| **PBIS Coordination Meeting Agenda/Notes/Action Plan** |
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| **Today’s Meeting** | **Date:** |  | **Time:** |  | **Location**:  |  |
| **Next Meeting** | **Date:** |  | **Time:** |  | **Location**:  |  |
| **Team Membership (bold those present)** |
|  | **Name** | **Meeting Role\* (if any)** |  | **Name** | **Meeting Role\* (if any)** |  | **Name** | **Meeting Role\* (if any)** |
| **Coordinators (Coaches)** |  |  | **Grade/****Department Representatives** |  |  | **Parent/ Family Member(s)** |  |  |
|  |  |  |  |  |  |
| **Administrator** |  |  |  |  | **Community Member(s)** |  |  |
| **Specialists** |  |  |  |  |  |  |
|  |  |  |  | **Student(s)** |  |  |
|  |  |  |  |  |  |
|  |  |  |  | **Other** |  |  |
| ***\* Meeting roles include Facilitator, Recorder, Time Keeper, Data Analyst, Action Plan Recorder, etc.*** |
| **Team Agreements** |
| **Norms** | **Purpose Statement** |
|  |  |
| **Agenda** |
| **Today’s Items** | **Time** | **Discussion** | **Decisions** **(add specific action items below)** |
| Welcome, Review and Finalize Agenda |  |  |  |
| Logistics and Review of Past Action Items |  |  |  |
| Data Review and Decision Making |  |  |  |
| Practice Selection/Development |  |  |  |
| Systems for Implementation |  |  |  |
| Other |  |  |  |
| Plan for Next Meeting |  |  |  |
| Team Evaluation of Operating Procedures |  |  |  |
| **Action Plan** |
| **Action Items** | **Notes** | **By Who?** | **By When?** |
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| **Outcome Evaluation and Communication** |
| **Outcome** | **Measure Used** | **Data Collection Schedule** | **Data Sharing and Communication Plan** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Evaluation of Team Operating Procedures (Mark your ratings with an “X”)** | **Yes** | **Partially** | **No** |
| 1. Was today’s meeting a good use of our time? |  |  |  |
| 2. In general, did we do a good job of ***tracking*** whether we’re completing the tasks we agreed on at previous meetings? |  |  |  |
| 3. In general, have we done a good job of actually ***completing*** the tasks we agreed on at previous meetings? |  |  |  |
| 4. In general, are the completed tasks having the ***desired outcomes***?  |  |  |  |
| 4. In general, did we do a good job following our ***team norms and procedures***?  |  |  |  |
| If some of our ratings are “Partially” or “No,” what can we do to improve things?  |  |  |  |