District:       Building:

**Individual Problem Solving Form**

Student name:       Grade:       Date:

Problem Solving Team Members:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Area of concern: | [ ] Behavior | [ ] Reading | [ ] Math | [ ] Writing | [ ] Other (describe)      |
| (indicate primary area) |

***Step 1: Problem Identification (What is the problem?)***

|  |
| --- |
| **Student present level of performance:**  |
| **Expected student level of performance:**  |
| **Magnitude of discrepancy:**  |
| **Problem Definition:**  |
| **Replacement behavior or target skill:** |

***Step 2: Problem Analysis (Why is it happening?)***

|  |  |
| --- | --- |
| Domain | Relevant Known Information |
| Instruction ***(e.g. pacing, corrective feedback, explicitness, opportunities to practice, engagement, etc)*** |       |
| Curriculum ***(e.g. skills taught, instructional materials, scope & sequence, expected outcomes, previous interventions, etc)***  |       |
| Environment ***(e.g. room setup, peer influence, expectations and rules, behavior management system, etc)*** |       |
| Learner***(e.g. academic skills, behavioral concerns, etc)*** |       |

Based on the above information (instruction, curriculum, environment, & learner) why do you think the current problem is occurring and what is the predicted result of an appropriately matched intervention?

**Problem Hypothesis:** The problem is occurring because

**Prediction:** The problem will be reduced if

**Data used to validate hypothesis:**

**Do you have enough information to complete the problem analysis and develop an intervention? If no, what else is needed and who will be responsible for collecting it?**

***Step 3: Plan Development (What are we going to do?)***

Student name:       Grade:       Date:

Target skill:

Goal (This intervention will be successful if…):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **What will be done?**(actions taken, target skills taught, curriculum/materials used)  | **How will it be done?**(instructional strategies, etc) | **Who is responsible?** | **Where will it occur?** | **How often? (**days per week & min per day? | **Group size?** |
|       |       |       |       |       |       |
| **Progress monitoring plan** | **What materials will be used?** | **Who is responsible?** | **How often?**  | **Decision Rule?** |
|  |       |       |       |       |
| **Fidelity plan** | **What data will be collected?** | **Who is responsible?** | **How often will it be collected?** | **Minimum standard for fidelity?** |
|  |       |       |       |       |

Follow up date:

***Step 4: Plan Implementation & Evaluation (Did it work?)***

\*Attach graphed data

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Attendance:**  | # of intervention days attended: |  | Total # of intervention days: |  | % of intervention sessions attended |  |
| **Intervention fidelity data:** **Minimum standard met?** **[ ]** Yes [ ] No |
| **Student rate of progress:**  |  | **Peer/Expected rate of progress:** |  |
| **[ ]  Less progress than expectation/peers** **[ ]  More progress** **[ ]  Same progress** |
| **Student level of performance:** |  | **Expected student level of performance:** |  |
| **Magnitude of discrepancy:** |  |
| **[ ] Less discrepant than expectation/peers** **[ ] More discrepant** **[ ] Same level of discrepancy** |
| **If less discrepant/good progress:** Continue current intervention? [ ] Yes [ ] No  Fade intervention support? [ ] Yes [ ] No |
| **If more discrepant/poor progress:** Was the intervention implemented as planned? [ ] Yes [ ] No Do we need to Intensify supports? [ ] Yes [ ] No Refer for special education evaluation? [ ] Yes [ ] No |
| **If discrepancy the same/average progress:** Was the intervention implemented as planned? Yes No Do we need to Intensify supports? [ ] Yes [ ] No Refer for special education evaluation? [ ] Yes [ ] No |
| **Comments/Actions/Next Steps:** |