

City of Bradford MDC

Margaret McMillan Tower (Floor 7)

Princes Way , Bradford BD1 1NN

**ABC Behaviour Log Form**

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| **Child’s Name:** | **Lead Teacher:** | **Class Teacher:** |

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|  | | **Antecedents** | **Behaviour** | **Consequence** |
|  | | Who was involved? Who was child working with? What are the adults doing? What is the task type? What resources were/were not available? | What exactly does the child do that is of concern? (If I were a fly on the way, what would I see?) | What happened as a result of the behaviour? What did you do/say? What message did this give (to the child; to the adults)? What did the child do/say? How do you think the child might be feeling? What do you think the child might be getting out of behaving in this way? What do you think other children/adults might be getting out of her/him behaving in this way? |
| **Day** |  |  |  |  |
| **Date:** |  |
| **Time:** |  |
| **Lesson:** |  |
| **Day** |  |  |  |  |
| **Date:** |  |
| **Time:** |  |
| **Lesson:** |  |
| **Day** |  |  |  |  |
| **Date:** |  |
| **Time:** |  |
| **Lesson:** |  |

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| Lead Teacher Analysis: what might alter in the child’s care and support plan? What might have to be done differently? How will you plan to make this change happen? |  |