



REACH MS
Mississippi's State Personnel Development Grant

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Realizing Excellence for ALL Children in Mississippi

Quality of Life Survey

The Quality-of-Life Survey will be completed by all Tier 3 Team members prior to implementation of Tier 3 behavioral intervention and at the end of the Tier 3 behavioral intervention. The information from this assessment will aid in discussions related to behavior intervention planning.

1. Prior to the team meeting and distributing the forms to team members, the team leader will:
 - a. complete the top line (name of child and date of completion)
 - b. read the information contained in the box at the top of the page to each respondent

2. There may be instances when team members are unsure of what is meant by an individual item. The team leader should feel free to discuss what the item is asking for; however, do not initiate a group discussion on how participants feel about that item. Do not allow them to discuss their responses currently. This is not an activity that requires consensus or discussion as each team member will be completing his/her own form.

Modified from the Virginia Institute for Developmental Disabilities/VCU & University Affiliated Center for Developmental Disabilities/W VU "Positive Behavioral Support Evaluation Packet" 3/16/98.

Quality of Life Survey

Instructions: To be completed by each Tier 3 team member prior to beginning Tier 3 behavior intervention and at the end of the Tier 3 behavior intervention.

Student Name: _____ **Date Completed:** _____

Name of Person Completing: _____ **Relationship with Child:** _____

Years you Have Known the Child: _____

Prior to Tier 3 Behavior Intervention

How many times has this assessment been completed for this child? 1 2 3 4

1. Please check the response that best describes the child's living arrangement prior to Tier 3 behavior intervention:

- | | |
|--|--|
| <input type="checkbox"/> Parent(s)/guardian/other family | <input type="checkbox"/> Long-term care facility/institution |
| <input type="checkbox"/> Foster family | <input type="checkbox"/> Other (please describe): |
| <input type="checkbox"/> Group home | |
| <input type="checkbox"/> Short-term care facility | |

2. Please check the one descriptor that best describes the child's original educational placement, prior to beginning the Tier 3 behavior intervention.

- General education (with no intervention)
- Tier 2 intervention in a general education classroom
- Tier 2 intervention in a behavior modification classroom
- Part-time special education classroom
- Full-time special education classroom

3. Have staff members received initial and ongoing training/coaching regarding the Tier 3 Behavior Support Plan? Yes No

Instructions: For following questions, please indicate whether the following aspects of the child's life are: Very Poor (1), Poor (2), Good (3), Very Good (4), Excellent (5), or Not Applicable (NA) by circling the appropriate response.

Answer each question based on the child's life circumstances prior to implementation of Tier 3 behavior intervention.

Items	Very Poor	Poor	Good	Very Good	Excellent	Not Applicable
1. The child's relationships with family members (i.e., parents, siblings, etc.) are...	1	2	3	4	5	NA
2. The relationships with peers the child has now are...	1	2	3	4	5	NA

3. The amount of time the child has spent interacting with peers is...	1	2	3	4	5	NA
Items	Very Poor	Poor	Good	Very Good	Excellent	Not Applicable
4. Affection when interacting with others (i.e., smiling, touching a person in an appropriate manner, etc.) is...	1	2	3	4	5	NA
5. The child's participation in school and/or community activities of their choice is...	1	2	3	4	5	NA
6. The child's ability to make decisions about day-to-day activities is...	1	2	3	4	5	NA
7. The child's ability to express personal preferences is...	1	2	3	4	5	NA
8. The child's satisfaction with their current living situation is...	1	2	3	4	5	NA
9. The response (friendly) the child receives from peers is ...	1	2	3	4	5	NA
10. The child's ability to engage in leisure activities with peers is...	1	2	3	4	5	NA
11. The child's relationship with teachers/school personnel is...	1	2	3	4	5	NA
12. The child's satisfaction with their current educational placement is...	1	2	3	4	5	NA
13. The child's access to activities that are personally stimulating is...	1	2	3	4	5	NA
14. The child's ability to learn new skills is...	1	2	3	4	5	NA
15. The child's self-confidence is...	1	2	3	4	5	NA
16. The child's emotional stability is...	1	2	3	4	5	NA
17. The child's satisfaction with their level of independence is...	1	2	3	4	5	NA
18. The child's general happiness is...	1	2	3	4	5	NA
19. As a result of Tier 3 behavior support, I feel the child's quality of life is...	1	2	3	4	5	NA
20. The child's general health and well-being is...	1	2	3	4	5	NA

Is there anything else about the child's quality of life that you would like to tell us?

Quality of Life Survey After Tier 3 Behavior Intervention

Instructions: To be completed by each Tier 3 team member after the Tier 3 behavior intervention.

Date Completed: _____

How many times has this assessment been completed for this child? 1 2 3 4

1. Please check the response that best describes the child's living arrangement after the Tier 3 behavior intervention.

- | | |
|--|--|
| <input type="checkbox"/> Parent(s)/guardian/other family | <input type="checkbox"/> Long-term care facility/institution |
| <input type="checkbox"/> Foster family | <input type="checkbox"/> Other (please describe): |
| <input type="checkbox"/> Group home | |
| <input type="checkbox"/> Short-term care facility | |

2. Please check the one descriptor that best describes the child's current educational placement after the implementation of Tier 3 behavioral interventions.

- General education (with no intervention)
- Tier 2 intervention in a general education classroom
- Tier 2 intervention in a behavior modification classroom
- Part-time special education classroom
- Full-time special education classroom

3. Have staff members received initial and ongoing training/coaching regarding the Tier 3 Behavior Support Plan? Yes No

Instructions: For the following questions, please indicate whether the following aspects of the child's life are: Much Worse (1), Worse (2), Slightly Better (3), Better (4), Much Better (5), or Not Applicable (NA) by circling the appropriate response.

Answer each question based on the child's life circumstances after the implementation of Tier 3 behavior intervention.

Item	Much Worse	Worse	Slightly Better	Better	Much Better	Not Applicable
1. The child's relationships with family members (i.e., parents, siblings, etc.) are...	1	2	3	4	5	NA
2. The relationships with peers the child has now are...	1	2	3	4	5	NA
3. The amount of time the child has spent interacting with peers is...	1	2	3	4	5	NA
4. Affection when interacting with others (i.e., smiling, touching a person in an appropriate manner, etc.) is...	1	2	3	4	5	NA
5. The child's participation in school and/or community activities of their choice (i.e., manner) is...	1	2	3	4	5	NA

Item	Much Worse	Worse	Slightly Better	Better	Much Better	Not Applicable
6. The child's ability to make decisions about day-to-day activities is...	1	2	3	4	5	NA
7. The child's ability to express personal preferences is...	1	2	3	4	5	NA
8. The child's satisfaction with their current living situation is...	1	2	3	4	5	NA
9. The response (friendly) the child receives from peers is ...	1	2	3	4	5	NA
10. The child's ability to engage in leisure activities with peers is...	1	2	3	4	5	NA
11. The child's relationship with teachers/school personnel is...	1	2	3	4	5	NA
12. The child's satisfaction with their current educational placement is...	1	2	3	4	5	NA
13. The child's access to activities that are personally stimulating is...	1	2	3	4	5	NA
14. The child's ability to learn new skills is...	1	2	3	4	5	NA
15. The child's self-confidence is...	1	2	3	4	5	NA
16. The child's emotional stability is...	1	2	3	4	5	NA
17. The child's satisfaction with their level of independence is...	1	2	3	4	5	NA
18. The child's general happiness is...	1	2	3	4	5	NA
19. As a result of Tier 3 behavior support, I feel the child's quality of life is...	1	2	3	4	5	NA
20. The child's general health and well-being is...	1	2	3	4	5	NA

Is there anything else about the child's quality of life that you would like to tell us?