## F A S T
### Functional Analysis Screening Tool

Client: ____________________ Date: ____________
Informant: ____________________ Interviewer: ____________

**To the Interviewer:** The FAST identifies environmental and physical factors that may influence problem behaviors. It should be used only for screening purposes as part of a comprehensive functional analysis of the behavior. Administer the FAST to several individuals who interact with the client frequently. Then use the results as a guide for conducting a series of direct observations in different situations to verify behavioral functions and to identify other factors that may influence the problem behavior.

**To the Informant:** Complete the sections below. Then read each question carefully and answer it by circling "Yes" or "No." If you are uncertain about an answer, circle "N/A."

### Informant-Client Relationship
1. Indicate your relationship to the person: __Parent __Instructor __Therapist/Residential Staff __Other 
2. How long have you known the person? ___ Years ___ Months
3. Do you interact with the person daily? ___ Yes ___ No
4. In what situations do you usually interact with the person?
   - Meals
   - Academic training
   - Leisure
   - Work or vocational training
   - Self-care
   - Other

### Problem Behavior Information
1. Problem behavior (check and describe):
   - Aggression
   - Self-Injury
   - Stereotypy
   - Property destruction
   - Other
2. Frequency: ___ Hourly ___ Daily ___ Weekly ___ Less often
3. Severity: ___ Mild: Disruptive but little risk to property or health
   ___ Moderate: Property damage or minor injury
   ___ Severe: Significant threat to health or safety
4. Situations in which the problem behavior is most likely:
   - Days/Times
   - Settings/Activities
   - Persons present
5. Situations in which the problem behavior is least likely:
   - Days/Times
   - Settings/Activities
   - Persons present
6. What is usually happening to the person right before the problem behavior occurs?
7. What usually happens to the person right after the problem behavior occurs?
8. Current treatments

### Scoring Summary
Circle the number of each question that was answered "Yes."

<table>
<thead>
<tr>
<th>Items Circled &quot;Yes&quot;</th>
<th>Total</th>
<th>Potential Source of Reinforcement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 2 3 4</td>
<td></td>
<td>Social (attention/preferred items)</td>
</tr>
<tr>
<td>5 6 7 8</td>
<td></td>
<td>Social (escape)</td>
</tr>
<tr>
<td>9 10 11 12</td>
<td></td>
<td>Automatic (sensory stimulation)</td>
</tr>
<tr>
<td>13 14 15 16</td>
<td></td>
<td>Automatic (pain attenuation)</td>
</tr>
</tbody>
</table>

© 2002 The Florida Center on Self-Injury