**Person-Centered Positive Behavior Support Request Form**

**MadeupName Services Organization**

The goal of the Tier 2 & 3 Team is to create a way for people to problem solve issues that come up in order to improve quality of life and address challenging situations.

Anyone can request a meeting. Please consider what information can be shared to help with the problem-solving discussion. Send the information to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ before the meeting.

**Resources in This Handout**:

* Tier 2 Team Procedure
* Referral Form
* What Information to Share

**Secondary Support Team Procedure**

Person has a concern (quality of life, social, academic, or work related)

Person completes a Request for meeting

Designated staff person gathers information (personal description/action plan, support plan, person-centered plan, and/or any other source related to issue)

Meeting is scheduled and information shared with meeting coordinator

Team meets and develops action plan

Action plan is monitored

Follow-up meeting every 2-4 weeks

**Request for Assistance**

*Addressed to: Secondary Team*

Person’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person Making Request: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_-

I am (circle one):

* Person Requesting Support
* Direct Support Staff
* Family Member/Guardian
* Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of issue to discuss (circle one):

* Quality of Life/Person-Centered Issue
* Social Interaction
* Both

*Thank you.*

**Please Send the Following Types of Information to the Secondary Team Before the Meeting:**

**Quality of Life Issues**

* Personal description and action plan
* Plans completed
* Type of quality of life issue

**Quality of Life Area**

* Emotional Well-Being – Happiness, feeling calm and safe
* Relationships – Making and keeping meaningful friends and social connections
* Financial Well-Being – Having a job and making money
* Personal Development - Becoming a better person
* Physical Well-Being – Staying healthy, exercise, nutrition
* Self-Determination - The ability to make choices and control my life
* Rights - My ability to vote and my legal rights
* Social Inclusion - Access to the community

**Interpersonal Relationships -- Social Interaction Challenges**

* Work/employment related
* Roommates or family
* Interactions occurring with staff
* Community related interactions
* Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_