Appendix C

Destructive Behavior Severity Scale

INJURY RISK BEHAVIOR involves frequently engaging in destructive behavior without recognizing the potential hazards, such as: (a) climbing on objects where falling is probable; (b) running into a street without watching for cars; (c) pulling down objects onto oneself; (d) touching electrical wires, stoves or other dangerous items; (e) drinking or eating dangerous fluids or items (e.g., cleaners, medicines, fertilizer); (f) placing a bag over one's head; or (g) getting ropes or cords tangled around one's neck.

For each of the four levels of injury risk behavior listed below, circle how often this type of behavior occurs, ranging from never (N) to over 10 times per hour (+10).

N = Never M = Monthly W = Weekly H = Hourly +5 = Over 5/hour +10 = Over 10/hour

FREQUENCY:

N M W H +5 +10 Level 1 = INJURY RISK BEHAVIOR resulting in:
(a) no marks on body, (b) no burns, (c) no gagging, (d) no vomiting, or (e) no choking.

N M W H +5 +10 Level 2 = INJURY RISK BEHAVIOR resulting in:
(a) reddening of skin or mild swelling; (b) a 1st degree burn; and/or (c) mild gagging.

N M W H +5 +10 Level 3 = INJURY RISK BEHAVIOR resulting in:
(a) light scratches, small or shallow breaks in skin, moderate to severe swelling;
(b) a 2nd degree burn; (c) vomiting or significant choking.

N M W H +5 +10 Level 4 = INJURY RISK BEHAVIOR resulting in: (a) scars, lasting tissue damage, disfigurement; (b) a 3rd degree burn; (c) poisoning; or (d) loss of consciousness.

AGGRESSION involves forceful pushing or striking others with body parts (e.g., pushing, hitting, kicking, head-butting); hitting others with objects; or scratching, pinching or biting others.

For each of the four levels of aggression listed below, circle how often this type of behavior occurs, ranging from never (N) to over 10 times per hour (+10).

N = Never M = Monthly W = Weekly H = Hourly +5 = Over 5/hour +10 = Over 10/hour

FREQUENCY

N M W H +5 +10 Level 1 = AGGRESSION resulting in (a) no marks on body and
(b) no blows close to or contacting the eyes.

N M W H +5 +10 Level 2 = AGGRESSION resulting in (a) reddening of skin, and/or
(b) mild swelling.

N M W H +5 +10 Level 3 = AGGRESSION resulting in (a) light scratches,
(b) small or shallow breaks in skin, and/or (c) moderate to severe swelling.

N M W H +5 +10 Level 4 = AGGRESSION involving blows close to or contacting the eyes or resulting in (a) scratches that leave scars, (b) breaks in skin that leave scars, and/or (c) trauma resulting in broken bones or lasting tissue damage or disfigurement.

PICA involves the repetitive and persistent ingestion of inedible items (i.e., items that should not be eaten) such as bark, bugs, cigarette butts, clothing, coins, dirt, food dropped on the floor or ground, grass, leaves, paint chips, pet hair, etc.

For each of the four levels of pica listed below, circle how often this type of behavior occurs, ranging from never (N) to over 10 times per hour (+10).

N = Never M = Monthly W = Weekly H = Hourly +5 = Over 5/hour +10 = Over 10/hour

FREQUENCY

N M W H +5 +10 Level 1 = PICA involving: (a) no solid items larger than 1/2 inch in diameter (e.g., coins, large buttons), (b) no sharp items (e.g., pins, staples), (c) no contaminated items (e.g., items from garbage can or ash tray, paint chips), and (d) no toxic or poisonous items (e.g., medicines, glue).

N M W H +5 +10 Level 2 = PICA involving (a) solid items larger than 1/2 inch in diameter (e.g., coins, large buttons), but not sharp, contaminated, or toxic or poisonous items.

N M W H +5 +10 Level 3 = PICA involving sharp, contaminated, or toxic or poisonous items, but not requiring emergency medical attention (e.g., called physician for advice).

N M W H +5 +10 Level 4 = PICA involving sharp, contaminated, or toxic or poisonous items and requiring emergency medical attention.

PROPERTY DESTRUCTION involves banging, kicking, throwing, overturning, tearing, cutting, defacing, burning or stomping on objects not made for that purpose.

For each of the four levels of property destruction listed below, circle how often this type of behavior occurs, ranging from never (N) to over 10 times per hour (+10).

N = Never M = Monthly W = Weekly H = Hourly +5 = Over 5/hour +10 = Over 10/hour

FREQUENCY

N M W H +5 +10 Level 1 = PROPERTY DESTRUCTION resulting in disruption of property but no permanent damage to paper items, toys, teaching materials, furniture, vehicles or buildings.

N M W H +5 +10 Level 2 = PROPERTY DESTRUCTION resulting in damage to paper items or other light objects.

N M W H +5 +10 Level 3 = PROPERTY DESTRUCTION resulting in (a) breakage of pencils, plastic toys, glassware, or other breakable items, and/or (b) scratches or permanent marks on furniture, walls, cars, etc.

N M W H +5 +10 Level 4 = PROPERTY DESTRUCTION resulting in structural damage to furniture, cars, walls, etc.

SELF INJURIOUS BEHAVIOR--forceful striking, scratching, rubbing, poking or biting own body parts such that repetition of the behavior over time has or will cause bodily injury (e.g., hitting, kicking, pinching, scratching or biting self; eye-poking); banging body parts against objects (e.g., head-banging).

For each of the four levels of SIB listed below, circle how often this type of behavior occurs, ranging from never (N) to over 10 times per hour (+10).

N = Never M = Monthly W = Weekly H = Hourly +5 = Over 5/hour +10 = Over 10/hour

FREQUENCY

N M W H +5 +10 Level 1 = SIB resulting in (a) no visible marks on body and (b) no blows close to or contacting the eyes.

N M W H +5 +10 Level 2 = SIB resulting in (a) reddening of skin, and/or (b) mild swelling.

N M W H +5 +10 Level 3 = SIB resulting in (a) light scratches, (b) small or shallow breaks in skin, and/or (c) moderate to severe swelling.

N M W H +5 +10 Level 4 = SIB involving blows close to or contacting the eyes or resulting in (a) scratches that leave scars, (b) breaks in skin that leave scars, and/or (c) trauma involving broken bones or lasting tissue damage or disfigurement.

Severity Screening Questions for Severe Behavior: Parent Version

Which of the following behaviors does your child engage in? (Check all that apply and see examples in parentheses). Note: If your child does not engage in any of these behaviors, please select "None of the above"

_____Aggression (physically hurting others, such as hitting, kicking, or biting others)

_____Property destruction (such as banging, breaking, or ripping items)

_____Self-injury (hurting oneself, such as head banging or hitting or biting oneself)

_____Elopement (such as running away or wandering off from home or school or an adult)

_____Pica (consuming inedible objects such as dirt, rocks, coins, or small items)

_____Risky behavior (touching hot items, consuming dangerous materials)

_____Oppositional behavior (noncompliance)

_____None of the above

Have the above problem behaviors resulted in any of the following? (Check all that apply). Note: If your child's problem behavior has not resulted in any of the following, please select "None of the above"

_____Hospitalization of child or others

_____Involvement of law enforcement

_____Blows close to or contacting one's own or someone else's eyes

_____Scratches or breaks in child's/other's skin that leave scars, broken bones, or lasting tissue damage

_____Consumption of sharp, contaminated, or toxic items

_____Structural damage to furniture, walls, cars, etc.

_____Running away from caregivers, out of sight and difficult to retrieve

_____None of the above

Has your child received at least 3 months of outpatient therapy conducted by a behavior analyst, psychologist, or other professional that focused on treatment of the above problem behavior (this can include outpatient caregiver-training programs)? Please do not include speech, OT, or PT services for which problem behavior was not the focus of therapy.

_____Yes

_____No

Has your child had at least 3 months of medication intervention for the above behavior problems OR has your physician/developmental pediatrician recommended intensive behavioral intervention in place of medication treatment?

_____Yes

_____No