

Douglas and Jefferson County CDDO • Behavior Tracking Log

Person being served: _____ Month: _____ Provider: _____

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

(Revised 07-20-11)

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		
Tantrum/Emotional Outbursts:																																	Comb. 2 or more: screaming, crying, swearing, banging on walls/doors/etc, throwing self on floor.
Damages Own or Others' Property																																	Deliberately breaking/destroying things, by tearing, cutting, burning, marking, throwing
Physically Assaults Others																																	Causing physical pain to others by biting hitting, kicking, pulling hair, or pinching
Disrupts Others' Activities																																	Clinging, pestering, teasing, arguing, complaining, picking fights, interrupting
Verbally or Gesturally Abusive																																	Swears, verbal threats, name calling, obscene gestures, aggressive intent
Self Injurious																																	Causing injury to self, by hitting, pinching rubbing skin, scratching, cutting, biting
Teases or Harasses																																	Any behavior preformed deliberately to annoy another person.
Resists Supervision																																	Non-compliance, refuses to follow instructions.
Runs or Wanders Away																																	Repeatedly, & inadvertently leaves program area, or home requiring staff support.
Steals																																	Deliberately takes belongings including food from others.
Eats Inedible Objects																																	Puts objects other than food or medicine in the mouth and ingests them.
Sexually Inappropriate																																	Public masturbation, undressing, inappropriate touching, sexual remarks
Smears Feces																																	Deliberately handles, throws, or spreads feces

Each of the numbered columns represents a day of the month. Make a mark in the appropriate row for each day the behavior(s) occur. This data will serve as written proof for the annual BASIS assessment.

Signature: _____ Date: _____

Signature: _____ Date: _____