pain management, medication. Plan around known stressors.
Antecedent Modifications	Adjust or sequence demands. Offer choices. Provide transition warnings. Build in preferred activities.
Teach Replacement Skills	Communication (AAC, signing, PECS), emotional regulation, coping strategies, self-management.
Positive Reinforcement Systems	Identify preferred reinforcers. Build reinforcement schedules that reward desired behaviour consistently.
Environmental Enrichment	Provide access to preferred items, activities, and social interaction to reduce motivation for problem behaviour.
Natural Supports	Strengthen family, peer, and community connections. Build routines around trusted people.
Professional Supports	OT, SLP, physiotherapy, psychology, nursing — as identified by the FBA.

Our Proactive Strategies — Record Here

Strategy Type	Specific Strategy (use action verbs)	Who Implements	When / How Often

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Develop Active / Early Warning (Amber) Strategies

Early warning strategies are used when the first signs of escalation appear — before the behaviour of concern occurs. The goal is to de-escalate and return the individual to calm.

Early Warning Signs — Record Here

List observable signs that the individual is becoming anxious or beginning to escalate (e.g. body language, vocalisation, pacing, withdrawal).

Early Warning Sign (observable)	What It May Mean	Amber Strategy Response

De-escalation Strategies — Record Here

What to SAY (tone, language, phrasing that helps):	
What to DO (actions that help the individual regulate):	
What to AVOID (things that escalate):	
Environmental adjustments to make immediately:	
Who is the best person to respond at this stage?	

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Develop Reactive (Red) Strategies

Reactive strategies are used **ONLY** when the behaviour of concern is occurring. The primary goal is safety. Reactive strategies must be minimal, proportionate, and accompanied by a plan to reduce their use over time.

★ **IMPORTANT** — *Any restrictive procedure must be:*

- Approved by a Qualified Person and documented in the PBSP
- Accompanied by a Restrictive Intervention Reduction Programme
- Compliant with Alberta legislation

Restrictive procedures are a last resort — never a substitute for proactive strategies.

Reactive Strategy Table — Record Here

Behaviour of Concern	Reactive Strategy (step by step)	Who Responds	Restrictive? Y/N	Approved By

Restrictive Interventions — Additional Documentation

Type of restrictive intervention (if any) and justification:	
Legal / regulatory authorisation obtained (date, who authorised):	
Fade-out plan — how will the restrictive procedure be reduced over time?	
Review schedule for restrictive procedures:	

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Develop Post-Reactive (Blue) Strategies

Post-reactive strategies support the individual and team AFTER the behaviour has occurred. This phase is critical — the individual may still be dysregulated and at risk of re-escalation.

★ *Be careful in this phase — returning to demands or routine too quickly can re-trigger escalation.*

Recovery time varies. Follow the individual's cues and record how long recovery typically takes.

Post-Reactive Strategies — Record Here

How long does recovery typically take?	
What helps the individual return to calm (comfort items, people, space, activity)?	
What to avoid in the recovery period:	
When is it safe to re-introduce demands / routine?	
How will the incident be documented (form, system, timeline)?	
Debrief process for staff after a significant incident:	
When should the behaviour consultant / supervisor be notified?	
Follow-up steps (e.g. FBA review, notify guardian, adjust plan):	

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Write PBSP Goals and Objectives

PBSP goals describe the long-term direction of the plan. Objectives are the concrete, measurable steps the team will take to reach each goal. Objectives belong to the TEAM — focus on what supports will be provided, not just what the individual will do.

★ *Goals should focus on INCREASING quality of life and replacement skills — not just reducing behaviour.*

Objectives must be SMART: Specific, Measurable, Achievable, Realistic, Time-sensitive.

Every objective must have a NAMED team member responsible for it.

PBSP Goals and Objectives — Record Here

Goal	Support Objective (SMART — what the team will do)	Who Is Responsible	By When	Status
Goal 1:				
Goal 2:				
Goal 3:				
Goal 4:				

Status: ✓ Fully Implemented ■ Partially Implemented ✗ Not Implemented

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Complete the PBSP Summary Table

This table brings all sections together into your complete Positive Behaviour Support Plan. Every row should flow logically: Behaviour → Function → Strategy Type → Specific Strategy → Objective → Responsibility → Review.

Behaviour of Concern	Function	Strategy Type	Specific Strategy	Objective	Who	Review Date	Status

Strategy Type: Green = Proactive Amber = Early Warning Red = Reactive Blue = Post-Reactive
Status: ✓ Fully Implemented ■ Partially Implemented ✗ Not Implemented

11

Train the Team and Obtain Consent

Everyone who supports the individual must be trained on the PBSP before implementation. Informed consent must be obtained from the individual and/or guardian before behavioural services begin and whenever significant changes are made to the plan.

★ **Informed consent must include: individual and/or guardian signature, explanation of all strategies (including restrictive procedures), risks and benefits, and the right to withdraw.**
Training records must be kept on file and available for review.

Consent Documentation — Record Here

Consent obtained from (name and relationship):	
Date consent was obtained:	
Strategies covered in the consent process:	
Has consent been reviewed / renewed? (dates):	
Guardian / Authorized Representative name (if applicable):	

Training Record — Record Here

Team Member Name	Role	Training Date	Trainer	Topics Covered	Signature

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Monitor, Review, and Fade

A PBSP is never a static document. Monitor regularly, review at scheduled intervals, and adjust as needs change. The goal is to fade supports as the individual develops skills.

Step	What to Do
1. Collect data	Track frequency, duration, and intensity of each behaviour using agreed data sheets.
2. Review at intervals	Schedule team reviews — at minimum quarterly, or more often if the plan is new or rapidly changing.
3. Rate each objective	Fully Implemented / Partially Implemented / Not Implemented.
4. Ask the individual	How is this working for you? Have things improved? What needs to change?
5. Celebrate and adjust	Recognise every step of improvement. If an objective isn't working — change the strategy, not the goal.
6. Plan for fading	As behaviour decreases and skills increase, begin reducing intensity of supports systematically.
7. Re-assess risk	Re-run the risk assessment whenever behaviour escalates or circumstances change significantly.

Progress Tracker

Goal / Behaviour	Support Objective	Who Is Responsible	Review Date	Status	Notes / Next Steps

PBSP Review History — Record Here

Review Date	Who Was Present	Key Changes Made	Next Review Date	Signatures