

## Functional Assessment Interview (FAI)

Person of concern \_\_\_\_\_ Age/ \_\_\_\_\_ Grade \_\_\_\_\_ Gender M F  
 Date of interview \_\_\_\_\_ Interviewer \_\_\_\_\_  
 Respondents \_\_\_\_\_

### A. DESCRIBE THE BEHAVIORS.

- For each of the behaviors of concern, define the topography (how it is performed), frequency (how often it occurs per day, week, or month), duration (how long it lasts when it occurs), and intensity (how damaging or destructive the behaviors are when they occur).

	<i>Behavior</i>	<i>Topography</i>	<i>Frequency</i>	<i>Duration</i>	<i>Intensity</i>
a.					
b.					
c.					

### B. DEFINE ECOLOGICAL EVENTS (SETTING EVENTS) THAT PREDICT OR SET UP THE PROBLEM BEHAVIORS.

- What medications is the person taking (if any), and how do you believe these may affect his or her behavior?

- What medical or physical conditions (if any) does the person experience that may affect his or her behavior (e.g. asthma, allergies, rashes, sinus infections, seizures, problems related to menstruation)?

- Describe the sleep patterns of the individual and the extent to which these patterns may affect his or her behavior.

4. Describe the eating routines and diet of the person and the extent to which these may affect his or her behavior.

5a. Briefly list below the person's typical daily schedule of activities (Check the boxes by those activities the person enjoys and those activities most associated with problems).

Copy and paste <input checked="" type="checkbox"/> in a box that fits the behavior or preferences of the student below.			Schedule	
Student seems to <i>prefer</i> what happens during this time	Student seems to <i>not prefer</i> what happens during this time	Problem Behavior Typically Occurs	Individualize time blocks in the schedule	Add Typical Activities/Events on the schedule
			7:00 am	
			8:00 am	
			9:00 am	
			10:00 am	
			11:00 am	
			12:00 pm	
			1:00 pm	
			2:00 pm	
			3:00 pm	

5b. To what extent are the activities on the daily schedule *predictable* for the person, with regard to what will be happening, when it will occur, with whom, and for how long?

5c. To what extent does the person have the opportunity during the day to make choices about his or her activities and reinforcing events? (e.g. food, clothing, social companions, leisure activities)

6. How many other persons are typically around the individual at home, school, or work (including staff, classmates, and housemates)? Does the person typically seem bothered in situations that are more *crowded and noisy*?

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7. What is the pattern of *staffing support* that the person receives in home, school, work, and other settings (e.g. 1:1, 2:1)? Do you believe that the *number* of staff, the *training* of staff, or their *social interactions with the person* affect the problem behaviors?

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**8. DEFINE SPECIFIC IMMEDIATE ANTECEDENT EVENTS THAT PREDICT WHEN THE BEHAVIORS ARE LIKELY AND NOT LIKELY TO OCCUR.**

- a. *Times of Day*: When are the behaviors most and least likely to happen?

Most likely:	
Least likely:	

- b. *Settings*: Where are the behaviors most and least likely to happen?

Most likely:	
Least likely:	

- c. *People*: With whom are the behaviors most and least likely to happen?

Most likely:	
Least likely:	

- d. *Activity*: When are the behaviors most and least likely to happen?

Most likely:	
Least likely:	

- e. Are there particular or idiosyncratic situations or events not listed above that sometimes seem to “set off” the behaviors, such as particular demands, noises, lights, clothing?

Most likely:	
Least likely:	

- f. What one thing could you do that would most likely make the undesirable behavior occur?

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- g. Briefly describe how the person’s behavior would be affected if...

- a. You asked him or her to perform a difficult task.

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- b. You interrupted a desired activity, such as eating ice cream or watching TV.

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- c. You unexpectedly changed his or her typical routine or schedule of activities.

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- d. She or he wanted something but wasn’t able to get it (e.g. a food item up on a shelf).

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- e. You didn’t pay attention to the person or left her or him along for a while (e.g. 15 minutes).

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**9. IDENTIFY THE CONSEQUENCES OR OUTCOMES OF THE PROBLEM BEHAVIORS THAT MAY BE MAINTAINING THEM (I.E. THE FUNCTIONS THEY SERVE FOR THE PERSON IN PARTICULAR SITUATIONS).**

- a. Think of each of the behaviors listed in Section A, and try to identify the *specific* consequences or outcomes the person gets when the behaviors occur in different situations.

	<i>Behavior</i>	<i>Particular situations</i>	<i>What exactly does he or she get?</i>	<i>What exactly does he or she avoid?</i>
a.				
b.				
c.				

**10. CONSIDER THE OVERALL EFFICIENCY OF THE PROBLEM BEHAVIORS. EFFICIENCY IS THE COMBINED RESULT OF (A) HOW MUCH PHYSICAL EFFORT IS REQUIRED, (B) HOW OFTEN THE BEHAVIOR IS PERFORMED BEFORE IT IS REWARDED, AND (C) HOW LONG THE PERSON MUST WAIT TO GET THE REWARD.** Place a ( ) around the appropriate efficiency number.

<i>Behavior 1</i>	<i>Low Efficiency</i>		<i>High Efficiency</i>		
A. Physical Effort?	1	2	3	4	5
B. How often rewarded?	1	2	3	4	5
C. Time lag before reinforcement is delivered	1	2	3	4	5

<i>Behavior 2</i>	<i>Low Efficiency</i>		<i>High Efficiency</i>		
A. Physical Effort?	1	2	3	4	5
B. How often rewarded?	1	2	3	4	5
C. Time lag before reinforcement is delivered	1	2	3	4	5

<i>Behavior 3</i>	<i>Low Efficiency</i>		<i>High Efficiency</i>		
A. Physical Effort?	1	2	3	4	5
B. How often rewarded?	1	2	3	4	5
C. Time lag before reinforcement is delivered	1	2	3	4	5



c. With regard to the person's receptive communication, or ability to understand other persons...

i. Does the person follow spoken requests or instructions? If so, approximately how many? (List if only a few.)

ii. Does the person respond to signed or gestural requests or instructions? If so, approximately how many? (List if only a few.)

iii. Is the person able to imitate if you provide physical models for various tasks or activities? (List if only a few.)

iv. How does the person typically indicate *yes or no* when asked if she or he wants something, wants to go somewhere, and so on?

**13. WHAT ARE THE THINGS YOU SHOULD DO AND THINGS YOU SHOULD AVOID IN WORKING WITH AND SUPPORTING THIS PERSON?**

a. What things can you do to improve the likelihood that a teaching session or other activity will go well with this person?

b. What things should you avoid that might interfere with or disrupt a teaching session or activity with this person?

**14. WHAT ARE THINGS THE PERSON LIKES AND ARE REINFORCING FOR HIM OR HER?**

a. Food items:

b. Toys and objects:

c. Activities at home:

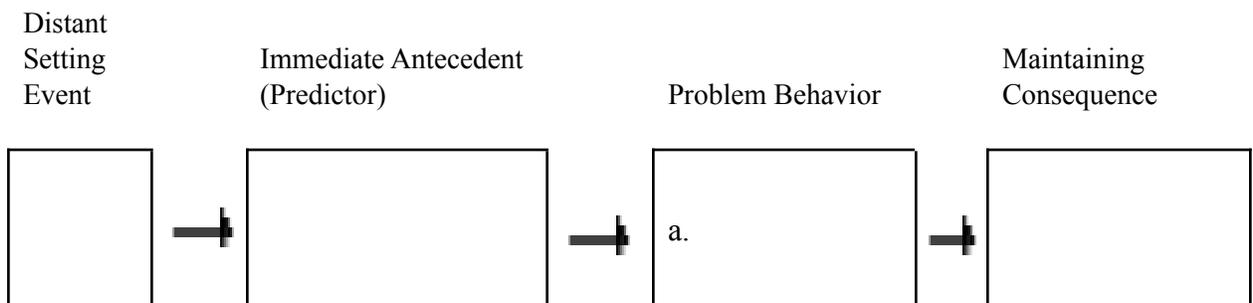
d. Activities/outings in the community:

e. Other:

**15. WHAT DO YOU KNOW ABOUT THE HISTORY OF THE UNDESIRABLE BEHAVIORS, THE PROGRAMS THAT HAVE BEEN ATTEMPTED TO DECREASE OR ELIMINATE THEM, AND THE EFFECTS OF THOSE PROGRAMS?**

	<i>Behavior</i>	<i>How long has this been a problem?</i>	<i>Programs/ Interventions</i>	<i>Effects (Effective or not effective)</i>
a.				
b.				
c.				

**16. DEVELOP SUMMARY STATEMENTS FOR EACH MAJOR PREDICTOR AND/OR CONSEQUENCE.**

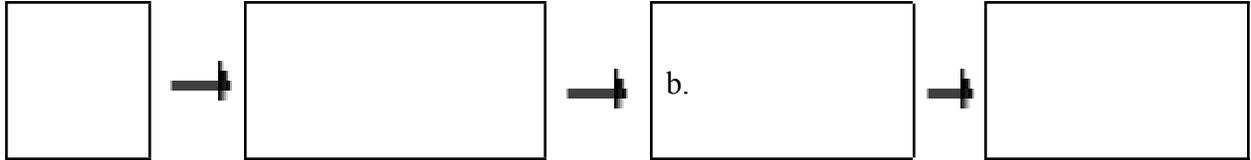


Distant  
Setting  
Event

Immediate Antecedent  
(Predictor)

Problem Behavior

Maintaining  
Consequence

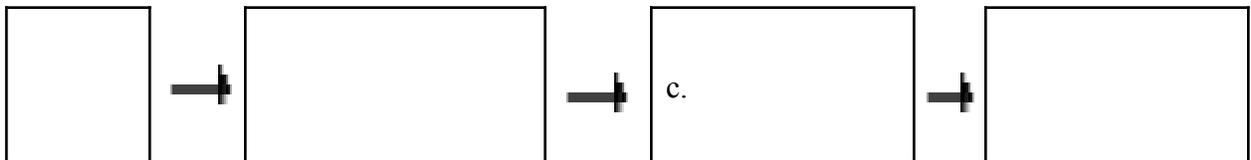


Distant  
Setting  
Event

Immediate Antecedent  
(Predictor)

Problem Behavior

Maintaining  
Consequence



How confident are you that the Summary of Behavior is accurate? (Rating for all summary statements). Place a ( ) around the appropriate confidence number below.

Not very confident						Very confident
1	2	3	4	5	6	