



# Communicative Function Questionnaire

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Name:

Date:

## Description of the behaviour of concern

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1. How often does the behaviour occur (several times a day, daily, once a week)?

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2. How long does the behaviour last?

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3. How severe is the behaviour?

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4. Does the behaviour occur in clusters/phases, or more sporadically?

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5. When is the behaviour most likely to happen? (time of day/week/month)

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6. In what environment or where does the behaviour mostly happen?  
(If it happens in various settings are there some places where it is more likely than others?)

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7. Are behaviours more likely if the person is left on his/her own?  
Or if attention is given to another person, not them?

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8. With whom is the behaviour most likely to occur, and what is it about them?  
(E.g. familiar/unfamiliar, male/female, quiet/loud?)

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9. What activity is most likely to produce the behaviour?

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10. Are behaviours more likely if demands are made of the person?  
Any demands or particular things?

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11. Are behaviours more likely if the person is refused a request/desire?

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12. Are behaviours more likely if the person is told to wait?

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13. Are behaviours more likely if the person is bored?

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14. Are behaviours more likely when something changes?

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15. Are there any other events or situations that can trigger the behaviour e.g. transitions between activities, difficulties with communication/frustration?

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16. How are others responding to the behaviour? What impact does this have on behaviour?

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17. Does the person gain anything from the behaviour? Something tangible? Contact from people? Control?

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18. Does the person avoid or escape from anything?

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19. Does the person show pleasure or relief from the behaviour?






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20. Anything else?

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## Analysing reasons (functions) for behaviour grid

To see if behaviour is maintained or strengthened by.....		Look at the answers to questions number.....
<b>Social attention?</b>		7, 8, 12,17
<b>Sensory needs?</b>		9, 6 13,20
<b>Getting things?</b>		11,12,17,18
<b>Escape/avoidance?</b>		15,11,12,16
<b>Express emotion?</b>		15,11,12,16
<b>OTHER e.g. pain, difficulty with change, lack of understanding, need to be in control?</b>		14,4,6,16