

## INDIVIDUALIZED PROGRAMMING PLAN – CHECKLIST

Policies and Procedures 2012 Chapter 4

Student's Name: Staff involved:			Time:		
	An administrator has approved individual programming Name of administrator:				
		es policy as necessary		ssment is needed utilizing the nt. Recommendations:	
		Crisis team was co Crisis team contac evaluation?	ontacted for "alert". By wh ted for evaluation. What w	om:as the outcome of the	
	A physical space has been designated for the student's IP. Specify place and times:				
	The IP interventions will be implemented with the student in regular programming. Specify any restrictions regarding participation in routine programming:				
	Level of supervision:				
	Specialized t	Specialized transition plan. Please describe:			

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Student's belongings were removed. • What was removed: Where were items stored: \_\_\_\_\_ When & who will assess when & what items will be returned:\_\_\_\_\_ Separation from peers. • Which peers and when, please specify: Specialized search plan. Room search, how often and what items are staff looking for? Person/body search, how often and with what focus? Student has participated in safety planning by identifying distress tolerance skills and selfsoothing activities (crocheting, drawing, etc.). Specify what skills and activities will be utilized: Schoolwork has been provided by teacher, or designee. Provide brief explanation of expectations: Processing has been provided. Specify assigned packet: Emphasis on skill development in the following areas:

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Skill coaches have been assigned. Specify assignments & plan:			
All incident reports have been written PRN has been offered (if prescribed) IP has been discussed with student			
Student's HEC treatment team (clinical, academic, administrators), guardian/family, & referring agencies have been informed. By whom:			
Special or Emergency Team Meeting has been scheduled for:			

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