

## Appendix L.

# Positive Environment Checklist

*The following Positive Environment Checklist was designed for use in the federal project, "Building Positive Behavioral Support Plans."<sup>1</sup> When used to evaluate settings in which persons with severe disabilities live, work and go to school, in the context of a complete analysis and plan development process, it can play an important role in understanding how environmental features impact behavior. Refer to Appendix E for information on further training in this model.*

*The table, Process of Building a Positive Behavioral Support Plan, outlines the entire process involved in developing a plan for individuals challenged by severe disabilities in this model. Please note the Positive Environment Checklist is included in step 4, "Conduct Assessments" stage in this framework.*

## Positive Environment Checklist

The Positive Environment Checklist (PEC) is designed for use in evaluating whether the settings in which persons with severe disabilities live, work, and go to school are structured in a manner that promotes and maintains positive, adaptive behaviors. The PEC looks at whether settings provide the conditions that support positive behaviors and do not present conditions that make negative behaviors more likely. It also addresses several concerns related to the ways in which program staff support and interact with the people with disabilities in the setting.

The checklist should be used as part of a proactive, preventive approach to addressing problem behaviors. Positive environments will help to minimize the occurrence of problem behaviors. The checklist can be used as a general tool to provide an overall assessment of a setting. Also, when a particular individual is targeted, it can be used as part of a comprehensive analysis of an existing problem behavior(s) to determine whether environmental conditions are contributing to the problem.

The Positive Environment Checklist focuses on the physical, social, and programmatic structure of the environment. Checklist questions are divided into 5 sections: (1) Physical Setting, (2) Social Setting, (3) Activities and Instruction, (4) Scheduling and Predictability, and (5) Communication. Responses to questions in each area should be based on direct observation of the environment, on review of written program documents and records, or on responses obtained from questioning program personnel. Three response options are provided for each question: YES, NO, and UNCLEAR. The term "staff" applies to paid and volunteer personnel who provide support and services in the setting. The term "people" refers to the people with disabilities who live, work, or attend school in the setting.

Scoring the completed Positive Environment Checklist is simply a matter of determining which questions received a YES response, and which received NO or UNCLEAR responses. NO responses indicate areas or issues that should be addressed to create a more positive environment. UNCLEAR responses indicate the need for further analysis, perhaps by extended observation or by questioning a larger number of program personnel.

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<sup>1</sup> The Positive Environmental Checklist is from: Albin, R. W., Horner, R. H., & O'Neill, R. E. (1993). Proactive behavioral support: Structuring and assessing environments. Eugene, OR, Specialized Training Program, University of Oregon.

<b>SECTION 1: PHYSICAL SETTING</b>			
1. Is the physical setting clean, well lighted, and Odor free?	YES	NO	UNCLEAR
2. Is temperature regulation in the setting adequate?	YES	NO	UNCLEAR
3. Is the physical setting visually pleasant and appealing?	YES	NO	UNCLEAR
4. Does the arrangement of the setting promote easy access for all individuals within the setting?	YES	NO	UNCLEAR
5. Is the setting arranged in a manner that facilitates needed staff support and supervision?	YES	NO	UNCLEAR
6. Does the setting contain or provide interesting, age-appropriate items and materials for people to use?	YES	NO	UNCLEAR
7. Is the setting located and structured in a manner that promotes and facilitates physical integration into the "regular" community?	YES	NO	UNCLEAR
<b>SECTION 2: SOCIAL SETTING</b>			
1. Is the number of people in this setting appropriate for its physical size and purpose?	YES	NO	UNCLEAR
2. Are the people who share this setting compatible in terms of age, gender, and support needs?	YES	NO	UNCLEAR
3. Do the people who share this setting get along with each other?	YES	NO	UNCLEAR
4. Is the staff ratio in this setting adequate to meet the support needs of all of the people here at all times?	YES	NO	UNCLEAR
5. Do staff actively work to develop and maintain a positive rapport and relationship with the people here?	YES	NO	UNCLEAR
6. Do staff promote and facilitate opportunities for social integration with people who are not paid to provide service?	YES	NO	UNCLEAR

<b>SECTION 3: ACTIVITIES AND INSTRUCTION</b>			
1. Do people in this setting regularly participate (whether independent, supported or partial participation) in activities and tasks that are useful and meaningful to their daily lives?	YES	NO	UNCLEAR
2. Do people participate in a variety of different activities?	YES	NO	UNCLEAR
3. Do people participate in activities that occur irregular community settings outside of the home, school, or work place?	YES	NO	UNCLEAR
4. Do people in this setting receive instruction on activities and skills that are useful and meaningful to their daily lives?	YES	NO	UNCLEAR
5. Is the instruction that people receive individualized to meet specific learner needs?	YES	NO	UNCLEAR
6. Are peoples' personal preferences taken into account when determining the activities and tasks in which they participate and receive training?	YES	NO	UNCLEAR
<b>SECTION 4: SCHEDULING AND PREDICTABILITY</b>			
1. Is there a system or strategy used to identify what people in this setting should be doing and when?	YES	NO	UNCLEAR
2. Is there a means to determine whether the things that should be occurring actually do occur?	YES	NO	UNCLEAR
3. Do people in this setting have a way of knowing or predicting what they will be doing and when?	YES	NO	UNCLEAR
4. Do staff prepare people in this setting in advance for changes in typical schedules or routines?	YES	NO	UNCLEAR
5. Do people in this setting have opportunities to exercise choice in terms of what they will do, when, with whom, and what rewards they will receive?	YES	NO	UNCLEAR

(Appendix continued)

	Never	Half the Time		Always	
3. Was recently given corrective feedback during a task	1	2	3	4	5
4. Was hurried or rushed	1	2	3	4	5
5. Too much or too little staff attention. Specify: _____	1	2	3	4	5
6. Display of emotion by staff (too loud, too negative, etc.). Specify: _____	1	2	3	4	5
7. Staff's tone of voice (high pitched, stern, etc.). Specify: _____	1	2	3	4	5
8. Difficulty understanding staff directions	1	2	3	4	5
9. Presence of disliked staff	1	2	3	4	5
10. New staff present	1	2	3	4	5
11. Ongoing difficulty communicating wants or needs	1	2	3	4	5
12. Too much or too little attention from peers. Specify: _____	1	2	3	4	5
13. Presence of a disliked peer	1	2	3	4	5
14. Too many people around the person	1	2	3	4	5
15. Unfamiliar person present	1	2	3	4	5
16. Family, staff, or peers are too close or too far away. Specify: _____	1	2	3	4	5
17. Group size (large, small). Specify: _____	1	2	3	4	5
18. Was recently physically restrained	1	2	3	4	5
19. Bad day at day program or work	1	2	3	4	5
20. Location associated with negative interactions (e.g., dentist's office). Specify: _____	1	2	3	4	5
21. Peers acting upset nearby	1	2	3	4	5
22. Anxiety over holiday activities	1	2	3	4	5
23. Are there any other types of negative interactions that are setting events or discriminative stimuli for this person? _____ _____ _____	1	2	3	4	5

**Disappointments**

24. Informed of something disappointing (learned visit will not occur, visitors failed to arrive, etc.). Specify: _____	1	2	3	4	5
25. Favorite staff absent	1	2	3	4	5
26. Too few staff to meet the person's needs	1	2	3	4	5
27. Failed to have his or her requests met	1	2	3	4	5
28. Absence of a friend	1	2	3	4	5
29. Not earning reinforcer or reward	1	2	3	4	5

(Appendix continues)

(Appendix continued)

	Never	Half the Time	Always
30. Being given nonpreferred foods. Specify: _____	1	2 3	4 5
31. Not having meals at desired times. Specify: _____	1	2 3	4 5
32. Worrying about family or friend's health	1	2 3	4 5
33. Favorite activity ends. Specify: _____	1	2 3	4 5
34. Are there any other types of disappointments that are setting events or discriminative stimuli for this person? _____ _____ _____	1	2 3	4 5
35. Please list any other social/cultural factors that you believe may be setting events or discriminative stimuli for the person you work with: _____ _____ _____ _____	1	2 3	4 5

**NATURE OF TASK OR ACTIVITY**

*The following items describe aspects of the task or activity in progress that may influence behavior.*

**Factors Related to Tasks or Activities**

36. Lack of choice	1	2 3	4 5
37. Boring tasks	1	2 3	4 5
38. Difficult tasks	1	2 3	4 5
39. New tasks	1	2 3	4 5
40. Slow pace of instruction	1	2 3	4 5
41. Instruction is too fast paced	1	2 3	4 5
42. Making large numbers of errors	1	2 3	4 5
43. Repetitive tasks	1	2 3	4 5
44. Environment is too quiet or too exciting. Specify: _____	1	2 3	4 5
45. Little or no reinforcement in setting	1	2 3	4 5
46. Length of activity (too long or not long enough). Specify: _____	1	2 3	4 5
47. Waiting (in line, waiting rooms)	1	2 3	4 5
48. Medical appointments or medical settings	1	2 3	4 5
49. Are there any other factors related to the task or activity that are setting events or discriminative stimuli for this person? _____ _____ _____	1	2 3	4 5

(Appendix continues)

(Appendix continued)

	Never	Half the Time	Always		
<b>Daily Routines</b>					
50. Rigid schedule/lack of schedule. Specify: _____	1	2	3	4	5
51. Changes in routine/cancellations. Specify: _____	1	2	3	4	5
52. Prior warning that a scheduled activity will take place	1	2	3	4	5
53. Absence of prior warning that a scheduled activity will take place	1	2	3	4	5
54. Boredom/inactivity	1	2	3	4	5
55. Transitions between activities. Specify: _____	1	2	3	4	5
56. Inability to leave setting (e.g., hospital). Specify: _____	1	2	3	4	5
57. Route taken to school or work (lots of stops, dense traffic, duration of trip, etc.). Specify: _____	1	2	3	4	5
58. Are there any other factors about the daily routine that are setting events or discriminative stimuli for this person?	1	2	3	4	5
_____					
_____					
_____					
59. Please describe any other aspects of this category that may be setting events or discriminative stimuli:	1	2	3	4	5
_____					
_____					
_____					

**PHYSICAL**

*The following items describe aspects of the physical environment that may influence behavior.*

**Uncomfortable Environment**

60. Uncomfortable location (home, work, classroom, church). Specify: _____	1	2	3	4	5
61. Temperature is too hot or too cold. Specify: _____	1	2	3	4	5
62. Uncomfortable seating	1	2	3	4	5
63. Very bright or very dim lighting. Specify: _____	1	2	3	4	5
64. Noisy environment	1	2	3	4	5
65. Being in van or car	1	2	3	4	5
66. Are there any other types of uncomfortable environments that are setting events or discriminative stimuli for this person?	1	2	3	4	5
_____					
_____					
_____					

(Appendix continues)

(Appendix continued)

	Never	Half the Time	Always		
<b>Changes in the Environment</b>					
67. Unpleasant weather conditions (rain, heat, snow, etc.). Specify: _____	1	2	3	4	5
68. Time of day. Specify: _____	1	2	3	4	5
69. Lost/broken personal items	1	2	3	4	5
70. Unfamiliar location	1	2	3	4	5
71. Change of season	1	2	3	4	5
72. Are there any other changes in the environment that are setting events or discriminative stimuli for this person? _____ _____ _____	1	2	3	4	5
73. Please describe any other aspects of the physical environment that may be setting events or discriminative stimuli for the person you work with: _____ _____ _____	1	2	3	4	5

**BIOLOGICAL**

*The following items refer to the individual's state of health and physical condition that may influence behavior.*

**Medication**

74. Side effects of medication(s). Specify: _____	1	2	3	4	5
75. Changes in medication(s). Specify: _____	1	2	3	4	5
76. Is there anything else about medication that is a setting event or discriminative stimulus for this person? _____ _____ _____	1	2	3	4	5

**Illness**

77. Acute illness/pain (e.g., otitis media, constipation, back pain). Specify: _____	1	2	3	4	5
78. Long-term or chronic illness (e.g., diabetes). Specify: _____	1	2	3	4	5
79. Periods of frequent hallucinations	1	2	3	4	5
80. Manic phase of bipolar disorder	1	2	3	4	5

(Appendix continues)