ADDENDUM*
TO
AUTISM
SPECTRUM
DISORDER
MANUAL

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Addendum to Promising Practices for the Identification of Individuals with Autism Spectrum Disorders

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I. REFERRAL
CONSIDERATIONS FOR THE REFERRAL PROCESS

Each school district of the Northern Lights Special Education Cooperative has developed their own specific referral forms and procedures to facilitate the special education referral process. When a referral or concern about a child is brought to the special education team, the team may consider the following behaviors to assist in determining the path which the evaluation will take. Key questions that may assist the team in designing the evaluation plan, because of ASD concerns, are as follows:

I. Documentation of medical or mental health diagnosis?

II. Social Interactions:
   1. Take turns appropriately?
   2. Acknowledge people coming and going?
   3. Express wants and needs age-appropriately?
   4. Keep and maintain friends?
   5. Understand the unwritten social skills?

III. Verbal and Non-Verbal Communication:
   1. Perseverate on certain subjects?
   2. Make appropriate eye contact?
   3. Initiate conversation, play, and interact with peers or prefer to be by themselves?
   4. How does the student ask for help?
   5. Exhibit odd or repetitive speech patterns?

IV. Behavioral Indications:
   1. Play with toys in a strange manner?
   2. Exhibit specific rules for specific items?
   3. Resist changes in the classroom routine, i.e., substitute teachers, classroom arrangement, schedule differences?
   4. Display persistent preoccupation with topics, objects or activities?
   5. Have behavior breakdowns in certain situations? Under certain environmental conditions?

V. Developmental History:
   1. Were there any hearing concerns as a child?
   2. Did child develop words and then lose those words over a period of time?
   3. Does your child exhibit sleeping difficulties?
   4. How does your child react to pain or differences in temperature?
   5. Does your child have definite food preferences?
   6. Does your child have favorite clothing items?

The above information may be added to the district pre-referral form, incorporated into the specific areas of your pre-referral form, or used as leading questions at CST.
Evaluation Planning:

When a child is referred for an evaluation in which ASD may be a suspected disability, the team needs to look at a variety of information. The development of an evaluation plan should include the assessment of intelligence, motor skills, communication skills, social interactions, behaviors, developmental history and a review of information from a recent medical evaluation. A member of the school district's ASD team will also need to assist the team in reviewing the ASD criteria.

To assist the team in the differential diagnosis process, it is important that an evaluation team member should be knowledgeable in the range of special education criteria.

Below is a sample script for teachers to follow when developing a plan for evaluation, specifically when considering ASD. (This would be similar to how an evaluation team needs to inform parents when the team is considering ruling in/ruling out DCD/M). The script includes sensitivity to the disability and a statement of non-discriminatory practices. When it is a complicated case, the team should hold a pre-evaluation meeting to discuss how to approach the parents.

Sample Script:

“Tell us about your child. (Follow with questions from the developmental history).”

“We see ............. and this indicates some red flags that would point towards concerns in behavior, language or autism spectrum disorders.”

“Some characteristics of autism spectrum disorder are: (Use descriptors related to social interactions, communication and behavioral indications). While we want to look at your child in all areas, we would like to include evaluation tools that would specifically rule in or rule out autism spectrum disorder.”
II. INSTRUCTIONAL PRACTICES: EVIDENCE BASED INSTRUCTIONAL PRACTICES AND PROMISING INSTRUCTIONAL PRACTICES
Introduction to Effective Practices

Educators have been encouraged and required to adopt effective practices with children who have disabilities through recent educational reform and reorganization efforts, such as No Child Left Behind Act of 2001 (NCLB). This has been and continues to be difficult for professionals who work with children with autism spectrum disorders. Collecting information from which educators can make choices about scientifically based, reliable practices has been difficult even for the What Works Clearinghouse (WWC) www.whatworks.ed.gov, which is funded through the U.S. Department of Education. Ultimately, parents and professionals must work together to determine what methodology is most effective and suitable for each individual child.

To best select an intervention method for a student with ASD, three basic questions should be considered (Simpson, 2005):

1. What are the efficacious and anticipated outcomes that align with a particular practice, and are the anticipated outcomes in harmony with the needs of the student?

2. What are the potential risks associated with practice? (i.e., side affects, negative outcomes, time constraints, etc.)

3. What are the most effective means of evaluating a particular method or approach?


The following are examples of evidence-based practices and promising practices.
MEville to WeVille:  
This curriculum boasts being the “first ever research-based literacy program that meaningfully and systematically integrates reading, writing, speaking, and augmentative communicating and listening for elementary students with cognitive disabilities in the moderate to severe range”. Dr. Karen Erickson, from the Center for Literacy and Disability Studies at the University of North Carolina at Chapel Hill developed this curriculum. Initial research was conducted in special education classrooms to evaluate effectiveness of this program. The initial results are as follows:

- Children initiated more communication and interaction during the program
- Children developed stronger relationships with peers in special and general education
- Children became more socially responsive
- Teachers were able to spend more time addressing communication and literacy

This curriculum consists of 3 theme-based units. Each unit consists of a 300-page spiral-bound manual containing 75 lessons and 60 extension activities. The lessons focus on reading activities, vocabulary and word wall activities, writing activities, creating books, art projects, games, brainstorming and relationship building. Each unit includes one literature book that supports the theme and content of the lessons, activity reproducibles created with Boardmaker Symbols, and data collection tools for collecting and sharing student progress.

Cost: MEville to WeVille collection $225.00

Internet support:  www.ablenetinc.com, www.ablenetinc.com/resources.asp
Social Stories:

Social Stories are short, individualized stories that help a person with ASD better understand situations that might be stressful, difficult, or confusing to the person. They are written best by a caregiver who knows a bit about the student’s current level of understanding and preferences. A social story can be designed to teach a new social skill, help prepare a student for an upcoming situation that might be stressful (for example, a fire drill or having a substitute teacher), or in some situations, to help teach more appropriate behaviors. Social stories are mostly written in the first person, as if the person with autism is the narrator. It often helps to illustrate these stories with drawings or photographs.

Carol Gray has clearly defined social stories for use with persons on the spectrum and has written several publications about how to write the stories, as well as the most effective ways to present the stories to students. She notes that social stories are most effective when they are comprised of mostly descriptive sentences, very few directive sentences, and some affirmation types of sentences. A very short example follows:

Title: Going on a Field Trip

Our class will be going on several field trips this year. Some of them are in our town, and some of them will be farther away, with a bus ride that is almost one hour long.

Field trips can be very interesting, like when we will visit the train depot. I am an expert on facts about trains. The teacher will let me talk for a short amount of time to the class about the things I know about trains, when this field trip occurs.

Some field trips are less interesting to me because they are not about trains. These field trips might be interesting to other people, but we all go on field trips together.

When I am at the other field trips, I can try to use polite behavior, even if I might not be interested. I can tell what polite behavior is by watching two kids who don’t get in trouble, Robert and Sam, and try to use the same behaviors and body language.

It will be fun to go on the field trips this year!

Discrete Trial Training:

Discrete Trial Training (DTT), a brief explanation by Steve Buckmann, Indiana Resource Center for Autism, (www.iidc.indiana.edu/irca). References also include: University of South Dakota, Center for Disabilities, (www.usd.edu/cd)

Discrete Trial Training (DTT) is a “method of providing intervention” which has 4 distinct parts: the trainer’s presentation, child’s response, consequence, and a brief pause between intervals. It is based on the principles of Applied Behavior Analysis (ABA) or behavior modification. The difference in DTT programs is in what they teach rather than how they teach. Not all programs use the same curriculum. There is some confusion between actual Discrete Trial Training and
informal, periodic use of this method, which is common. Actual DTT programs are intense, usually involving several hours of 1:1 instruction per day over periods of months or years.

DTT is designed to teach many skills from basic (i.e. dressing) to complex (i.e. social interaction), usually to young children. Tasks are broken into very short trials with success reinforcement. There is controversy about the time requirements and generalization, however, research does show consistent results in teaching new skills to students with autism.

Much effort and knowledge is required to effectively implement DTT. All involved must understand all aspects of these programs, including how to implement and how to evaluate effectiveness and appropriateness.

**TEACCH:**

In order to effectively teach students with autism, teachers must structure classrooms to meet the children's needs. (Division TEACCH, 2005). This article addresses the issue of planning for and using the concept of structure within educational environments. Individualization and promotion of independence are two main areas to consider for children with autism. Receptive language impairments are a typical characteristic of autism, causing a child to possibly not understand or communicate at the level the teacher thinks he or she may be able to.

To maximize on children's strength and facilitate areas of need in the classroom, teachers must structure and organize the physical space, schedule, and teaching methods used for each individual child. When setting up a classroom a teacher must consider incorporating areas for learning specific tasks, marking clear boundaries, and making materials easily accessible. This helps the child to independently know where they are supposed to be and get their own materials. For work tasks, materials should be clearly marked and developed at the student's level of understanding. A consistent schedule also provides a child with a framework that outlines who, what, where, and when work should be completed. Sequential memory, organization, and receptive language difficulties can make it difficult for a child to understand what to do. An overall classroom schedule often needs to be broken down into specifics for the child with autism for individualized work activities. Activities can be task-analyzed; pictures can be used to represent activities and the child's responsibilities. These individual student schedules must be age appropriate, balanced with difficult and successful activities, based on the student's level of comprehension, the student's endurance level, and address transitions within and between activities (Division TEACCH, 2005).

When teaching, verbal directions should be clear, concise, kept to a minimum and accompanied by gestures to help students to understand. Work set up from left to right helps with the child's organizational needs and offers a systematic way for the child to complete tasks more independently. Physical, gestural and situational prompts can be used to assist the student as needed. Motivational methods must be specific for the child. From the organization of the physical space to the schedule and teaching methods used for each individual; all of these components must be addressed to effectively teach autistic students.

Annotated Bibliography
The Incredible 5 Point Scale:


This is a resource for assisting students with autism spectrum disorders in understanding social interactions and controlling their emotional responses. The methodology used, however, is also applicable for individuals other than those with autism spectrum disorder. The objective of this resource is to illustrate how to utilize a 5 point scale within a program to teach social understanding. Utilizing numbers rather than feelings or social-emotional wordage has been shown to help children who do not relate to these abstract concepts. Writing a social story to go along with the scale is a good way to introduce the concept to children. Social stories can be written in the form of a letter, memo or written description of the problem. These stories should be designed to provide the child with more information about the problem behavior. When breaking down a behavior, the top or bottom of each scale may not represent good or bad. The idea is to break down a behavior into clear concrete parts for people who lack this social ability. Five point scale is a self-regulation measure. It can be a non-verbal way for teachers to indicate where the child is currently on the scale (by pointing) and where they would like them to be.

Annotated Bibliography

Picture Exchange Communication System:

Developed by Andrew S. Bondy, Ph.D. & Lori Frost, M.S., CCC/SLP. (www.pecs.com)

The Picture Exchange Communication System (PECS) is an augmented communication program developed to help persons with autism acquire functional communication skills. The system has been successfully used with adolescents and adults as well as young children. First developed in 1985, PECS has received worldwide recognition for concentrating on spontaneous initiation of communication.

PECS uses Applied Behavior Analysis (ABA) based methods to teach students to exchange a picture for a desired item or activity. It is a clear, structured program using very specific strategies which are designed to control the prompts/cues that are used. The PECS Training Manual 2nd Edition is a practical and helpful guide which provides all the information necessary to implement the strategy. There are six phases of training which are explained with examples and hints in the manual.

Created to be easily used in many settings, PECS does not require costly or complex materials.
SRA Direct Instruction Reading Mastery:

Siegfried Engelmann, Elaine C. Bruner, Susan Hammer, Owen Englemann, Karen Lou Seitz Davis, Jean Osborn, Steve Osborn, Leslie Zoref

The SRA reading series provides systematic, intensive reading instruction to students in kindergarten through 6th grade. The teacher’s reading presentation book contains fully scripted reading lessons. The student’s reading book contains decodable stories that reinforce phonics skills. The student’s workbook provides exercises aligned with each lesson.

Website: www.SRAonline.com
Phone: 1-800-789-2665

Edmark Reading Programs:

This program helps most readers (age 3-adult) master basic reading skills. When phonics doesn’t work, the sight word approach usually does. The program uses short steps and progresses at each student’s ability rate.

The Edmark Reading Program, Level 1 presents 150 words from the Dolch Word list and first grade readers. It introduces capitalization, punctuation, compound words and word endings (s, ed, and ing). This program can be used for individual or for small group work and includes a record keeping system.

The Edmark Reading Program, Level 2 introduces 200 new sight words and reviews and reinforces those already taught in Level 1. Comprehension questions are included for the real life two page stories which students read. It also includes read/review and picture/phrase card lesson formats. The readability of Level 2 is 1.0 to 3.0.

Edmark also produces a Reading Software, Levels 1 & 2 program. This software can be used independently, or it can supplement the above listed reading programs. Levels 1 & 2 teach 350 sight words using four formats. These include sight word recognition, teaching of word meanings, comprehension activities and the words are used in a short story.

The Edmark Functional Word Series uses a multi-sensory technique to teach students aged 9 and older. They introduce 400 basic vocabulary words necessary for independent community living. It is intended to follow the Edmark Reading Program Levels 1 & 2. The series includes programs on signs, grocery words, restaurant words and work/job words.

Website: www.donjohnston.com/catalog/edmarkdtxt.htm
**Reading Milestones:**

The Reading Milestones program is designed to take students to the 5th grade reading level. Publishers note that it is especially effective for students with hearing impairments, language delays or learning differences, as well as students who are learning English as a second language.

This program is designed to minimize the gap between the student’s language base and the materials they are given to read. Students take small steps and are constantly reinforced. The skills introduced are vocabulary, language structure and comprehension. The vocabulary was drawn from several high-frequency word lists. Literal, inferential, evaluative and critical reading are the essential comprehension skills students work on in this program.

The program’s student components, at each of the 6 levels, include readers, workbooks, spelling books, placement tests and student test booklets.

**Adaptations/Adjustments to Curriculum and Materials:**

Teachers may easily make adjustments to mainstream class materials and expectations. After conferring with the student’s team, the material students are expected to master may be altered. Worksheets may be changed by enlarging the print, omitting questions or sections that might be overwhelming or not appropriate for that student’s situation. When adjusting mainstream tests, the format may be made to look exactly the same, but multiple choice questions may have 2 or 3 options instead of 4. Some questions may be omitted entirely. Written/essay questions may be done outside the room with a resource teacher writing what the student dictates.

May be purchased at [www.education.com](http://www.education.com)
I. **Visual Supports:**


Visual support techniques can be used with children and adults who have behavior and learning problems. Building predictability into a person's day reduces the amount of anxiety that comes from not knowing what to expect. The article provided examples of how to arrange a classroom to make it less visually and auditorily stimulating. Clear boundaries must be defined, with a designated place for educational items. Use schedules with visual icons and design them so that the child knows what has been completed and what is yet to come. It is important to make the start and end of each activity predictable. Time timers can be used to show when an activity will end and another will start. "To do" and "finished" boxes can be used to designate a specific place for activities that need to completed or are all done. Activities can be structured so that they can be completed as independently as possible. Task-analyze the steps of activities by breaking tasks into small steps to follow. Children can be taught scripted responses for certain social situations, such as asking a peer to play a game. Social stories can be used to explain new concepts to children. In addition, children should be given choices whenever possible!

II. **Visual Supports:**

Individuals who have difficulty understanding spoken language often have increased success when visual supports are provided. There are a variety of visual communication tools that can be used. They include: objects, photographs, picture symbols (color or black/white), printed words, daily schedules, choice boards, First Then strips, social stories and charts. These visual supports help individuals with autism to understand what is happening in their environment and the expectations that are being communicated. Also, the use of visual supports helps individuals cope with change as well as increase independence with daily routines and tasks.

*Boardmaker, Picture It and Picture This* are three good software programs that can be used to create visual schedules, choice boards, work box activities, social stories, and much more. Boardmaker from Mayer-Johnson, [http://www.mayer-johnson.com](http://www.mayer-johnson.com)
Picture It from Slater Software, [http://www.slatersoftware.com](http://www.slatersoftware.com)
Picture This and School Routines and Rules from Silver Lining Multimedia, [www.silverliningmm.com](http://www.silverliningmm.com)
Carol Gray’s Social Stories: [http://www.thegraycenter.org](http://www.thegraycenter.org)
Examples of Social Stores that are helpful (just add pictures!): [http://www.frfd.k12.mj.us/autisitc/social%20stories/social_stories.htm](http://www.frfd.k12.mj.us/autisitc/social%20stories/social_stories.htm)
Scaffolds:


This article focused on how to teach cognitive strategies. The research shows that teachers of such strategies use instructional procedures called scaffolds. Scaffolds are forms of support that are provided by the teacher to help students to bridge the gap between what they know and are able to do and the intended goal (new skill being taught). The article stated that scaffolds can be used when teaching any skill but can be especially useful for teaching higher level cognitive strategies. Scaffolding does not involve supplying explicit steps to the child, but supporting them through the use of scaffolds. The teacher models processes and weans the modeling as the child begins to take on responsibility for completing a task. "Thinking aloud" is an example of a type of scaffolding used to teach student to generate questions. Cue cards have been used with some students. The cards typically contain the prompts the students have been taught, which allows the child to put more thought into applying a prompt without having to remember it.
Incidental Teaching:

Incidental teaching is a method of instruction or strategy for teaching language to children with autism. It is a language promotion technique that is provided in the context of natural environments. Incidental teaching is based on the child’s interests and the interactions between child and adult. This technique involves the child and adult having fun while interacting about something in which the child is interested.

The environment needs to have interesting materials or activities for the child to do or about which to talk. Once the child initiates an interaction by either gesturing or speaking, the adult responds with prompts for elaboration and praise for the expression of interest.

Incidental teaching requires specialized training of the teacher and careful planning of the instruction in order for the child to gain the most from the interaction. These teaching procedures may apply to the areas of academics, socialization and self-care.

Sources used: What’s Incidental about Teaching? Autism-Aspergers Digest Magazine, May/June 2003 and research on the web, Incidental Teaching (Project Spies for Parents, and Incidental Teaching: Introduction (i can).

Other sources: Incidental Teaching (Charlop-Christy & Carpenter, 2000)

Relationship Development:

1. Relationship Development Intervention with Young Children: Social and Emotional Development Activities for Aspergers Syndrome, Autism, PDD and NLD. Gutstein, Steven E. & Sheely, Rachelle K.

This volume is designed for younger children, age 2 to 9. It uses a development model, starting at relationship fundamentals. Emphasis is on foundational skills such as social referencing, regulating behavior, conversational reciprocity and synchronized actions. The program is a 6 level system in which levels 1-3 are covered in this edition.

Included in the program are many objectives to plan and evaluate progress. Most activities are presented in a developmental fashion. You can either follow the order given or choose a specific topic on which to focus. There is a Topic Index of Activities that provides a cross referenced index of activities and objectives.

Training is available for RDI (very expensive) but it is emphasized that you can follow and use the manual without being trained. Before working on any relationship building skills, you have to address severe aggressive, oppositional or non-compliant behaviors. Though there is promising initial research currently in progress, this method has not yet been studied enough to be considered as a researched-based practice.
2. **Companion Volume: Relationship Development Interventions with Adolescents and Adults: Social and Emotional Development Activities for Aspergers Syndrome, Autism, PDD and NLD.** Gutstein, Steven E. & Sheely, Rachelle K.

This volume is for older children and adults. There are no activities provided that cover Levels 1-3 for older individuals; however, the main emphasis of this volume is levels 4-6. These areas include advanced friendship development and maintenance of skills.

Website: [www.connectionscenter.com](http://www.connectionscenter.com)

**Also, [www.rdiconnect.com](http://www.rdiconnect.com).** You can order the manuals through this site for $28.00 each.

### Social Understanding:


Based on the research that children with Autism lack "theory of mind", this manual is based on an experimental study (see reference below) conducted by the authors and provides an easy to follow teaching guide. The program was designed for children with autism, between ages 4-13 years, with language age of at least a 5 year old level. It is designed to help children with autism improve their understanding of beliefs, emotions and pretenses. The guide covers the following areas: Teaching About Emotions, Teaching About Emotional States and Developing Pretend Play.

This program was developed in response to research which revealed that although social and communication skills programs have some success with social functioning, generalization of those skills in untrained settings is limited. Also, these programs do not promote social understanding. Therefore, the focus of this program is on improving social understanding by teaching explicitly theory of the mind (know, desire and think) through training.

Research: The development of this program is based on sound research conducted in the field of Autism. The program itself lacks enough research to be certified as a research based intervention at this time but holds much promise.


*Development and Psychopathology.*

**This manual can be found through [www.Amazon.com](http://www.Amazon.com) or the National Autistic Society.** There were used manuals available at Amazon. Com for $28.00
III. TRANSITIONS
Transition Planning for Students with ASD

Transition planning is a process of preparing students for life after graduation from high school and required for all students with disabilities. The basic considerations are the same for students with ASD as for students with any other disability. Planning should begin early, prior to age 14, and consider all five areas of transition. It is a fluid, ongoing process that needs to be revisited frequently. Planning should be based upon students’ interests, preferences and future goals. Assessment can be both formal and informal. Refer to cooperative web SPAM Manual for general information on transition, all of which is applicable to students with ASD.

Students with autism spectrum disorder often display behavior characteristics that affect all aspects of their lives: academic ability, peer and family relationships, daily living skills, recreation and leisure, community involvement, etc. Because the scope of the disability is so great, it sometimes becomes difficult for the team to prioritize which specific outcomes might be included on the IEP and which skills ought to be taught in order for the student to attain those outcomes.

Additionally, a significant component of a successful transition plan might involve the training of staff on the impact of the ASD. For example, although students with ASD exhibit behavioral and social deficits, it is not the same as an emotional/behavioral disorder and the behaviors are not addressed in a similar manner.

This section provides information that will hopefully assist in setting a framework for transition planning aspects that are somewhat unique to ASD. It is not meant to be definite. New and improved materials are continually being developed and located. It will, however, provide a good starting point. Additional information, please contact the Northern Lights Special Education Cooperative.
Transition Considerations for Students with ASD  
(Adapted from the book, Asperger Syndrome and Adolescence by Myles and Adreon)

For students with ASD, transitions (movement from one program or setting to another) can be very difficult whether it be from elementary to middle schools, middle to high schools, or high school to post-secondary. Preplanning and providing social and environmental supports can help to make transitioning a successful event.

What follows are some suggestions and recommendations. As with all disabilities, individual needs and programming will vary and the degree to which any suggestions are implemented will depend upon the student and the program.

PREPLANNING

Conducting or Receiving Assessments
- Ensure that all staff who will be working with the youth, understand the students’ strengths and concerns.

Choosing Next Environment
- Visit different types of programs or programs at different schools to determine appropriate placement options.

Transition Planning Meeting
- Create the student’s schedule. Careful attention should be paid to choosing electives and creating opportunities for “downtime” and identifying where the student can engage in preferred activities to decrease anxiety levels.
- Create, review, and/or revise the IEP or 504 Plan to ensure that all necessary adaptations and modifications are included (i.e., homework, class work, lunch, physical education, before school activities).
- Identify a teacher or administrator who will serve as the primary school contact for the parent to discuss any problems or changes that may occur.
- Identify a team of individuals at the school who will serve as “safe persons”.
- Schedule dates and content of training sessions for school personnel. Plan to complete all training before the first day of school — if possible, before student orientation.
- Plan an orientation schedule for the student. Many schools provide a general orientation for all students transitioning to middle school in the spring of the final year of elementary school. Students with AS need a more extensive orientation process than typical students. Suggestions for orientation activities are provided under Student Orientation. The majority of the orientation activities may be conducted during the week before the start of the school year.

Training for School Personnel
- Conduct a general orientation for all personnel at the school.

This training session should:
- Overview the characteristics of individuals with AS.
- Provide information on the specific behavioral, academic, and emotional concerns of the student.
Include all teachers, counselors, administrators, office staff, cafeteria workers, security, etc. who will have contact with students.

Provide training on how to implement the strategies determined during the transition planning meeting and/or included in the student’s IEP or 504 Plan. All teachers, counselors, and administrators in contact with the student should be present.

This training session should include information on:
- The specific, step-by-step procedure the student can use to seek out the safe person and get to home base.
- The procedure to be followed for behavioral problems.
- The procedure for ensuring that homework assignments are recorded and that required materials are brought home.
- How to implement all academic modifications, accommodations, and supports.
- Any other needs or issues that require discussion.

Student Orientation
- Provide a walk-through of the student’s daily schedule. In schools where the schedule changes from day to day, the student should have the opportunity to practice all possible schedules. If applicable, student “buddies” should be available to walk through the schedule with the student with AS.

The following are suggestions for the walk-through:
- Provide visual/written class schedule(s) for the student.
- Videotape a walk-through school schedule for the student to review at home.
- Practice route(s) from various classes to the bathroom, counselor’s office, home base, etc.
- Meet all teachers and relevant personnel.
- Provide the student with pictures and names of all teachers in advance of the orientation.
- Provide the student with pictures and names of all support personnel, such as safe person, counselors, special education coordinators, assistant principals and principal, in advance of the orientation.
- Provide the student with pictures and names of all additional personnel, such as cafeteria workers, school nurse, etc.
- Provide the student with pictures and names of student “buddies”.
- Show the student where her assigned seat in each classroom will be.
- Obtain information about school routines and rules (i.e., lunch, going to bathroom, before/after school, transportation).
- Provide instruction on the procedure for seeking out the safe person and home base.
- Practice use of transition to home base through role-play.
ACADEMIC MODIFICATIONS

Priming
- Determine whether priming will help meet the student’s need for predictability.
- Analyze student needs and classroom demands to determine which classes will require priming.
- Identify who will prime.
- Designate whether priming will use actual or similar materials.
- Determine where and when priming will occur.

Classroom Assignments
- Determine the student’s needs concerning assignments.
- Provide the student with extra time to complete assignments.
- Shorten the length of assignments.
- Reduce the number of assignments.
- Break assignments into small segments.
- Provide samples/models of completed assignments and/or a list of specific criteria for successful completion.
- Allow the student to use the computer for schoolwork and/or homework.
- Allow the student to demonstrate mastery of concepts through alternate means (dictate essays, oral test, etc.).

Note Taking
- Indicate the type of note taking supports needed by the student.
- Provide a complete outline.
- Give student a skeletal outline.
- Identify a peer who can take notes for the student.
- Allow student to use outlining software.

Graphic Organizers
- Determine whether graphic organizers are needed to facilitate skill acquisition and maintenance:
  - Hierarchical
  - Conceptual
  - Sequential
  - Cyclical
  - Other
- Determine who will construct and provide organizer to student:
  - Teacher
  - Peer
  - Student with Template
  - Student with outlining software

Enrichment
- Determine the type of enrichment needed:
  - Specify how the enrichment area will be identified.
  - Determine when and how enrichment will be provided.
  - Decide whether a learning contract with specified working conditions is needed.
Homework

- Identify which class subjects will include homework responsibilities.

- Determine homework modifications
  - Present homework assignments visually (on board, etc.) in addition to orally.
  - Provide the student with a homework sheet or planner
  - Provide student with the assignment in written format.
  - Reduce the amount of homework.
  - Provide a study hall period to allow the student time to complete homework at school.

- Identify home strategy for completing homework
  - Designate place and time for homework completion.
  - Define organization to get homework back to school.
  - Name contact if additional clarification on homework is needed.
CONSIDERATIONS FOR UNSTRUCTURED OR LESS STRUCTURED TIMES

Transportation/Bus
- Identify who will teach the student the bus routine.
- Determine who will provide assistance for the student when the bus arrives at school, particularly on the first day. Have a peer or school staff greet the student at the bus and accompany him to the bus at the end of the day.
- Determine how long assistance will be needed in getting to and from the bus throughout the school year.
- Identify the peer or school personnel to be assigned to assist the student in this process, including backups.
- Provide a pickup or drop off closer to the student’s house.
- Provide adult supervision at the bus stop.
- Provide a peer “buddy” from the student’s neighborhood to wait with the student at the bus stop and sit with her on the bus.
- Provide preferential seating on the bus. This may include seating the student in close proximity to the driver or allowing her to sit in her own seat/row.
- Provide a monitor or aide on the bus.
- Provide a special bus.

Physical Education
- Consider whether to exempt the student from physical education and, if so, substitute another special or a study hall. This is particularly important if poor motor skills have led to teasing or rejection by peers.
- Assign the student a specific role for PE such as scorekeeper, equipment manager, etc. This allows him to participate in PE, but minimizes the motor and social demands of playing a sport.
- Assign teams rather than allow students to choose teams themselves.
- Have school personnel monitor, as least twice weekly, the student’s perceptions of the PE period by asking her how she feels it is going.
- Help the student problem-solve difficulties.

Lunch
- Have school personnel available during the first week of school to assist the student in navigating the cafeteria line, finding a place to sit, and engaging in an appropriate activity once he has finished eating.
- Help the student identify school personnel whom she can approach during the lunch period when encountering problems.
- Have school personnel closely monitor the student’s interactions with peers and intervene when problems occur.
- Have school personnel closely monitor the student and intervene when she becomes stressed and overwhelmed or begins to experience sensory overload.
- Have school personnel monitor, at least twice weekly, the student’s perceptions of the lunch period by asking the student how he/she feels it is going.
- Help the student problem-solve any difficulties.
- Provide assigned seating with a preferred friend, away from problem peers and/or near adult supervision.
- Provide peer “buddy/buddies” during lunchtime.
• Allow the student to leave the cafeteria once he has finished eating to engage in a calming or preferred activity (e.g., go to media center, computer lab).
• Allow the student to eat lunch in an alternative location if necessary (e.g., counselor’s office, media center).

Changing Classes
• Provide peer or teacher assistance (particularly during the first week of school) to help the student manage the crowded hallways, open locker, locate the proper materials, and find the correct classroom.
• Provide a peer “buddy” to accompany the student during class changes if he continues to experience difficulty during this time. This “buddy” might assist the student with organizational issues, protect against teasing/bullying by other students, and help promote positive social interactions.
• Provide the student with additional time for class changes.
• Allow alternate passing time when the hallways are free from other students. For example, the student might change classes before or after the general transition period.

Changes in Routine
• Specify whether the student needs to be informed of any changes in typical classroom procedures (assemblies, fire drills, guest speakers, seating changes, substitute teacher).
• Determine what additional supports the student needs when changes occur.

Before and After School
• Identify when the student should arrive at school.
• Determine whether a specific room will be used during this time.
• Identify peers to support the student at this time.
• Provide structured activities.
ENVIRONMENTAL SUPPORTS

Preferential Seating
- Determine if preferential seating is necessary:
  - Identify location.
  - Identify peers who can support student.

Organizational Strategies
- Determine the student’s needs concerning organization of papers and materials.
- Provide assistance in organizing the backpack, locker, and/or desk and teach the student to do so independently.
- Teach the student to use timelines.
- Instruct the student on how to develop a to-do list.

Home Base
- Identify when home base will be used:
  - Before school or early morning.
  - Following specific classes.
  - At the end of the day.
- Determine cue to prompt the home base.
- Determine home base location.
- Identify activities that will occur during home base.

Safe Person
- Identify a safe person.
- Determine the role of the safe person, to possibly include:
  - Social skills training.
  - Social skills interpretation.
  - Active listening.
  - Calming of the student.
  - Sensory support.

Visual Supports
- Identify which supports are needed:
  - Map of school outlining classes.
  - List of classes, room numbers, books, and other supplies.
  - List of teacher expectations and routines for each class.
  - Outlines and notes from lectures.
  - Model of assignments.
  - Test reminders.
  - Schedule changes.
  - Homework instructions.
  - Cue to home base.

Travel Card
- Identify special educator role.
- Determine student role.
- Identify general educator participation.
- Define parent role.
SOCIAL SUPPORTS

Hidden Curriculum
- Identify hidden curriculum items.
- Define who will teach hidden curriculum.
- Determine when instruction will occur.

Social Skills Instruction
- Determine need for direct instruction:
  - Identify curriculum.
  - Determine social skills instructor.
  - Determine when social skills instruction will occur.
- Determine if acting lessons may support social skills instruction:
  - Identify coach’s need for AS awareness training.
  - Provide awareness training to other student actors.
- Consider whether social stories are a viable means of instruction:
  - Identify individual who can create social stories.
  - Determine how the need for a social story will be communicated.
  - Determine who will monitor social story effectiveness.

Circle of Friends
- Provide awareness training to peers.
- Identify peers to participate in Circle of Friends.
- Determine when Circle of Friends is needed to support student.

Social Skills Interpretation
- Determine a social skills interpreter.
- Ensure social skills interpreter knows how to use (a) cartooning, (b) social autopsies, (c) SOCCSS, and (d) sensory awareness.
- Identify when student will have access to the social skills interpreter:
  - Scheduled time.
  - As needed.

Getting used to change and new situations is always easier and less threatening given proper advance notice and preparation. Nowhere is this truer than for adolescents with ASD who are transitioning from one school setting to another. For a student with ASD, need for routine, sameness, and predictability is severely challenged during times of change. To reduce the student’s anxiety upon entering a new school at a very vulnerable age, a sound orientation program conducted well in advance of the actual transition is essential. Such orientation should include familiarization with the physical setting of the school and its grounds, introduction to all pertinent teachers and staff, and explanation of rules for behavior as well as academic performance (Adreon & Stella, 2001). For students graduating from high school, the transition planning and preparation will necessitate student involvement, student’s knowledge of future goals and a creative team.

*Reproduced with permission from Keith Myles, Ph.D., President of Autism Asperger Publishing Company. For more information and related resources please see www.asperger.net.
Autism Spectrum Disorders and Transition

Though the basic structure of the transition process is the same for all students with disabilities, understanding the aspects unique to a specific disability can strengthen the planning process. Recognizing potential roadblocks to successful transition as well as general areas of strength can better ensure that the student’s needs are met when the team meets to plan the course of instruction that will allow the student to move smoothly into their chosen life after high school.

Some basic facts about autism spectrum disorder:
- Lifelong developmental disability
- Neurological disorder that affects brain functioning
- Best considered as a disability on a continuum from mild to severe
- Children who are mildly affected are still substantially handicapped due to deficits in socialization and communication

Students with autism spectrum disorder certainly do not look or behave alike, nor do they have exactly the same strengths and weaknesses. However, there are certain characteristics that are common to a person with ASD. These traits can interfere with successful transition or can be turned into a potential asset. The following characteristics are those most often seen in persons with ASD and are listed along with their possible impact on the transition of those who share that trait:

Communication

Difficult understanding/following directions

Some transition areas affected:
- Employment:
  --might not understand and/or retain instructions given by employer
- Community Participation
  --given verbal directions of how to get to a store, for example, a person with ASD would likely either forget part of the directions or follow them in an incorrect order resulting in the person becoming lost

Literal/Concrete Understanding

Some transition areas affected:
- Recreation and Leisure
  --while playing a game with peers, a student with ASD might misunderstand friendly teasing comments, such as, “I’m going to beat you” not realizing that the word “beat” has more than one meaning. It would not be surprising to find that the student with ASD would not play the game out of fear of being hurt (beaten).
- Daily Living Skills
  --a phrase such as “take the bus” which is obvious in meaning to most people, can be quiet confusing to an individual with ASD, who would quite possibly question how it is possible and legal to take the city’s property.
Limited expressive language/conversation skills

Some transition areas affected:

Daily Living Skills
--many people with ASD never learn to verbalize; those people would be in a compromised position if they needed to make an emergency call to 911.

Post-Secondary and Training
--a person with ASD who is involved in post-secondary education is probably receiving training in an area of high interest to that person. The person with ASD might monopolize class discussions with the minute details of a particular topic.

Social

Lack of desire to please

Some transition areas affected:

Daily Living Skills
--a person with ASD may have problems with renting an apartment and getting along with neighbors due to appearing “odd” or unsocial, i.e., not recognizing physical boundaries, ignoring any topic but his/her own, not remembering apartment rules that have been related verbally, etc.

Community Living
--if approached by a police officer, may not recognize the seriousness of the situation and may display behaviors that may cause the officer to be unduly suspicious.

Restrictive, repetitive, and stereotypical patterns of behavior

Difficulty with handling change

Some transition areas affected:

Employment
--a person with ASD might display behavior difficulties if changes are made to the job without adequate preparation.

Community Living
--a person with ASD could react strongly to changes in a bus schedule or to differences in how items are displayed in the grocery store.
Differences in sensory perceptions

Some transition areas affected:

Recreation and Leisure
--a person with ASD may not become involved in many leisure activities due to overreactions to sensual stimuli; for example, the noise produced by a group of people playing a game or the multicolored lights found at a dance club.

Post-Secondary and Training
--classrooms and training spaces can force people to be in close contact; the person with ASD may be distracted by others brushing against him/her and may even react physically to the contact.

The listing of examples could be extensive, however, the attempt is to simply demonstrate that the characteristics associated with autism spectrum disorder are pervasive and can potentially impact all areas within the transition process.

Resources: "Characteristics of People with Autism" & SW/WC Service Cooperatives
IV. RESOURCES FOR TEACHERS AND PARENTS
This is not an exhaustive list of resources and is not necessarily endorsed by the Northern Lights Special Education Cooperative.

**Resources for Teachers**

**Books**

*Addressing the Challenging Behavior of Children with High Functioning Autism / Asperger’s Syndrome in the Classroom* by Rebecca Moyes (2002)


*Incorporating Social Goals in the Classroom – A Guide for Teachers and Parents of Children with High Functioning Autism and Asperger’s Syndrome* by Rebecca Moyes and Susan Moreno (2001)

*Teaching Children with Autism* by Kathleen Quill (1995)

**Websites**

Center for the Study of Autism  
[http://www.autism.org](http://www.autism.org)

Autism Research Institute  

Division TEACCH  
[http://www.teacch.com](http://www.teacch.com)

Polyxo  
[http://www.polyxo.com](http://www.polyxo.com)

Multimodal Functional Behavior Assessment  
[http://mfba.net](http://mfba.net)

The Gray Center  
[http://www.thegraycenter.org](http://www.thegraycenter.org)

Do2Learn  
[http://www.do2learn.com](http://www.do2learn.com)

ASPIRES  

Preschool Teachers  
[http://www.perceptualpreschool.com](http://www.perceptualpreschool.com)

Teacher Message Board  
[http://www.teachers.net](http://www.teachers.net)
Strategies

**Books**


*Activity Schedules for Children with Autism* by Lynn E. McClannahan & Patricia J. Krantz (1999)

*Writing and Developing Social Stories* by Caroline Smith (2003)


*Navigating the Social World* by McAfee (2001)

*Social Star* by Nancy Gajewski, Polly Hirn & Patty Mayo (1993)

*Thinking About You Thinking About Me* by Michelle Garcia Winner (2002)

*Comic Book Conversations* by Carol Gray (1994)

*Tasks Galore: For the Real World* by Pat Fennell, Kathy Hearsey and Laurie Eckenrode (2004)

*Tasks Galore* by Pat Fennell, Kathy Hearsey and Laurie Eckenrode (2003)

*Tasks Galore: Making Groups Meaningful* by Pat Fennell and Kathy Hearsey Laurie Eckenrode (2005)


**Websites**

The Incredible 5-Point Scale
[http://www.5pointscale.com](http://www.5pointscale.com)

Visual Strategies
[http://www.usevisualstrategies.com](http://www.usevisualstrategies.com)

Customize Social Books
[http://sandbox.learning.com](http://sandbox.learning.com)

Model Me Kids
[http://www.modelmekids.com](http://www.modelmekids.com)
LOVAAS
http://lovaas.com

Social Skills Lesson Plans
http://www.cccoe.net/social/skillslist.htm
Resources for Parents

Books

Addressing the Challenging Behavior of Children with High Functioning Autism / Asperger’s Syndrome in the Classroom by Rebecca Moyes (2002)


Crossing Bridges: A Parent’s Perspective on Coping After Diagnosis of Autism/PDD by Vickie Satkiewicz (1996)

Emergence: Labeled Autistic by Temple Grandin (1996)

Thinking in Pictures by Temple Grandin (1995)

Let Me Hear Your Voice by Catherine Maurice (1994)

Mixed Blessings by William and Barbara Christopher (1989)

News from the Border by Jane McDonnell (1993)

Nobody Nowhere and Somebody Somewhere by Donna Williams (1994)

The Sound of a Miracle by Annabel Stehli (2004)

There’s a Boy in Here by Judy and Sean Barron (2002)

Without Reason by Charles Hart (1989)


The Effects of Autism on the Family by Eric Scholer & Gary Mesibov (1984)

Websites

Autism Society of America
http://www.autism-society.org

Autism Society of Minnesota
http://www.ausm.org

Center for the Study of Autism
http://www.autism.org
Autism Research Institute
http://www.autism.com/ari

The Gray Center
http://www.thegraycenter.org

Visual Strategies
http://www.usevisualstrategies.com

Do2Learn
http://www.do2learn.com

ASPIRES
http://www.aspired-relationship.com

The Incredible 5-Point Scale
http://www.5pointscale.com

Family Village
http://www.familyvillage.wisc.edu/lib_autm.htm

General Links
http://www.ude/edu/bkirby/asperger
http://www.kathyandcalvin.com
http://www.autism-pdd.net
http://www.asperger.org/articles/pddoo0.asp

** For autism friendly health practitioners go to the Autism Society of Minnesota Resource Directory http://www.ausm.org
Additional Resources

Books


V. FREQUENTLY ASKED QUESTIONS
1. Referral Process for identification and evaluation

Who do I call if I suspect a child may have Autism Spectrum Disorder (ASD)?

Within NLSEC, there is an accepted process for referring any child who may have a developmental delay or learning problems.

**Children, birth to age three years**

For children under the age of three, call the Early Childhood Special Education Coordinator for Northern Lights Special Education Cooperative, who is the central intake person for all young children referred. The ECSE Coordinator works with the local district’s ECSE team to arrange a screening visit to determine the child’s strengths, needs and parent concerns.

In some instances and with parent agreement, an early childhood assessment plan will be discussed at the first home visit. This assessment plan must include an assessment of intelligence, motor skills, communication skills, social interactions, behaviors, a developmental history, and a review of the information from a recent medical evaluation. If indicators for autism are noted in the initial screening/observation, the screening team would conduct an autism screener, bring the concerns to the parent and contact a member of the school’s ASD team with results of the screen. An individual with ASD training will then join the team to assist with the early childhood evaluation. ECSE assessment teams need to be knowledgeable in the range of special education criteria.

**Children, three years of age to pre-kindergarten age**

For children who are three years of age to five years of age (pre-kindergarten), the elementary building principal of the local school district, is the initial contact for a referral. The principal will pass the referral to the appropriate early childhood special education teacher for the school district.

An appointment is set for the family to meet the ECSE teacher who will conduct an overall developmental screening using a standardized, Minnesota-approved screening test. In some instances and with parent agreement, an early childhood assessment plan will be discussed at the completion of the developmental screening. If indicators for ASD are observed in the initial screen, an autism screen will be conducted and observations shared with the parent. The screener/teacher will contact a member of the ASD team within the district. The assessment plan must include an assessment of intelligence, motor skills, communication skills, social interactions, behaviors, a developmental history, and a review of the information from a recent medical evaluation. A member of the school district’s ASD team will join the team to assist with the early childhood evaluation. ECSE assessment teams need to be knowledgeable in the range of special education criteria.

**Children and youth, kindergarten through grade 12**

The referral process for children who are already enrolled in school, is the same for all suspected areas of disability. Referrals can be made to administrators of special education teachers who then direct the referral to the local building’s Child Study Team. The local CST works with the referral source to understand the learner, his/her educational and behavioral needs, and determine the educational assessment course. If considering ASD, this assessment plan could include an assessment of intelligence, motor skills, communication skills, vision and
hearing, social interactions, behaviors, a developmental history and a review of the information from a recent medical evaluation. A member of the school district’s ASD team will join the child’s special education assessment team to assist with the evaluation. A member of the building’s special education assessment teams need to be knowledgeable in the range of special education criteria.

2. Members on child’s special education evaluation team
*Who should be on the educational assessment team for a child who is referred for ASD possible assessment?*

For a student evaluation where ASD is suspected, members of the educational assessment team should include a school psychologist, speech clinician, the general education teacher who has been supporting the learner in the regular education classroom, a member of the district’s ASD team and a special education staff person who has professional knowledge in the range of special education criteria. When establishing the assessment team membership, it is important to keep in mind that all the ASD criteria elements must be properly addressed.

3. Early identification and early intervention
*Why is early identification and early intervention of children with Autism Spectrum Disorder so important?*

Early and intensive behavioral intervention, which employ evidence based practice and are known to meet the unique learning styles of children with ASD, can make a significant positive impact on the child’s growth and development. Behavioral therapies are most effective when started early and used consistently. It is recommended that educational services begin as soon as a child is suspected of having an autism spectrum disorder. Early training in social skills and functional communication skills are essential for successful inclusion in general education curricula. Intensive behavioral interventions have been shown to be effective for all individuals with autism, regardless of age. The gains made with the children starting at later ages (older than age 5) appear to decrease in accordance with age.

Early childhood intervention research suggests that providing two years of intensive behavioral therapies to a very young child with autism is significantly less costly than providing life-long specialized services to a child with autism who has not been identified until school age.

4. Educational needs for a student identified as Autism Spectrum Disorder
*What is important to include in an individual education plan for a student whose primary disability area is ASD?*

The evaluation report, which identifies the student’s present levels of performance and special education needs, should drive the goals and objectives, as well as the placement and service delivery of all students qualifying for special education services. Children identified with ASD minimally will have both social and communication needs identified in the ER as part of meeting the ASD criteria. Social and communication goals should be reflective of these identified needs. Additional needs may be identified through the evaluation process. Examples of goals and objectives can be found in Appendix B.
5. Data collection
Why is it important to keep data and what are some efficient ways to record the necessary data?

The frequent and regular collection of data is essential in determining the success of the strategies and interventions implemented. Analysis of the collected data allows the team to properly plan behavior interventions, document progress on goals and identify appropriate accommodations. A variety of data collection tools are available in Appendix C. School psychologists are an excellent resource for information on data collection forms and techniques. Another source for data collection tools is the Functional Behavior Assessment materials which can be found in the Special Education Process and Assistance Manual (SPAM).

6. Disagreement among the child’s team
What happens when teams can’t agree upon the primary disability for a student?

As with any successful team process, open and frequent communication among teachers, parents and administrators is essential for a productive special education process.

Disagreements among members of special education teams are not uncommon, however, it is a good idea to reach a general consensus of opinion prior to the meeting with the parents. IDEA states that parents have the right to participate in any meeting, however, a meeting does not include informal conversations or preparatory activities in which school staff might engage prior to the development of a proposal.

If the student has been evaluated and determined eligible for special education, and meets criteria for more than one disability area, a disability category must be chosen before the specialized instruction can begin. It is the school district that has ultimate responsibility to ensure the IIP/IEP provides the services which are necessary for the child to receive a free, appropriate public education (FAPE). It is not appropriate to make any due process decision based upon a majority “vote”. If a team member disagrees with the team decision, s/he has the option of writing a letter of disagreement.

Although the parents are members of the child’s team and have the right to participate and give input into the evaluation process, the parents should not be asked to “choose” the primary special education category under which their child will be receiving specialized instruction. The parent’s role is to help develop the goals that will enable their child become as independent and responsible as possible.

Ultimately, the child’s needs, not the special education category should dictate the services provided and the strategies implemented.

7. Least Restrictive Environment
How are teams making decisions regarding placement for students with ASD?

The purpose of special education is to provide services in the setting most natural to the student and to a degree that is optimally effective. To this end, students with disabilities should attend
the same school they would typically attend if they did not have a disability and, to as great a
degree as is possible, they should participate in academic, nonacademic and extracurricular
activities with children who do not have disabilities. The IEP team determines appropriate
degree of involvement based upon the student’s needs. In addition to defining the child’s
special education services, the educational plan must include adaptations that will help a child
with Autism Spectrum Disorder to participate in regular and special education. Adaptations may
include supplemental aids and services, program modifications or supports for school personnel
and assistive technology.

8. Approaches for treating students with ASD

What are some successful treatments for students with ASD?

There is no standard, universally accepted practice for working with individuals with autism. It is
important to provide families, who are making decisions regarding therapy, access to individuals
with expertise in autism spectrum disorder. Though there are positive and negatives to each, there are four general approaches to working with individuals with ASD:

1. bio-chemical e.g., food allergies, medications, food and vitamin supplements;
2. neurosensory e.g., Sensory Integration, over stimulation and patterning, Auditory
   Training, daily life therapy;
3. psycho-dynamic e.g., psychotherapy and psychoanalysis, and
4. behavioral e.g., discrete trials, ABA, TEACCH. Each method has varying degrees of
   research to support its use.

Teams should know and understand the research before recommending a particular method of
programming.

When there is a dietary restriction, is the school district responsible for monitoring that the
restrictions are honored?

If the family requests that the child’s educational team assist them in restricting their child’s
intake of certain food because these foods trigger physical discomfort, then the team must work
with the family to prevent the child from consuming targeted foods. It is reasonable for the
family to provide substitute foods.

Is sensory integrative therapy acceptable to be included in programs for children with ASD,
even though it is not research based?

On nearly 90% of the items of the Sensory Profile (Dunn, 1999), children with autism performed
meaningfully different from children without disabilities and items were widely scattered across
all factors on the Sensory Profile.

Part of Minnesota’s ASD criteria includes behavioral indicators that are directly related to over-
reaction or under-reaction to sensory stimuli. If, during the evaluation process, the team
determines that sensory issues impact the educational progress and participation in the general
curriculum, the team will incorporate that information into the specialized instructional
approaches.
9. Classroom accommodations and instructional supports  
*Who is responsible for visual supports/modifications in the classroom?*

As with all disability areas, appropriate accommodations and modifications of the curriculum used in the classroom are determined on an individual basis by the educational team. The case manager, in collaboration with the classroom teacher(s) is responsible for monitoring these classroom adaptations. When planning for students with ASD, it is important to keep in mind visual supports and adaptations should be presented in a consistent manner in all school and home settings. Typically, in the area of communication, the speech therapist is responsible for monitoring social communication supports.

10. Paraprofessional support  
*Who is responsible for providing training and ongoing support to para-professionals?*

Since teachers do not hire, terminate and are not responsible for performance evaluations, teachers cannot supervise paraprofessionals. Supervision of paraprofessionals is the school administrator’s responsibility.

Teachers are key in providing information and assistance to paraprofessionals and their work with students because the para is assisting and supporting the teacher in facilitating student learning; this is referred to as directing the work of paraprofessionals.

Each member of the child’s IEP team, who is certified/licensed, takes responsibility for: identifying the learner’s needs; developing instruction to meet those needs; assessing learner performance; and evaluating the effectiveness of the educational programs and related services. The paraprofessional assists each team member to accomplish their goal of increasing the child’s learning rate and of becoming an independent learner.

Because there are so many variables to consider e.g., individual child’s IEP needs; relationships between/among the IEP team; availability of each IEP provider; and compensated para time, it might not be reasonable to assume that only the child’s IEP case manager should be the lead for providing training and on-going support to the para professional.

It is the ultimate responsibility of the school administrator who supervises the paraprofessional, to provide ongoing training and support. It is the responsibility of the child’s IEP team to provide opportunities for the para to communicate with them about training and support to order to assist the learner.

References:

A guide for Minnesota parents to the individualized education program (IEP). (2005). Written and published by Pacer Center, 8161 Normandale Boulevard, Minneapolis MN 55437-1044


[http://www.pediatrics.org/cgi/content/full/107/5/e85](http://www.pediatrics.org/cgi/content/full/107/5/e85)

http://www.vaporia.com

http://www.aota.org American Occupational Therapy Association website


MAWSECO’s Information discussion tool for child study teams as they plan for evaluation under the autism spectrum disorder criteria (9/95).


“What do paraprofessionals do in Minnesota classrooms?” (10/12/05). A PowerPoint available through Minnesota Department of Education. http://www.education.state.mn.us/mde/Learning_Support/Special_Education
APPENDIX A
ASSESSMENT FOR AUTISM SPECTRUM DISORDERS
Principles of Effective Test Use:

1. Maintain the security of the testing materials.
2. Avoid labeling individuals based on a single test score.
3. Adhere strictly to the copyright law.
4. Administer and score tests exactly as specified in the manual.
5. Release results only to authorized persons and in a form in keeping with accepted principles of test interpretation.
6. Individuals should use only those tests for which they have the appropriate training and expertise. According to AGS, some tests may be administered or scored by individuals with less training, as long as they are under the supervision of a qualified test user.
7. The most current revision of the assessment tool should be used within one year of the release of the newest version.

Tests are generally classified by a three-level user qualification code:

LEVEL A – user has completed at least one course in measurement, guidance, or an appropriate related discipline or has equivalent supervised experience in test administration and interpretation.

LEVEL B – user has completed a graduate (or in some cases an undergraduate) degree program that included (a) coursework in principle of measurement and in the administration and interpretation of tests, and (b) formal training in the content area of the test.

LEVEL C – user has completed a doctoral (or in some cases a master's) degree program in one of the fields of study indicated for the test, that included training (through coursework and supervised practical experience) in the administration and interpretation of clinical instruments. See the specific test description for the required degrees and fields of study.
<table>
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<tr>
<th>NAME - AUTHOR - PUBLISHER</th>
<th>FORMAT</th>
<th>AGE</th>
<th>Who Administers?</th>
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<td>Bayley Scales of Infant and Toddler Development – Third Edition (2005)</td>
<td>Individual</td>
<td>1 month to 48 months</td>
<td>Level C</td>
<td>A multi-scale battery of five subtests used to identify deficits in very young children across five major developmental domains: cognitive, language, motor, adaptive behavior and social-emotional. A Behavior Rating Scale is an optional sixth scale.</td>
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<tr>
<td>The Psychological Corporation, Harcourt Assessment, Inc. 19500 Bulverde Road, San Antonio, Texas 78259-3701</td>
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</tr>
<tr>
<td>Differential Ability Scales (DAS) (Elliott, 1990)</td>
<td>Individual</td>
<td>2-6 to 17-11 years of age</td>
<td>Level C</td>
<td>The DAS measures overall cognitive ability and specific abilities in children and adolescents. The 17 cognitive and 3 achievement subtests yield an overall cognitive ability score and achievement scores. A Nonverbal scale for both preschool and school age students is available. The 3 achievement subtests are Basic Number Skills, Spelling, and Word Reading. The Preschool Level measures reasoning as well as verbal, perceptual, and memory abilities and is suitable for ages 2.6 to 6.</td>
</tr>
<tr>
<td>Differential Ability Scales-II (DAS-II) will be published in summer of 2006</td>
<td></td>
<td>2-5 to 17-11 years of age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Psychological Corporation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AGS 4201 Woodland Road Circle Pines, Minnesota 55014</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Kaufman Assessment Battery for Children- 2nd Edition (K-ABC-II) 2004</td>
<td>Individual</td>
<td>3 to 18 years of age</td>
<td>Level C</td>
<td>A culturally fair ability test. Scales include Simultaneous Processing, Sequential Processing, Planning, Learning and Knowledge. There is a nonverbal option that allows testing of students with severely limited verbal skills.</td>
</tr>
<tr>
<td>AGS Publishing</td>
<td></td>
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</tr>
<tr>
<td>Test Name</td>
<td>Age Range</td>
<td>Examiner Requirement</td>
<td>Description</td>
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</tr>
<tr>
<td>Leiter International Performance Scale- Revised (Leiter-R) , 1997</td>
<td>Individual 3 years and older</td>
<td>Level B</td>
<td>Measures intelligence independent of language ability. Neither the examiner nor the child is required to speak, and the child doesn’t need to read or write, either. It is especially suitable for children who are cognitively delayed, nonverbal, autistic. The Leiter-R consists of two batteries, the Visualization and Reasoning battery and the Attention and Memory Battery.</td>
<td></td>
</tr>
<tr>
<td>Stanford-Binet Intelligence Scale-5th Edition (SB5) (2003)</td>
<td>Individual 2 years to 85+</td>
<td>Restricted test-trained, certified examiner</td>
<td>The SB5 is an individually administered ability test which measures both Verbal and Nonverbal domains. Five factor scores are obtained in Fluid Reasoning, Knowledge, Quantitative Reasoning, Visual-Spatial Processing, and Working Memory.</td>
<td></td>
</tr>
<tr>
<td>Test of Nonverbal Intelligence-3 (TONI-3) (1997)</td>
<td>Individual age 6 through 89 years of age</td>
<td>Level B</td>
<td>The TONI-3 is a norm-referenced measure of intelligence, aptitude, abstract reasoning, and problem solving that is completely free of the use of language.</td>
<td></td>
</tr>
<tr>
<td>Wechsler Intelligence Scale for Children-IV(WISC-IV) (2003)</td>
<td>Individual 6 to 16-11 years of age</td>
<td>Level C</td>
<td>A widely used measure of intelligence. In addition to the Full Scale score, four Index scores are also available. They include Verbal Comprehension, Perceptual Reasoning, Working Memory and Processing Speed.</td>
<td></td>
</tr>
<tr>
<td>Test</td>
<td>Administration</td>
<td>Age Range</td>
<td>Examiner Requirements</td>
<td>Description</td>
</tr>
<tr>
<td>---------------------------------------------------------------------</td>
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</tr>
<tr>
<td><strong>Wechsler Preschool and Primary Scale of Intelligence-Third Edition (WPPSI-III), (2002)</strong></td>
<td>Individual</td>
<td>2-6 to 7-3 years of age</td>
<td>Level C</td>
<td>A widely used measure of intelligence. In addition to the Full Scale IQ, scores are provided for Verbal IQ, Performance IQ and a Perceptual Speed Quotient.</td>
</tr>
<tr>
<td><strong>Comprehensive Test of Nonverbal Intelligence (C-TONI) (1997)</strong></td>
<td>Individual</td>
<td>6 through 90 years of age</td>
<td>Level B</td>
<td>A nonverbal measure of intelligence. It measures Analogical Reasoning, Categorical Classifications, and Sequential Reasoning in two different contexts: pictures of familiar objects and geometric designs.</td>
</tr>
</tbody>
</table>
### Academic Assessments

<table>
<thead>
<tr>
<th>NAME - AUTHOR - PUBLISHER</th>
<th>FORMAT</th>
<th>AGE</th>
<th>WHO ADMINISTERS?</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brigance Series 1999</td>
<td>Individual</td>
<td>Birth to developmental age 7</td>
<td></td>
<td>A diagnostic and criterion referenced tool which assesses academic, social emotional and functional skills.</td>
</tr>
<tr>
<td>Curricular Associates, North Billerica, MA 1. Diagnostic Inventory of Early Development –II (IED-II)</td>
<td>Individual</td>
<td>PreK-9 grade</td>
<td></td>
<td>Tests basic skills in reading, math, and writing.</td>
</tr>
<tr>
<td>2. Comprehensive Inventory of Basic Skills- Revised (CIBS-R)</td>
<td>Individual</td>
<td>6-12 grades</td>
<td></td>
<td>Assesses reading, math, language arts, study skills and life skills.</td>
</tr>
<tr>
<td>3. Inventory of Essential Skills</td>
<td>Individual</td>
<td>Grade 2- High School</td>
<td></td>
<td>Applicable as part of a Transition assessment.</td>
</tr>
<tr>
<td>4. Life Skills and Employability Skills Inventories (LSI, ESI)</td>
<td>Individual</td>
<td>Ages 4-6 through 25</td>
<td>Level B</td>
<td>Tests achievement in reading, math and written language and oral language.</td>
</tr>
<tr>
<td>Kaufman Test Of Educational Achievement-II (KTEA-II), 2004 AGS</td>
<td>Individual</td>
<td>Ages 3-0 to 6-11</td>
<td>Level B</td>
<td>A measure of children's language skills (receptive and expressive), pre-academic skills, and articulation.</td>
</tr>
<tr>
<td>Kaufman Survey of Early Academic and Language Skills (K-SEALS)</td>
<td>Individual</td>
<td>K-12 grades</td>
<td>Level B</td>
<td>Measures understanding and application of important mathematics concepts and skills. Areas include: Basic Concepts, Operations and Applications.</td>
</tr>
<tr>
<td>Slosson Oral Reading Test-Revised (SORT-R3) 1998 Slosson Educational Publications, Inc. East Aurora, N.Y. 14052</td>
<td>Individual</td>
<td>Preschool to adult</td>
<td></td>
<td>A test of written composition. It assesses spontaneous writing skills and contrived writing skills.</td>
</tr>
<tr>
<td>Test of Written Language-Third Edition (TOWL-3) 1996 Pro-ED 5341 Industrial Oaks Blvd. Austin, Texas 78735</td>
<td>Individual</td>
<td>Ages 7-6 through 17-11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Test Description</td>
<td>Administration</td>
<td>Age Range</td>
<td>Notes</td>
<td></td>
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</tr>
<tr>
<td>Wide Range Achievement Test 4 (WRAT-4) 2006</td>
<td>Individual</td>
<td>Ages 5-94</td>
<td>A measure of the basic academic skills of reading, spelling and mathematical computation.</td>
<td></td>
</tr>
<tr>
<td>Woodcock-Johnson III Tests of Achievement</td>
<td>Individual</td>
<td>Ages 2-90</td>
<td>Restricted Test-trained certified examiner</td>
<td></td>
</tr>
<tr>
<td>Woodcock Reading Mastery Test, Revised- Normative Updates (WRMT-R/NU) 1987/1997</td>
<td>Individual</td>
<td>Ages 5 through 75</td>
<td>Level B</td>
<td></td>
</tr>
<tr>
<td>Woodcock Johnson Diagnostic Reading Battery 2004</td>
<td>Individual</td>
<td>Ages 2-90</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wechsler Individual Achievement Test- Second Edition (WIAT II) 2001</td>
<td>Individual</td>
<td>Ages 4 to 85</td>
<td>Level B</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>An achievement test measuring reading, mathematics, written expression, oral expression and listening comprehension.</td>
<td></td>
</tr>
</tbody>
</table>
## Communication Assessments

<table>
<thead>
<tr>
<th>NAME - AUTHOR - PUBLISHER</th>
<th>FORMAT</th>
<th>AGE</th>
<th>WHO ADMINISTERS?</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism Diagnostic Interview-Revised (ADI-R) 2003 Western Psychological Services</td>
<td>Individual</td>
<td>2 yrs and up</td>
<td>Speech/Language Clinician</td>
<td>Extensive, semi-structured interview for evaluator to use with parent or primary caregiver. Administration requires approx. 1-2 hours, special training, and utilizes a standardized scoring algorithm to verify that an individual is functioning within the Autism Spectrum. Based upon DSM-IV and ICD-10 diagnostic criteria.</td>
</tr>
<tr>
<td>Autism Diagnostic Observation Schedule (ADOS) 3rd printing. 2003 Western Psychological Corporation</td>
<td>Interactive/Individual</td>
<td>Toddlers to adults</td>
<td>Trained psychologists, special educators, professional clinicians and others with specialized training</td>
<td>A semi-structured, standardized assessment of social interaction, communication and play or imaginative use of materials for individuals who have been referred for evaluation because of possible autism or other pervasive developmental disorders. The play-based activities provide an interesting, yet standardized, reliable and valid measure to use in the evaluation process. It utilizes a standardized scoring algorithm to verify that an individual is functioning within the Autism Spectrum. Based upon DSM-IV and ICD-10 diagnostic criteria.</td>
</tr>
<tr>
<td>Children’s Communication Checklist- 2 (CCC-2) US Edition 2006 The Psychological Corporation</td>
<td>Individual</td>
<td>Ages 4-0 to 16-11</td>
<td>Level B</td>
<td>Screen for general language impairment, identify children with pragmatic impairment and determine children who would benefit from further assessment for ASD.</td>
</tr>
<tr>
<td>Instrument</td>
<td>Creator/Provider</td>
<td>Type</td>
<td>Age Range</td>
<td>User</td>
</tr>
<tr>
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</tr>
<tr>
<td>Checklist for Autism in Toddlers (CHAT)</td>
<td>University of Cambridge</td>
<td>Individual interview/observation/checklist</td>
<td>18—36 months</td>
<td>A brief, 14-item checklist, yet effective instrument used as a screening test to identify very young children with possible autism. It has adequate sensitivity and specificity for detecting young children at risk for being diagnosed with autism. Primarily used to identify early behavioral indicators and direct further evaluation.</td>
</tr>
<tr>
<td>Communication and Symbolic Behavior Scales</td>
<td>Brookes Publishing</td>
<td>Individual</td>
<td>6 months to 6 years</td>
<td>Speech/Language, ECSE teachers</td>
</tr>
<tr>
<td>Language Samples</td>
<td></td>
<td>Individual</td>
<td>Any</td>
<td>Speech/Language</td>
</tr>
<tr>
<td>Language Processing Test: 3 Elementary (LPT:3)</td>
<td>Lingui Systems</td>
<td>Individual</td>
<td>Ages 5 to 11</td>
<td>Speech/ Language</td>
</tr>
<tr>
<td>Peabody Picture Vocabulary Test, Revised III (PPVT - III)</td>
<td>AGS Publishing</td>
<td>Individual</td>
<td>Age 2-6 through 90</td>
<td>Level B</td>
</tr>
<tr>
<td>Preschool Language Scale- 4 (PLS-4)</td>
<td>Psychological Corporation</td>
<td>Individual</td>
<td>Birth through age 6-11</td>
<td>Level B</td>
</tr>
<tr>
<td>Test</td>
<td>Edition</td>
<td>Publisher</td>
<td>Age/Range</td>
<td>Users</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
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</tr>
<tr>
<td>Rossetti Infant–Toddler Language Scale</td>
<td>2005</td>
<td>Lingui Systems, Inc.</td>
<td>0–3 years</td>
<td>Speech/Language</td>
</tr>
<tr>
<td>Test of Adolescent and Adult Language (TOAL–3)</td>
<td>1993</td>
<td>The Riverside Publishing Co</td>
<td>Age 12–0 through 24-11</td>
<td>Speech/Language Spec Ed Teachers</td>
</tr>
<tr>
<td>Test of Language Competence- Expanded Edition (Level 1 and Level 2)</td>
<td>1989</td>
<td>The Psychological Corporation</td>
<td>Age 5-0 to 9-11 and 10-0 to 18-11</td>
<td>Level B</td>
</tr>
<tr>
<td>Test of Language Development –Primary :Third Edition (TOLD-P:3)</td>
<td>1997</td>
<td>Riverside Publishing</td>
<td>Primary: age 4-0 through 8-11 Intermediate age 8-0 through 12-11</td>
<td>Speech /Language Spec Ed Teachers</td>
</tr>
<tr>
<td>Test of Problem Solving- Adolescent (TOPS)</td>
<td>1991</td>
<td>Lingui Systems, Inc.</td>
<td>Ages 12 -17</td>
<td>Speech/Language Pathologist</td>
</tr>
<tr>
<td>The Listening Test</td>
<td></td>
<td>Lingui Systems, Inc.</td>
<td>Ages 6-12</td>
<td>Speech/Language Pathologist</td>
</tr>
<tr>
<td>Test of Semantic Skills- Primary (TOSS-P)</td>
<td></td>
<td>Lingui Systems, Inc.</td>
<td>Age 4-8</td>
<td>Speech/Language Clinician</td>
</tr>
<tr>
<td>Listening Comprehension and Oral Expression Scales</td>
<td>1995</td>
<td>AGS</td>
<td>Ages 3-21</td>
<td>Level B</td>
</tr>
<tr>
<td>The Word Test 2: Elementary</td>
<td>Individual</td>
<td>Ages 6-11 Ages 12-17</td>
<td>Speech and Language clinicians</td>
<td>Assess expressive vocabulary and semantic skills.</td>
</tr>
</tbody>
</table>
## Motor Assessments

<table>
<thead>
<tr>
<th>NAME – AUTHOR – PUBLISHER</th>
<th>FORMAT</th>
<th>AGE</th>
<th>WHO ADMINISTERS?</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brockport Physical Fitness Test Human Kinetics</td>
<td>Individual</td>
<td>Ages 10 to 17</td>
<td>Licensed DAPE or PE teacher</td>
<td>A health related test for youths with physical and mental disabilities. Criterion referenced.</td>
</tr>
<tr>
<td>Peabody Developmental Motor Scales, Second Edition (PDMS-2) 2000 Western Psychological Services</td>
<td>Individual</td>
<td>Birth through age 5</td>
<td>Occupational/Physical therapist</td>
<td>Assesses fine and gross motor skills in young children.</td>
</tr>
<tr>
<td>Test of Gross Motor Development Second Edition PRO ED</td>
<td>Individual</td>
<td>Ages 3-0 through 10-11</td>
<td>Adaptive Phy Ed Teacher Physical Therapist</td>
<td>Assesses childhood gross motor development. Assists in identifying children who are significantly behind their peers and who might be eligible for DAPE.</td>
</tr>
<tr>
<td>Test of Visual Perceptual Skills: Revised 1996 Psychological and Educational Publications</td>
<td>Individual</td>
<td>Ages 4-1 through 13 years</td>
<td>Teacher Occupational Therapist</td>
<td>Assess visual perceptual skills. Best for higher functioning and older children.</td>
</tr>
</tbody>
</table>
## Sensory Assessments

<table>
<thead>
<tr>
<th>NAME - AUTHOR - PUBLISHER</th>
<th>FORMAT</th>
<th>AGE</th>
<th>WHO ADMINISTERS?</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sensory Integration Inventory for Individuals with Developmental Disabilities (Revised) 2001</td>
<td>Individual</td>
<td>Any age</td>
<td>Occupational Therapist</td>
<td>An inventory that addresses the sensory areas including tactile, vestibular, proprioception and general reactions.</td>
</tr>
<tr>
<td>Infant/Toddler Sensory Profile 2002</td>
<td>Individual</td>
<td>Birth to 26 months Age 3 to 10 years</td>
<td>Level A</td>
<td>Parents or caregivers complete a profile about the child’s responses to sensory experiences for the Infant/Toddler and Sensory Profile. The student completes a self-report for the Adolescent/Adult Sensory Profile.</td>
</tr>
<tr>
<td>Sensory Profile 1999</td>
<td>Individual</td>
<td>Ages 11 years and older</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sensory Profile School Companion 2006- soon to be published</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Adolescent/ Adult Sensory Profile 2002</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychological Corporation</td>
<td></td>
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</table>
## Health/Physical Assessments

<table>
<thead>
<tr>
<th>NAME – AUTHOR – PUBLISHER</th>
<th>FORMAT</th>
<th>AGE</th>
<th>WHO ADMINISTERS?</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism Diagnostic Interview- Revised (ADI-R) 1994 Western Psychological Services</td>
<td>Individual</td>
<td>Age 2 and above</td>
<td>An experienced clinical interviewer</td>
<td>An Interview of a parent or caregiver gains information regarding communication, reciprocal social interactions and restricted, repetitive and stereotypical behaviors and interests.</td>
</tr>
<tr>
<td>Developmental History (no one specific)</td>
<td>Individual</td>
<td>Any Age</td>
<td>Any member of Educational Team</td>
<td>Any developmental history form can be used to gather information regarding the individual’s development.</td>
</tr>
<tr>
<td>Structured Developmental History: Behavior Assessment System for Children 1992 AGS Publishing</td>
<td>Individual</td>
<td>Any Age</td>
<td>Level B</td>
<td>Interview format that provides a thorough review of social, psychological developmental educational and medical information about a child.</td>
</tr>
</tbody>
</table>
# Social/Emotional/Behavior Assessments

<table>
<thead>
<tr>
<th>Name - Author - Publisher</th>
<th>Format</th>
<th>Age</th>
<th>Who Administers?</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism Diagnostic Interview-Revised (ADI-R) 1994</td>
<td>Individual Interview</td>
<td>2 yrs and up</td>
<td>Level B</td>
<td>Extensive, semi-structured interview for evaluator to use with parent or primary caregiver. Administration requires approx. 1-2 hours, special training, and utilizes a standardized scoring algorithm to verify that an individual is functioning within the Autism Spectrum. Based upon DSM-IV and ICD-10 diagnostic criteria.</td>
</tr>
<tr>
<td>Autism Diagnostic Observation Schedule (ADOS). 2000 Western Psychological Corporation</td>
<td>Interactive/ Individual</td>
<td>1 yr—adult (not for use with nonverbal adolescents or adults)</td>
<td>Trained psychologists, special educators, professional clinicians and others with specialized training</td>
<td>A semi-structured, standardized assessment of social interaction, communication and play or imaginative use of materials for individuals who have been referred for evaluation because of possible autism or other pervasive developmental disorders. The play-based activities provide an interesting, yet standardized, reliable and valid measure to use in the evaluation process. It utilizes a standardized scoring algorithm to verify that an individual is functioning within the Autism Spectrum. Based upon DSM-IV and ICD-10 diagnostic criteria.</td>
</tr>
<tr>
<td>Autism Screening Instrument for Educational Planning–2 (ASIEP-2) 1993 Western Psychological Services</td>
<td>Individual</td>
<td>18 months to adult</td>
<td>School Psychologist or experienced teacher of autism</td>
<td>Contains five subtests: autism checklist, sample of vocal behavior interaction assessment, educational assessment of functional skills, prognosis of learning rate. Items are weighted according to how predictive they are of autism.</td>
</tr>
<tr>
<td>Checklist for Autism in Toddlers (CHAT). 1999</td>
<td>Individual interview/ observation/ checklist</td>
<td>18—36 months</td>
<td>Educational, health and child development professionals</td>
<td>A brief, 14-item checklist, yet effective instrument used as a screening test to identify very young children with possible autism. It has adequate sensitivity and specificity for detecting young children at risk for being diagnosed with autism. Primarily used to identify early behavioral indicators and direct further evaluation.</td>
</tr>
<tr>
<td>Test Name</td>
<td>Format</td>
<td>Age</td>
<td>Type</td>
<td>Summary</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------</td>
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</tr>
<tr>
<td><strong>Childhood Autism Rating Scale (CARS) 1986</strong></td>
<td>Individual</td>
<td>Age 2 and up</td>
<td>Educational Team</td>
<td>Purpose of this scale is to rate a child’s behavior characteristics without judging whether the behavior may be explained by brain damage, mental retardation, or some other impairment. The child’s behaviors are scored on a scale of 1 to 4 ranging from normal to severely abnormal, considering his or her age.</td>
</tr>
<tr>
<td><strong>Motivation Assessment Scale, Durand &amp; Crimmins</strong></td>
<td>Individual</td>
<td>all</td>
<td>Spec Educator</td>
<td>Assesses the communicative functions of maladaptive behavior, (Attention, Escape, Tangible, Sensory).</td>
</tr>
<tr>
<td><strong>Behavior Assessment System for Children, 2nd Edition (BASC-2) 2005</strong></td>
<td>Individual</td>
<td>Ages 3-21</td>
<td>Level C</td>
<td>Comprehensive behavioral rating scales, assesses adaptive and maladaptive behaviors</td>
</tr>
<tr>
<td><strong>Mainstream Survival Skills Checklist., Minneapolis Public Schools, 1988</strong></td>
<td>Individual</td>
<td>Elementary &amp; Secondary</td>
<td>Spec Educator</td>
<td>Assesses student’s survival skills in the areas of Functional Academics, Classroom and Personal Responsibility, and Socialization as compared to typical peers.</td>
</tr>
<tr>
<td><strong>Minnesota State Criteria for the Identification of Autism</strong></td>
<td>Individual</td>
<td>all</td>
<td>Spec Educator-Educational Team</td>
<td>Identifies students who meet the educational label for autism.</td>
</tr>
<tr>
<td><strong>Social Skills Rating System, Gresham, F. &amp; Elliott, S., 1990, AGS</strong></td>
<td>Individual</td>
<td>Ages 3-18</td>
<td>Level B</td>
<td>Questionnaire is designed to measure how often a student exhibits certain social skills and how important those skills are for success in your classroom.</td>
</tr>
<tr>
<td><strong>Psychoeducational Profile 3 (PEP-3) 2005 PRO-ED</strong></td>
<td>Individual</td>
<td>6 months – 7 years</td>
<td></td>
<td>Individually administered assessment plus caregiver checklist</td>
</tr>
<tr>
<td><strong>Krug’s Asperger’s Disorders Index (KADI) Date</strong></td>
<td>Individual</td>
<td>Age 6-21</td>
<td></td>
<td>Distinguishes individuals with Asperger’s from those who have other forms of high functioning autism. Helps identify educational needs.</td>
</tr>
<tr>
<td><strong>Gilliam’s Asperger’s Disorders Scale (GADS) 2001 PRO-ED</strong></td>
<td>Individual</td>
<td>Ages 3-21</td>
<td></td>
<td>Assess a student’s social interactions, restricted patterns of behavior, cognitive patterns, and pragmatic skills.</td>
</tr>
<tr>
<td>Instrument</td>
<td>Type</td>
<td>Age Range</td>
<td>Level</td>
<td>Description</td>
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</tr>
<tr>
<td>PDD Behavior Inventory (PDDBI)</td>
<td>Individual checklist</td>
<td>18 months to 12 years, 5 months</td>
<td>Level B</td>
<td>Parent teacher checklist for students diagnosed with PDD. Designed to identify problem behaviors and social communication skills.</td>
</tr>
<tr>
<td>Asperger Syndrome Diagnostic Scale (ASDS)</td>
<td>Individual checklist</td>
<td>Age 5-18 years</td>
<td></td>
<td>Screening tool for possible autism spectrum disorders.</td>
</tr>
</tbody>
</table>

2006 Northern Lights Special Education Cooperative ADDENDUM TO AUTISM SPECTRUM DISORDER MANUAL “Promising Practices for the Identification of Individuals with Autism Spectrum Disorders, MDE, November 2000. 63
## Functional Assessments

<table>
<thead>
<tr>
<th>NAME - AUTHOR - PUBLISHER</th>
<th>FORMAT</th>
<th>AGE</th>
<th>WHO ADMINISTERS?</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scale of Independent Behavior-R (SIB-R) 1996 Riverside Publishing</td>
<td>Ages birth to 80</td>
<td>Special Educator</td>
<td></td>
<td>Assessment of adaptive behaviors related to communication, community/school use, functional academics, school/home living, health and safety, leisure, self-care, self-direction, social, and work.</td>
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<tr>
<td>Adaptive Behavior Assessment System – II (ABAS-II) 2003 The Psychological Corporation</td>
<td>Individual checklist</td>
<td>Ages birth to 89</td>
<td>Level B</td>
<td>Assessment of adaptive behaviors related to communication, functional academics, self-care, social skills, and occupational skills.</td>
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<tr>
<td>Adaptive Behavior Inventory (ABI) WPS</td>
<td>Individual</td>
<td>Ages 5-18</td>
<td>Teacher or other professional</td>
<td>Assessment of adaptive behaviors related to communication, functional academics, self-care, social skills, and occupational skills.</td>
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## Transition Assessments

<table>
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<th>NAME - AUTHOR - PUBLISHER</th>
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<th>AGE</th>
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<th>DESCRIPTION</th>
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</thead>
<tbody>
<tr>
<td>Enderle-Severson Transition Rating Scale- Revised (ESTR SCALE Revised) 2003</td>
<td>Individual</td>
<td>14 to 22 years of age</td>
<td>Special Educator or Vocational Teacher</td>
<td>Is an informal criterion-referenced assessment device used to provide the statement of transition needs. The categories reflect the traditional domains addressed in life skills curricula: recreation/leisure, vocational, community and domestic and the post-secondary element supported by PL 101-476. These elements are reflected in the subscales of the ESTR Scale: Jobs and Job Training, Recreation and Leisure, Home Living, Community Participation, and Post-Secondary Training and Learning Opportunities.</td>
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<td>ESTR Publications</td>
<td></td>
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<tr>
<td>ICAP (See Functional Assessments for description)</td>
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<tr>
<td>McGill Action Planning System (MAPS) Forest and Lusthaus, 1987</td>
<td>Individual</td>
<td>Adolescent and Adult</td>
<td>Special Ed Team</td>
<td>Is an affirming planning process that begins with a committed group of adults and peers coming together to think creatively about the future individual specific student. It is based on the assumption of inclusion in the community, individualization, central involvement of friends and family, collaboration and flexibility.</td>
</tr>
<tr>
<td>Pictorial Inventory of Careers 2nd Edition (PIC-2) Talent Assessment, Inc. P.O. Box 5087 Jacksonville, FL. 32247</td>
<td>Individual or group</td>
<td>14 years and up</td>
<td>Special Educator and Vocational Teacher</td>
<td>Assessment of interests related to 17 occupational clusters, and 11 categories of work environments, No reading skills required.</td>
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<tr>
<td>Reading-free Vocational Interest Inventory-2 Psychological Corporation 2004</td>
<td>Individual</td>
<td>13 years to adult</td>
<td>Special Educator and Vocational Teacher</td>
<td>Pictorial vocational interest inventory for students with learning disabilities and mild mental impairments. It identifies areas and patterns of interest to assist with occupational planning and job placement.</td>
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<tr>
<td>Transition Planning Inventory Updated Version (TPI- UV) 2006 PRO ED</td>
<td>Individual</td>
<td>Age 14 through 22</td>
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<td>Instrument for identifying and planning for the comprehensive transition needs of students</td>
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### Other Developmental Assessments

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<th>Name</th>
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<th>Age</th>
<th>Who Administers?</th>
<th>Description</th>
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<tr>
<td>Cayuga–Onondaga Assessment for Children with Handicaps (COACH)</td>
<td>National Clearing House of Rehabilitation Training Materials, Oklahoma State Univ.</td>
<td>Individual</td>
<td>3–21 years</td>
<td>Spec Ed Teacher</td>
<td>Assesses socialization, communication, recreation/leisure, self help, applied academics, and sensory skills across different environments.</td>
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<tr>
<td>Child Development Inventory</td>
<td>Behavior Science Systems</td>
<td>Minneapolis, MN. 55458</td>
<td>Individual</td>
<td>15 months to six years</td>
<td>ECSE Teachers</td>
<td>Provides a systematic way of obtaining in-depth developmental information from parents.</td>
</tr>
<tr>
<td>Developmental Profile II (DPII)</td>
<td>Western Psychological Service</td>
<td>Birth to 9-6 years</td>
<td>Spec Ed Teacher</td>
<td>186 items, assessing 5 key areas: physical, self-help, social, academic and communication. Provide age norms in each area.</td>
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APPENDIX B
SAMPLE GOALS AND OBJECTIVES
Disclaimer – These goals and objectives are broad so that they can be tailored to meet the needs of individual students.

These are sample goals from an unknown source. They may or may not meet the state standards for goal writing but could be used as starting points as you write IEPs.

Possible Goals and Objectives for ASD Students

1. **Nonverbal Communication**

Goal: The student will improve nonverbal forms of communication from a level of no understanding of nonverbal communication to a level of understanding and use of nonverbal communication.

Objectives:

1. After modeling and practice and using visual reminders, the student will use facial expression appropriate to the content of words spoken.
   During 9 of 10 opportunities over a three week period.
   As measured by staff during random observations.

2. After modeling and practice and using visual reminders, the student will demonstrate understanding of the facial expressions of others by responding appropriately in a given situation.
   During 4 of 5 opportunities over a three week period.
   As measured by staff during random observations.

3. After modeling and practice and using visual reminders, the student will demonstrate understanding of the emotion of others by responding appropriately in a given situation.
   During 4 of 5 opportunities over a three week period.
   As measured by staff during random observations.

4. After modeling and practice and using visual reminders, the student will recognize nonverbal cues and gestures.
   During 4 of 5 opportunities over a three week period.
   As measured by staff during random observations.

5. Using visual supports, the student will interact with peers at an age-appropriate level.
   During 4 of 5 opportunities over a two week period.
   As measured by staff during random observations.

6. After modeling and practice and using visual reminders, the student will recognize the spatial relationship between people or objects and self by standing an appropriate distance from others and demonstrating a sense of the size or weight of things.
   During 9 of 10 opportunities over a three week period.
   As measured by staff during random observations.

7. Using visual reminders and alternate choice, the student will refrain from making inappropriate noises.
   During 9 of 10 opportunities over a three week period.
   As measured by staff during random observations.
2. **Expressive Skills**

**Goal:** The student will improve his expressive skills from a level of not speaking clearly to a level of understanding sarcasm, using metaphors and responding appropriately when asked about his own internal state.

**Objectives:**

1. Using visual reminders and prompts, the student will speak clearly without mumbling. 100% of the time over a two week period.  
   As measured by staff during random observations.

2. After modeling and practice and using visual reminders and prompts, the student will speak with varied and appropriate tone and volume during a conversation. 80% of the time over a two week period.  
   As measured by staff during random observations.

3. After modeling and practice and using visual reminders, the student will take another person's perspective during a conversation or to describe a given situation. On 8 of 10 occasions over a three week period.  
   As measured by staff during random observations.

4. After modeling and practice and using visual reminders, the student will recognize another's interest in the topic of conversation by not rambling or developing an awareness of whether or not the other person is actively listening. On 4 of 5 occasions over a three week period.  
   As measured by staff during random observations.

5. After modeling and practice and using visual reminders, the student will demonstrate an understanding of sarcasm as noted by his facial expression or body language. On 4 of 5 occasions over a three week period.  
   As measured by staff during random observations.

6. After modeling and practice and using visual reminders, the student will demonstrate an understanding of metaphors by using them appropriately in conversation or writing. On 4 of 5 occasions over a three week period.  
   As measured by staff during random observations.

7. After modeling and practice and using visual reminders, the student will demonstrate an ability to let go of an argument, even if the other person does not agree. On 4 of 5 occasions over a two week period.  
   As measured by staff during random observations.

8. After modeling and practice and using visual cues, the student will demonstrate an understanding of his own internal state by responding to inquiries about self with more than "I don't know". On 4 of 5 occasions over a three week period.  
   As measured by staff during random observations.
3. **Conversational Skills – Topic Maintenance**

Goal: The student will improve his ability to choose and maintain topics in conversation from choosing a topic that interests only him to understanding his audience before choosing a topic of conversation.

Objectives:

1. After modeling and practice and using visual cues/prompts/reminders, the student will choose a conversational topic appropriate to the setting.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.

2. After modeling and practice and using visual cues/prompts/reminders, the student will introduce and discuss a conversational topic clearly.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.

3. After modeling and practice and using visual cues/prompts/reminders, the student will express relevant information and express it concisely when engaged in conversation.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.

4. After modeling and practice and using visual cues/prompts/reminders, the student will maintain a topic in conversation by making additional comments or asking questions.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.

5. After modeling and practice and using visual cues/prompts/reminders, the student will change topics appropriately when engaged in conversation.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.

6. After modeling and practice and using visual cues/prompts/reminders, the student will demonstrate an understanding of how to tailor conversation to the audience – e.g., peers versus teachers.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.
4. **Conversation Skills – Turn Taking**

Goal: The student will improve his ability in conversational turn taking from a level of monopolizing conversations to a level of demonstrating flexibility when there is a change in topic.

Objectives:

1. After modeling and practice and using visual cues, the student will take turns in a conversation with peers and adults (does not monopolize).
   On 9 of 10 occasions over a three week period.
   As measured by staff during random observations.

2. After modeling and practice and using visual cues, the student will attend to the listener's comprehension and attend to what he/she is saying by repeating rephrasing or clarifying as needed.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.

3. After modeling and practice and using visual reminders, the student will act appropriately when interrupting both peers and adults.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observation.

4. After modeling and practice and using visual reminders, the student will wait to be called on or acknowledged before speaking in class or a group.
   On 9 of 10 occasions over a two week period.
   As measured by staff during random observations.

5. After modeling and practice and using visual reminders, the student will appropriately ask a speaker to clarify comments made.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.

6. After modeling and practice and using visual cues, the student will demonstrate flexibility when there is a change in a conversational topic by staying calm and adjusting to the change.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.
5. **Speech Conventions**

Goal: The student will improve his ability to demonstrate adherence to speech conventions from a level of non-introduction to a level of initiating original conversation.

Objectives:

1. After modeling and practice and using visual reminders and cues, the student will introduce himself appropriately to others.  
   On 4 of 5 occasions over a two week period.  
   As measured by staff during random observations.

2. After modeling and practice and using visual cues, prompts and reminders, the student will use appropriate conversational pleasantries (greetings, apologies, responses to others) without adult assistance.  
   On 4 of 5 occasions over a two week period.  
   As measured by staff during random observations.

3. After modeling and practice and using visual cues, the student will make himself available for conversation (approachable) by displaying appropriate facial expressions and body language.  
   On 4 of 5 occasions over a two week period.  
   As measured by staff during random observations.

4. After modeling and practice and using visual cues, prompts and reminders, the student will talk “to” people and not “at” them.  
   On 4 of 5 occasions over a two week period.  
   As measured by staff during random observations.

5. After modeling and practice and using visual reminders, the student will ask for help when needed.  
   On 9 of 10 occasions over a three week period.  
   As measured by staff during random observations.

6. After modeling and practice and using visual cues, the student will initiate original (non-redundant) conversation with a peer or adult.  
   On 4 of 5 occasions over a two week period.  
   As measured by staff during random observations.
6. **Peer Skills**

Goal: The student will improve his peer skills from a level of no friendships to a level of maintaining appropriate friendships.

Objectives:
1. During recess and group activities, the student will establish and maintain appropriate friendships with and without visual reminders.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.

2. During recess, class, group and free time activities, the student will refrain from making fun of others with and without visual reminders.
   On 9 of 10 occasions over a two week period.
   As measured by staff during random observations.

3. During recess, class, group and free time activities, the student will welcome others to join the group or activity with and without visual reminders.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.

4. During activities with peers, the student will offer and accept criticism appropriately with and without visual reminders.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.

5. During activities with peers and/or adults, the student will accept compliments appropriately with and without visual reminders.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.

6. During activities with peers, the student will use appropriate slang with and without visual reminders.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.

7. During activities with peers, the student will demonstrate empathy with and without visual reminders.
   On 2 of 3 occasions over a two week period.
   As measured by staff during random observations.

8. During activities with peers, the student will act confident in same and opposite sex interactions with and without visual reminders.
   On 2 of 3 occasions over a two week period.
   As measured by staff during random observations.

9. During activities with peers, the student will respond to verbal conflicts appropriately as previously practiced with and without visual reminders.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.
10. During activities with peers, the student will compromise and negotiate appropriately as previously practiced with and without visual reminders. 
   On 4 of 5 occasions over a two week period. 
   As measured by staff during random observations.

11. During activities with peers, the student will demonstrate that he can let another "win" an argument with and without visual reminders. 
   On 4 of 5 occasions over a two week period. 
   As measured by staff during random observations.

12. During activities with peers, the student will listen to another person’s perspective without having to impose his own with and without visual reminders. 
   On 4 of 5 occasions over a two week period. 
   As measured by staff during random observations.
7. **Other**

Goal: The student will improve the ability to recognize and express emotions from a level of blame to a level of accepting rules.

Objectives:
1. Given a situation, the student will recognize and express his own emotions with and without visual reminders.
   On 9 of 10 occasions over a three week period.
   As measured by staff during random observations.

2. Given a situation, the student will accept responsibility and not blame others for his own issues of feelings with and without visual reminders.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.

3. Given a situation, the student will demonstrate remorse when appropriate with and without visual reminders.
   On 4 of 5 occasions over a two week period.
   As measured by staff during random observations.

4. Given a situation, the student will assertively deal with peer pressure with and without visual reminders.
   On 2 of 3 occasions over a two week period.
   As measured by staff during random observations.

5. Given a situation, the student will respect the hierarchy (including hidden agenda) of a school or other setting with and without visual reminders.
   On 2 of 3 occasions over a two week period.
   As measured by staff during random observations.

6. Given a situation, the student will care what others think of him/her with and without visual reminders.
   On 2 of 3 occasions over a two week period.
   As measured by staff during random observations.

7. Given a situation, the student will demonstrate an understanding of the purpose of rules, even when he/she doesn't agree with and without visual reminders.
   On 2 of 3 occasions over a two week period.
   As measured by staff during random observations.
APPENDIX C
SAMPLE DATA COLLECTION FORMS
## 10 MINUTES TIME SAMPLE

**Student’s Name:**

**Behavior Observed:**

<table>
<thead>
<tr>
<th>Date:</th>
<th>Date:</th>
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<tbody>
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<td>Time:</td>
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**Comments:**

**Comments:**

**Comments:**
GROUP DATA SHEET
Socialization Observation

Observation: Movement from one activity to another: Date:___________________

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<thead>
<tr>
<th>Name</th>
<th>Group Cues Delivered</th>
<th>Verbal Reminders To Other Children</th>
<th>Verbal Reminders To Target Student</th>
<th>Physical Prompt To Target Student</th>
<th>Comments</th>
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Free play observation 30 second intervals: Date:___________________

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### DATA SHEET

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<th>VP – Verbal Prompt</th>
<th>PP – Partial Prompt</th>
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<tr>
<td></td>
<td>I – Independent</td>
<td>R – Refusal</td>
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#### Dates:

| Objective: |           |           |           |           |           |
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| Objective: |           |           |           |           |           |
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