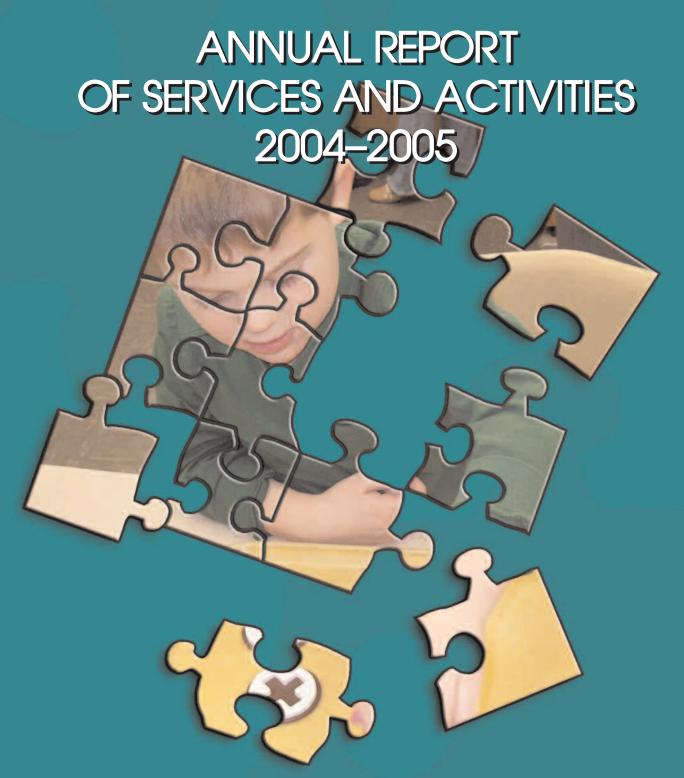
# KENTUCKY AUTISM TRAINING CENTER

College of Education and Human Development • Department of Teaching and Learning University of Louisville



The mission of the Kentucky Autism Training Center is to enhance supports for persons with autism by providing information and technical assistance to families and service providers across Kentucky.

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# HISTORY OF THE KENTUCKY AUTISM TRAINING CENTER



The idea of a Kentucky Autism Training Center (KATC) came when parents realized the need for an autism resource center in Kentucky. The parents began to research other centers around the country and spoke with State Representative Robert Heleringer at a legislative breakfast for the Kentucky Disabilities Coalition in January of 1996.

Rep. Heleringer was interested in the idea of an Autism Center in Kentucky and had the Legislative Research Commission examine similar bills adopted by other states. Information was given to Rep. Heleringer by parents. On January 9, 1996, Rep. Heleringer introduced a bill to the Health and Welfare Committee. Rep. Tom Burch, the Committee Chair, co-sponsored the bill.

In February 1996, the bill was passed by the House of Representatives and went to the Senate, where it was approved in April 1996. After the adoption of the bill, an advisory council was appointed that included parents, professionals in the field of autism, and other citizens of the Commonwealth. The Child Evaluation Center/Department of Pediatrics applied and was awarded the responsibilities of administering the autism center under Dr. Lonnie Sears, who served as interim director. In addition to the Child Evaluation Center/Department of Pediatrics, both the Bingham Child Guidance Center and the Department of Special Education were internal partners regarding the formation of the Kentucky Autism Training Center.

As part of the national search for a director, interviews involved people from multiple UofL departments, state agencies, and parent support groups. In August of 1997, Dr. John C. Burke, of Johns Hopkins University was hired to serve as the Director. During the initial year of operation, the Center had .70 FTE Trainers. Following the initial year, and with additional funding being made available, additional trainers and other staff have been added. Currently, as of June 2005, KATC has 3.4 FTE trainers, a senior leadership specialist, one program assistant, and a part-time UBM.

During 2002-2003, the Board elected a Chair and expanded on the KATC guidelines that currently include responsibilities for all members. These responsibilities include actively serving on sub-committees pertaining to specific areas of the Center's activities. To assist with the oversight of the working subcommittees, an executive committee was formed which includes the chairs of the subcommittees, the Chair and Vice-Chair of the KATC Advisory Board and the KATC Director.

In July of 2004, the College of Education and Human Development (CEHD) at the University of Louisville assumed the administrative responsibility of the Kentucky Autism Training Center. It is anticipated that the KATC under the CEHD will flourish through collaborative relationships and creative partnerships towards the mission of providing professional development, training and information dissemination to families and professionals across the Commonwealth.



# THE PURPOSE OF THE KATC

Based on a statewide needs assessment and collaboration of our advisory board, the KATC provides school-based consultations, family technical assistance, and training activities for promoting the early identification of autism in young children. The Center focuses on forming partnerships with other agencies to help in preparing direct service providers to work with individuals with autism. The Center places emphasis on providing information and training on intervention strategies that are supported by research as being effective with individuals with autism. In addition, the Center places emphasis on building performance-based program evaluation efforts at all levels of operation.

KATC staff members work with families and agencies to develop individualized treatment plans, including conducting individual centered training activities.

# Four basic assumptions guided the implementation of KATC's efforts:

- Approaching the Task in Phases. In providing services on statewide basis, KATC has sought to build local capacity by establishing a mulit-tiered training program to disseminate information and technical assistance training.
- 2. <u>Keep Stakeholders Involved.</u> Stakeholders should have an active role in designing, implementing and evaluation of these efforts. KATC has an Advisory Board comprised of parents, professionals and lay-members that provided needed input, along with other agencies.
- 3. <u>Initiatives Should be Coordinated.</u> Action strategies should be coordinated with other outside related initiatives, whenever possible. KATC works in conjunction with other individuals and organizations that are involved in similar activities.
- 4. <u>Strive to Benefit More Children</u>. Long-term success should benefit not only children with autism, but also all children with special needs and the entire school environment.

# KATC ADVISORY BOARD



The KATC has an Advisory Board that advises the Director in matters of policy, staffing, and operation. Board members are committed to the growth of the Kentucky Autism Training Center as it strives towards its mission to enhance supports for persons with autism by providing information, training and technical assistance to families and service providers across Kentucky. Board members are actively involved in the development of collaborative relationships. Members also provide input and expertise in the development, implementation and evaluation of services provided by the KATC. Unless restricted by their employment, members will assist the KATC to procure funding, in addition to state general funds, to accomplish its mission to provide information, training and technical assistance.

The composition of the board consists of parents (50%), professionals (40%) and lay members (10%) from across the Commonwealth, as outlined in KRS 164.9811(2). Members have further defined the outlined membership categories as follows:

Parents-Individuals that are parents of an individual with autism spectrum disorders.

Professionals-Individuals with professional experience and knowledge in regards to autism spectrum disorders.

University of Louisville partners:

- Department of Pediatrics, University of Louisville
- Bingham Child Guidance Center, University of Louisville
- College of Education and Human Development, University of Louisville Council on Postsecondary Education

Layperson-Individuals active in the community, not currently serving in a professional role.

# Below is a list of the current members of the Kentucky Autism Training Center Advisory Board:

Marie Allison Rita Brockmeyer	Parent Parent, Vice-chair of KATC Advisory Board	Carol Estes	Professional-Vocational Rehabilitation/Support- ed Employment
Cheryl Dunn	Parent	Joseph Hersh	Professional-University of
Hazel Forsythe	Parent		Louisville, Department of
Barbara Lewis	Parent		Pediatrics
Nat McKay	Parent, Chairperson of	Peter Tanguay	Professional-University of
	KATC Advisory Board		Louisville, Department of
Laurie Spezzano	Parent		Psychiatry
Melanie Tyner-Wilson	Parent	Linda Linville	Professional-Council on
Ann Bolly	Professional-First Steps		Postsecondary Education
Trisha Bronger	Professional-Department	Tom Simmons	Professional-University of
	of Education		Louisville, Department of
Sue Daniel	Professional-Carriage		Teaching and Learning
	House Consultants	Jon McGee	Layperson
		Thomas Pinkstaff	Lavperson



During the eighth year of operation, the Kentucky Autism Training Center (KATC) has continued to follow its legislative mandate by providing intensive school-based team training and technical assistance to local teams of professionals and parents, implementing family based technical assistance, and offering state-wide introductory and advanced training activities covering autism awareness through the development of specialized intervention programs. The Center has placed emphasis on providing information and training on intervention strategies that are supported by research as being effective with individuals with autism spectrum disorders. A brief summary of major KATC activities July 2004 through June 2005 is provided below. A more detailed account of services is further outlined in this report.

<u>Family Services.</u> KATC has provided training and technical assistance to families across the Commonwealth by continuing to offer opportunities for families to individually meet with KATC professionals to have general questions addressed. During this past year, KATC met with 30 families.

In addition, KATC delivered a "Family Workshop Series" involving more in-depth full day training sessions in Ashland and Owensboro with a total attendance of approximately one hundred individuals at the ten sessions. During the series of five sessions, participants received information from teams of parents and professionals who offered practical strategies and "informal" advice from a parent's perspective. To address regional needs this year, the KATC presented at 14 family support group meetings. Lastly, this past year, KATC Field Training Coordinators have piloted the use of the Family-Focused Behavior Supports Model (FFPBS) with two teams in Kentucky.

School-Based Team Consultations and Technical Assistance Sessions. KATC has modified the process in which these are conducted in order to increase our effectiveness for promoting systemic change. In general, the current process involves a KATC trainer working with a team of professionals and parents to help them reach consensus on target areas of need and for them as a team to develop and implement a training agenda which is individually developed for each team. During this past year, our trainers have worked with 34 teams each consisting of educational personnel such as special and regular educators, related service providers such as speech/language and occupational therapists, teaching assistants, psychologists, as well as parents.

Information Dissemination and Training. Specific activities have included addressing over one thousand requests for information through our Amanda L. King Resource Library. In addition, the KATC has presented at 28 events and professional development sessions across our Commonwealth. From an advanced training perspective, The KATC has worked in conjunction with the University of Louisville Department Of Teaching and Learning to develop and implement a Distance Education Masters Program in Special Education with a concentration in Autism, Technology, and Collaboration. Courses were videostreamed on the World Wide Web. Courses in this program include:



Introduction to Autism, Strategies and Techniques, Autism, Assistive Technology & Collaboration, Single Subject Research Design Methods, and Applied Behavior Analysis.

## Associated Activities

<u>Development of Policy and Practices through Collaboration.</u> During the past year, KATC staff members have continued to expand our collaborative efforts with local and state public and private agencies as well as offering consultation to state leaders as they strive to meet the growing needs seen in the area of autism. For example, KATC participated in the Autism Spectrum Disorder's Advisory Consortium (ASDAC). The ASDAC Consortium was an initiative from the State Inter-Agency Council for Children's Mental Health Services. Through such meetings and advisory sessions, KATC has assisted the Commonwealth of Kentucky in developing effective policy for promoting local, regional and statewide systemic change.

Services for Adolescents and Adults with Autism. The Kentucky Autism Training Center continues to support the efforts of agencies and families to promote employment, independent living and age appropriate functioning for adolescents and adults with autism. Toward these goals the center hired a full-time staff member in December of 2002 whose areas of expertise include school-to-work transition, adolescent and adult issues of disability, vocational and secondary school training, supported employment and independent living. While the KATC does not have a direct funding source to provide adult services, every effort is made to develop collaborative relationships with organizations that provide services to adults. The following summary outlines activities during this past year that addressed the needs of adolescents and adults with autism and their families.

During this past year KATC staff members have delivered nine family consultations to specifically address adolescent and adult issues. With regards to school-based team consultations and technical assistance KATC staff worked with nine local educational teams; these teams received technical assistance focused on adolescent and adult issues. Specifically the teams received training pertained to; social inclusion in middle/high school, issues of puberty and sexuality, pre-vocational and vocational curriculum development, functional and independent living skill development and management of severe behavioral issues in older students.

The KATC has partnered with the Interdisciplinary Human Development Institute (IHDI) at University of Kentucky to provide an autism component for the training of job coaches and vocational professionals. To date a total of two trainings have been performed with IHDI with an ongoing commitment to the training of these professionals.

In addition, the KATC presented specifically on the unique needs of young adults to the Bowling Green business community and Grayson County Schools.



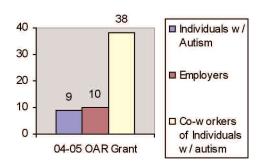
# Community Employment

The Kentucky Autism Training Center strives toward national leadership with regard to support of community based employment for persons with autism spectrum disorders (ASD). In particular, the KATC seeks to address disparities between the valuable human capital that individuals with ASD present but that their impaired social skills often prevent them from realizing in the workplace. Based upon a review of the research literature, it appears that the inherent deficits that are a hallmark of autism and Asperger's diagnosis may result in difficulties integrating into the workplace and subsequent unemployment and underemployment. Through collaboration and consultation with community and supported employment organizations the KATC endeavors to facilitate the inclusion of social skills training into job placement models for individuals with ASD that may prove an efficacious means of integrating these individuals into the workplace.

Toward the goals of including individuals with autism in paid, community-based employment, the KATC pursued and was subsequently awarded additional funding from the Organization for Autism Research following a national research competition. These funds were used to study opportunities for individuals with autism to become socially integrated into the workplace by providing brief training to employers and coworkers of individuals with autism related to the specifics of autism as a diagnosis. The goal of the study was to determine if data reflected an increase in the subject's scores on attitude and interaction scales from baseline measurement. Thirty-eight coworkers of individuals with autism participated in this study, representing ten Kentucky employers who hired persons with autism. The Kentucky Autism Training Center provided training to these employers as a means of increasing awareness and understanding of coworkers toward employees with autism. Though the statistical results of this study are forthcoming, it is clear that numerous employers and workers in the commonwealth have directly benefited from the opportunity to gain a better understanding of their employees and coworkers with autism. Many more individuals in Kentucky and across the nation may benefit from the information gained from this research.

The Organization for Autism Research has requested a second research proposal for a two-year funded study of the efficacy of outpatient, work-based social skills counseling groups on the social integration of individuals with ASD in the workplace. This continued empirical research will serve to not only help individuals with autism in the commonwealth to become better integrated into their places of work, but will serve individuals across the nation through dissemination of this research through scholarly journals, presentations and online information sharing. Figure 1 is a presentation of Kentuckians directly impacted by activities associated with the Organization for Autism.

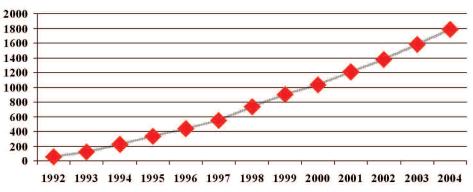
Figure 1: Kentuckians Directly Impacted by OAR Grant



## INCIDENCE OF INDIVIDUALS WITH AUTISM

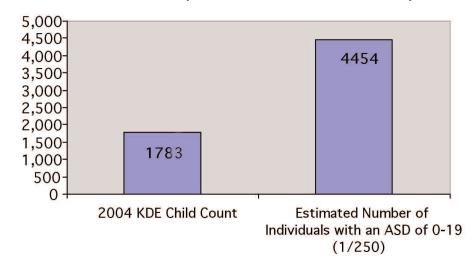
In December of each year, the Kentucky Department of Education (KDE) counts the number of children under each diagnostic category. In 1997 when KATC began, there were approximately 562 children and youth identified in Kentucky as having autism. In the last KDE December count 1,783 (2004), the number increased to approximately 1,566 children and youth as shown in Figure 2. Based on information obtained from professionals and parents, it became apparent that emphasis needed to be placed on assisting health care providers in identifying children with autism at a younger age. While autism can be diagnosed during the first 18 to 24 months of life, the average age of a child diagnosed with autism is approximately five and half years of age in Kentucky. In terms of how Kentucky figures compare to established incidence rates, there continues to be a discrepancy, using incidence rate of 1/250 there are an estimated 4,454 individuals with an autism spectrum disorder under the age of nineteen in the Commonwealth. (See Figure 3).

# Kentucky Department of Education Child Count of Students with Autism 1992-2004



Source: Kentucky Department of Education Homepage

# Estimated number of individuals (ages 0-19) with an Autism Spectrum Disorder in Kentucky



Incidence rate range acknowledged by the Autism Society of America



# 2004-2005 SERVICES AND ACTIVITIES

During the past year of operation, the Kentucky Autism Training Center has continued to provide, in collaboration other agencies and parent organizations, individual workshops and school-based consultations for the goal of providing technical assistance to public school personnel and health care providers. The KATC brings knowledge in effective teaching strategies to teachers, administrators, and parents, and have continued to build long-term relationships to build local capacity to develop a plan for furthering their Local Educational Agencies' (LEA) efforts in establishing them as the leaders in educating students with autism. In a similar manner, the KATC has begun to develop relationships with mental health and other service providers.

# Family-Based Technical Assistance

KATC staff members have provided Family Based Technical Assistance to families of children, youth, and adults with autism. As part of all KATC activities, emphasis is placed on preparing parents to become active members of their children's local educational and planning teams. Parents can directly access and utilize KATC through the following services:

# Individual Family Support Sessions

KATC staff members have provided parents, along with other family members and key individuals, opportunities to meet with a KATC staff member to receive information, and to address general questions and concerns in a confidential manner. Currently, the KATC does not charge families for this service.

During this past year, KATC staff members have conducted 35 individual family support sessions in the following counties:

Barren County
Bullitt County
Campbell County
Fayette County
Franklin County

Hart County
Henry County
Jefferson County
Madison County
Meade County
Nelson County

Oldham County Pike County Spencer County Warren County Washington County

# Kentucky Autism Services and Supports Directory

To assist families across the Commonwealth of Kentucky, the Kentucky Autism Training Center in collaboration with public and private agencies, organizations, and support groups has initiated the development of a service directory of agencies or providers who serve individuals with autism. This directory was disseminated to attendees of the KATC's conference in June of 2005, sent to autism spectrum disorders related support groups, available on the KATC's website and sent upon request. Printing of the first edition of this document was funded in part by Opportunities for Family Leadership with the Department of Mental Health and Mental Retardation.

#### "1-800 Number"

KATC may be accessed toll free by calling 1-800-334-8635 and requesting extension 852-4631. Parents have used this line to contact the KATC staff and to ask general questions or to procure information. The use of this number has assisted KATC to ensure that all parents within Kentucky have equal access to our services.

# Family Workshop Series

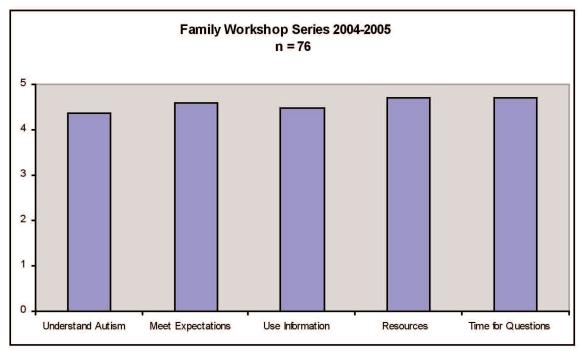
The goal of the KATC's Family Workshop Series was to provide families with practical strategies that can enhance their child's participation in family life and community activities. During this past year, families and professionals that participated in this workshop series delivered in both Owensboro and Ashland monthly sessions were conducted May 2004 through October 2004. Participants received information on the following topics: screening & diagnosis of autism spectrum disorders, advocacy & educational rights, dietary issues, social skills, toileting, and communication.

The content of these workshops were designed to build upon one another. Parents of children with autism spectrum disorders and professionals presented information by sharing strategies and techniques that have worked within their homes and communities. Attendees of the Family Workshop Series resided in the following counties in Kentucky:

Boyd County
Christian County
Daviess County
Greenup County

Hancock County Henderson County McCracken County Muhelenburg County Rowan County Union County Webster County

Please find in Figure 4, evaluation data that was collected at the end of each session in, of approximately 100 attendees, 76 evaluations were collected. The evaluations are comprised of 5 Likert scale questions, as well as several open-ended questions. Sample questions are as follows: How will the information you gained at the presentation impact your work with individuals who have autism? What are some issues in autism you would like to see addressed in future presentations, workshop? What did you find most helpful about the presentation?



Overall, 98% of participants indicated the presented information as helpful regarding their work with individuals with ASD.



# During this past year at the request of support groups across the Commonwealth, KATC staff delivered 14 workshops to the following groups:

Autism Society of Kentuckiana
Barren River Autism Support Group
Carriage House Preschool
Franklin County Parent Resource Center
Hardin County Parent Workshop

Sensory Learning Disorder Support Group Deaf & Disabilities Ministry Community Fair at Southeast Christian Church Powell County Area Support Group

# Addressing regional needs, the topics addressed included:

Behavior
Daytime Toilet Training for Children with
Autism and Other PDD's
Setting up a "Lunch Bunch" — Elementary
through High School
Sibling Panel

Social Skills
Social Stories and Social Skills
Structuring Social Opportunities Across
Settings - Elementary through High School
Transition for Elementary Aged Students
Visual Supports in the Home

# Family Focus Positive Behavior Support

The Kentucky Autism Training Center (KATC) traveled to Marshall University for training in Family Focus Positive Behavior Supports (FFPBS). As a part of the training, KATC agreed to follow the FFPBS model with two individuals. Two teams were identified, one in central Kentucky and one in eastern Kentucky. As a part of the initial process, each target student was observed and baseline data were gathered.

Each family met with the trainers and completed a Family Frames. The Family Frames is a process in which the family identifies family history, circle of support, family schedule, family health issues, family choices/child-centered choices, adaptive and challenging behaviors (both positive and negative), fears and concerns, family stressors, stress related strategies that work and do not work as well as themes throughout the Frames. It utilizes group graphics such as chart paper or overheads to enable groups to gather information about persons in his/her family and planning for a more positive future. Person-centered planning shares an explicit or implied commitment to seeking five essential goals, outcomes, or valued accomplishments in the individual's life. The five goals are: being present and participating in community life, gaining and satisfying relationships, expressing and making choices, having opportunities to fulfill respected roles and to live with dignity and continuing to develop personal competencies.

The next step is Planning Alternative Tomorrows with Hope (PATH). In this step, the family invites everyone with a vested interest in the focus-person's future: educators, therapists, family and extended family members, psychologists, school administrators, community service providers, employers, etc. This process takes 2.5-3 hours and begins with the Dream of the individual. The team discusses where the individual is now, what team members need to be enrolled and then the team moves backwards from the dream to the present. Based



upon where the individual is currently and where his/her dream is, what steps need to occur in 6 months, 3 months, 1 month as well as first steps in the process.

The PATH is followed by four lectures and monthly team meetings with follow-up for 3-9 months. Lecture topics include: Gathering Information-functional assessment, developing a hypothesis, building a support plan-data based decision making and pulling it together.

## Team 1

# Eastern Kentucky

This team consisted of the teacher, 2 teacher assistants, mother and grandmother. Training occurred on four half day sessions during the school year, with team meetings after each training session. Goals addressed through FFPBS, included: Community Access, Toilet Training, Dressing and Independence. Additional training was provided during a regional toileting workshop. Supports created include additional visual supports for promoting independence.

According to teacher report, the individual is now completely toilet trained during school hours, verbal skills are increasing and specific behavior problems have decreased.

The PATH generated by this team is available in the appendix of this document.

## Team 2

# Central Kentucky

This team consisted of several educators, family members as well as occupational and speech therapists. After completing the Family Frames and the PATH with the team in central Kentucky, the lectures were scheduled through the local board of education and opened to others in the area who wished to gain more information on autism. The lectures were held in a central location, and more than 40 people attended the 2 day workshop. Follow-up was provided throughout the school year with regular meetings. Supports added included a visual monitoring system, a peer buddy, and modified work.

## Additional Use of FFPBS Model

Staff members at KATC use the FFPBS model to assist with family support sessions and many of the components are also used in the school-based consultation. After using the PATH with school based teams, one teacher stated, "Using the PATH has given me a better idea of what I should do with the student based on where they would like to be."



# SCHOOL-BASED TEAM CONSULTATIONS AND TECHNICAL ASSISTANCE

Staff members of the Kentucky Autism Training Center work directly with teams of professionals and parents to facilitate the development, implementation, and evaluation of educational and community-based programs for children and youth with autism. KATC staff deliver individual training sessions to fit the needs of each team, training formats include: workshops, make & take sessions, individualized instruction, direct demonstration and web based instruction. As team members, the KATC encourages families to participate in all training activities.

# KATC staff members provided technical assistance in the following areas:

Staff members at KATC use the FFPBS model to assist with family support sessions and many of the components are also used in the school-based consultation. After using the PATH with school based teams, one teacher stated, "Using the PATH has given me a better idea of what I should do with the student based on where they would like to be."

# Identifying and understanding students with autism

- Screening information for early childhood professionals
- Diagnostic tools
- Awareness sessions for school personnel (bus drivers, cafeteria workers, and custodians)
- Peer awareness and training

#### Communication

- Natural Language Boards: Targeting Receptive& Expressive Communication
- Visual-Based Communication Systems
- Visual Supports in the Home
- Developing Natural Language Boards to Promote Communication
- Using Interactive Language Boards to Extend Communication Exchanges and to Promote Receptive and Expressive Language Skills in Children with Autism Spectrum Disorders
- Promoting Receptive and Expressive Language:
   Using Single and Multi-Pictured Based Supports
- Using Visual Strategies to Support Children with Autism
- Examining Picture Based Communication Systems for Students with Autism

#### **Behavior**

- The ABC's of Behavior
- ABA and Behavioral Interventions
- Introduction to Applied Behavioral Analysis
- Conducting Functional Behavioral Analysis
- Addressing Challenging Behaviors
- Positive Behavioral Supports
- Decreasing Behavior Problems: Practical Guidelines for Educators and Parents
- Developing and Implementing Appropriate Behavior Plans
- Developing and Evaluating Effective Behavior Support Plans
- Data Collection Made Easy
- Data Based Decision Making: Evaluation Change

#### Social

- Social Stories, Social Skills
- Structuring Social Opportunities across Settings -Elementary through High
- Setting up a "Lunch Bunch" Elementary through High
- Social Skills across a Lifespan

#### Vocational/Self Help

- Daytime Toilet Training for Children with Autism and Other PDD's
- Supported Employment
- Promoting Independence using Self-Monitoring
- Autism and Employment Issues
- Working with Individuals with Autism Spectrum Disorders
- Person Centered Planning
- Working Together: Autism Awareness on the Job
- Using a Collaborative Volunteer Model to Promote Inclusion in Community Recreational Activities

#### Adolescent/Adult

- Autism In Young Adults
- Adolescent Behavior & Concerns
- Adolescent Issues: Realistic Expectations
- Sexuality

## **Educational and Skill Development**

- Autism Evaluation for Eligibility, Instructional Planning and Continuing Assessment
- Comprehensive Autism Planning System (CAPS):
   A Process Approach to Planning and Implementing Instruction for Individuals with ASD's
- Strategies for Including Students with Autism Spectrum Disorders into the Regular Education Classroom
- Transition for Elementary Aged Students
- Teaching Strategies for Parents and Teachers across Settings
- Strategies and Techniques for Working with Individuals with Autism

- Incorporating Individualized Structure to Promote Successful Classroom Transitions
- Initial Steps in Developing a Comprehensive Student Program: Schedules, Objectives & Targeting Independence and Involvement as Pivotal Behaviors
- Structuring the Classroom for Success and Independence
- Simple Strategies for Pre-school and Childcare Professionals
- Communication & Play for Pre-school and Childcare Professionals
- Working with Students with High-Functioning Autism in the Regular Education Classroom
- Using Technology to Enhance Learning
- Creating an Environment to Promote Learning
- Motivation and Autism
- Conducting Informal Assessments to Develop Data Based Programs

# Aspergers Syndrome

- Understanding Aspergers Syndrome
- Overview of Aspergers, Behavior and Teaching Strategies for Children with Aspergers
- Asperger's Syndrome: Program Planning and Interventions
- An Autism and Asperger's Overview: Characteristics, Behaviors and Overview of Treatment Options

#### **Autism Awareness**

- Overview of Autism Characteristics and Therapy options
- What is Autism? Communication and Social Supports
- Overview of Autism: Resources for Families and Professionals
- Autism: An overview of Characteristics, Behavior and Inclusion
- Understanding the Behaviors of Autism
- Overview and Characteristics of Autism in Preschool and Elementary School Students
- Early Identification of Autism and Subsequent Resources for Physicians
- Early Identification of Children with Autism Spectrum Disorders
- Understanding and Approaching Children with Autism
- Understanding Autism for Pre-school and Child Care Professionals
- Understanding Autism for Law Enforcement and other First Responders
- Autism Awareness for the Secondary School Counselor
- An Autism and Asperger's Overview: Characteristics, Behaviors and Overview of Treatment Options
- Promoting the Early Identification of Autism

# Understanding Sensory Issues and Building Sensory Supports

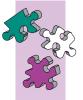
# Teaming between professionals and parents.

During this past years KATC staff conducted approximately 116 school based consultations and technical assistance activities in the following local educational agencies:

Anchorage Independent Franklin County Pike County Bardstown Independent Hardin County Pikeville Independent Bell County Henry County Pulaski County Breckenridge County Jefferson County Russell County **Boone County** Taylor County Laurel County Bowling Green Independent Meade County Warren County **Nelson County** 

Quarterly evaluations are sent out to the team leader at the school as well as the parents/guardians of each educational team. We ask that they be filled out and mailed back to the KATC. The respondents are not required to give their names. During the 2003-2004 school year the evaluations forms were adapted to gain additional information in regards to the technical assistance and training. We are striving to constantly evolve and improve upon the school consultation model and are eager to incorporate suggestions from team members (including parents in the evolution of our school-based services.

Specific questions were asked in regards to priority training areas delineated by the team. A sample question could be "to what degree did the consultation prepares you to implement the social skills strategies?" or "to what degree did the implementation of the new strategies impact the students acquisition of social skills?" Data from the 2004-2005 school year is represented in Figure 5.





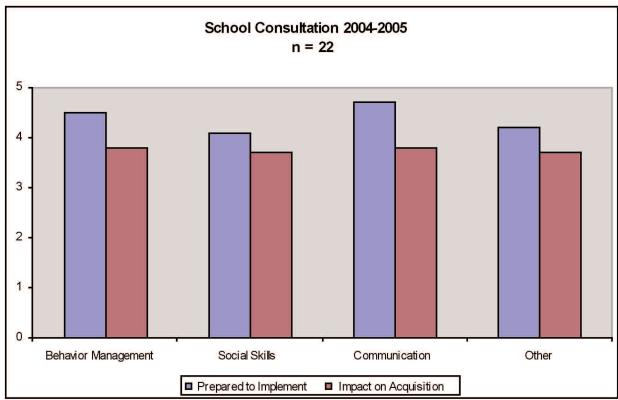
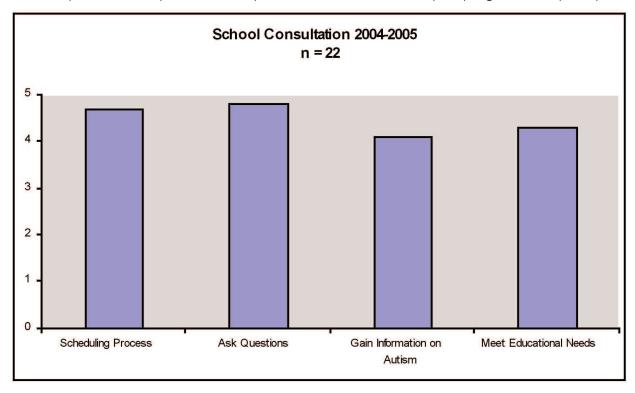


Figure 6 presents participant feedback from team members that participated in School-Based Team Training and Technical Assistance Activities. Team members include: educators, administrators, related services providers and family members. Utilizing a five point scale, participants were asked to provide feedback regarding training activity, with "5" representing highest satisfaction and "1" indicated participant's complete dissatisfaction with the activity. During the 2004-2005 school year the most frequent areas of training and technical assistance were behavior management, social skills and communication. Other areas include training pertaining to vocational skills, strategies to increase time on task, independent activity transitions, acquisition of academic skills and prompting classroom participation.



73% felt that they understood the student better after the school consultation process.



During the 2004-2005 school year, sixty-two evaluations were mailed to team members, of these 22 evaluations were completed and returned to the KATC; the return rate for this specific evaluation was 35%.

At the end of the 2004-2005 school year 34 students were receiving school consultation services from thirteen different districts across Kentucky. There were 5 students on a waiting list to receive services.

Please refer to the school consultation case study in the appendix of this document.

# Comprehensive Autism Planning System

During this past year, the Kentucky Autism Training Center has worked closely with the Complex Needs Consultants within four Special Educational Cooperatives to demonstrate an approach that assists local teams in planning and implementing educational programs for students with ASD. The goal is to foster long-range systemic change in the development of educational planning for students with autism. This approach is highly consistent with Kentucky Department of Education Professional Development Standards and strives to build local capacity.

Developed by the KATC, the Comprehensive Autism Planning System (CAPS) provides teams with a framework for developing a comprehensive program for individuals with autism spectrum disorder (ASD). The areas covered in this process approach are: short-term individual goals, specially designed instruction, data collection, instructional materials, social skills, sensory supports and generalization of goals. The CAPS will outline the essential components and describe the active participation required by all team members in developing a complete program for individuals with autism through systematic and thorough planning.

The Comprehensive Autism Planning System (CAPS) process is designed to be used with an educational team which may consist of parents, general educators, special educators, paraprofessionals, speech language pathologists, occupational therapists, physical therapists, administrators, psychologists, consultants, siblings, and others who are stakeholders in the individual's education.

# Objectives:

- Individualized team process planning
- Consistency of programming across time and setting
- Share information with all interested parties
- Putting what works together in a systematic and flexible manner
- Organization of program with many methodologies
- Builds on what already exists in the individual's program
- Promoting Inclusion Opportunities
- Integration of Core Curriculum
- Facilitates targeted professional development
- Facilitates transition at the end of school year



Figure 7 is an example of the CAPS grid.

# Comprehensive Autism Planning System (CAPS)

Time	Activity	Targeted skill short-term objective	Specially Designed Instruction	Data collection	Instructional Materials	Social Skills/ Communication	Sensory Strategies	Generalization Plan

Please refer to the appendix for a case study of the implementation of the Comprehensive Autism Planning System.

# STATEWIDE INFORMATION DISSEMINATION AND TRAINING



KATC staff members worked to establish statewide supports and training activities for professionals and parents involved in promoting gains for individuals with autism by offering the following resources and services:

# Amanda L. King Resource Library

KATC assumed a lead role in Kentucky as a resource of print, electronic, and video covering the life span of individuals with autism. In addition, the Amanda L. King Resource Library has become a preview site for several major software companies. During this past year, the KATC addressed approximately 1,000 requests for information from parents and professionals across Kentucky. Patrons of the Amanda L. King Resource Library may access print material through mailed requests. Families and professionals contact the KATC in order to obtain information regarding the availability of services, information on "best practices", support groups, up-coming training activities and vendors.

#### Newsletter

The KATC disseminates a newsletter electronically to thousands of families and professionals. In the Commonwealth, the KATC newsletter is sent to the KATC Listserv, family organizations, Autism Spectrum Disorders Advisory Consortium, Educators & Education Organizations, Early Childhood Professionals, Professional Organizations, Family Resources & Youth Services Centers, mental health professionals and supported employment providers across the Commonwealth. The newsletter contains information regarding the services of KATC, activities of autism related support groups, strategies and information regarding other organizations serving individuals with autism spectrum disorders and their families across the Commonwealth. Over this past year, efforts were made to focus each edition on a specific topic, such as art and health. Individuals and organizations are welcome to request a print version of the newsletter.

#### Web-Site

The KATC web site is located at <u>www.kyautism.com</u>. During this past year, the KATC web-site has been updated to include additional resources specific to Kentucky and other autism related information.

## A.W.I.N.

During this past year, the KATC along with the Kentucky Department of Education implemented the Autism Web-Based Interactive Network (AWIN). AWIN consists of multimedia modules on a diverse range of topics with a goal of providing information and training for professionals and parents. These modules contain information based on the literature and often use multi-media examples showing the application of a strategy. Along with many modules are online assessments as well as suggested applications for the participants to do with their local team and supervisor.

To help develop the modules, KATC worked in conjunction with the KDE Regional Complex Needs Consultants (CNC) and the Directors of the Special Education Cooperatives. Through a series of meetings, an organizational chart



of proposed modules was constructed that includes modules at the introductory level for the new teacher (Tier 1), the intermediate level (Tier 2), and at the more advance level for trainers of trainers (Tier 3). The content of the modules at each Tier was decided upon based on input from the CNCs, teachers and others in the field, as well as parents of students with ASD. As the development of these modules continue, it is expected that more units will be developed at each level across many content areas including: instruction and academics, social and communication skill development, inclusion, play and recreational skills, behavioral issues, sensory characteristics, family and collaboration, home issues, and transition and employment.

Aside from developing the AWIN modules, a collaborative relationship has been initiated with the University of Kansas and Dr. Brenda Smith Myles. Through a project supported by a U.S. Department of Education Grant H324M000047, Dr. Myles has built the Interactive Collaborative Autism Network (ICAN) which consists of over 50 (primarily text based) units on a wide range of topics. The goal is for us to utilize the text unit and jointly construct new multimedia modules. In addition, it is our goal to combine our two sites (AWIN and ICAN) to form a new site known as Autism Internet Modules (AIM) which will eventually offer modules in multiple languages.

# Professional Development Sessions and Events

KATC staff members have presented parents and professionals information on autism spectrum disorders and effective strategies at 26 local, regional, and state conferences to approximately 1,200 individuals at the following organizations:

Boone County Schools
Bluegrass Residential and Support Services
Brodhead Elementary - Rockcastle County

Calloway County - Regional Training Center
Exceptional Children's Conference
EKU Student Workshop on Autism
Frazier Rehab Institute
Friends School, Inc.
Grayson County Middle School
Interdisciplinary Human Development Institute
Jefferson County Schools Head Start
Kelly Autism Program

Kentucky Department of Education Parent
Professional Conference
Kentucky Head Start Association
McCracken County Schools
National Council on Exceptional Children
Conference
Northkey Community Care
State Interagency Council for Children's
Mental Health Service SIAC Choices and
Changes Conference
Vocational Rehabilitation
Washington Counity Elementary
Wilderness Trail Special Education Cooperative

# **Topics**

Adolescent Behavior & Concerns

Autism Awareness

Supports.

Autism In Young Adults

Autism in Young Children & Therapeutic Approaches

Awareness Talk to 4th graders and staff Behavior

Creating an Environment to Promote Learning for Young Children with Autism:

Developing Behavior, Sensory and Visual

Autism Evaluation for Eligibility, Instructional Planning and Continuing Assessment

Comprehensive Autism Planning System (CAPS): A Process Approach to Planning and Implementing Instruction for Individuals with ASD's

Daytime Toilet Training for Children with Autism and Other PDD's

Developing Natural Language Beards to Promote Communication

Motivation/Behavior & Social Skills

Natural Language Boards: Targeting Receptive& Expressive Communication

Overview of Autism Characteristics and Therapy Options

PECS "like" Communication Systems

Strategies for Including Students with Autism Spectrum Disorders into the Regular Education Classroom:

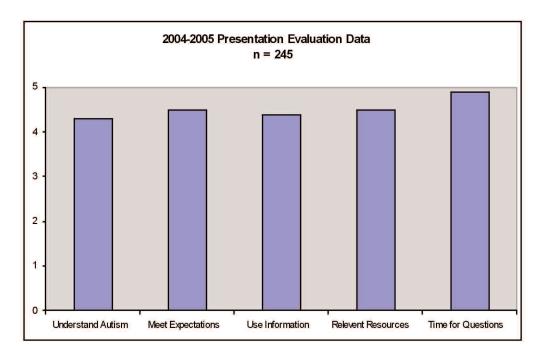
Supported Employment

Toilet Training Children with ASD's

Understanding Students with Asperger's Syndrome: Visual Supports

What is Autism? Communication and Social Supports

Figure 8 represents feedback from workshop participants regarding material presented. Utilizing a five point scale, participants were asked to provide feedback regarding training activity, with "5" representing highest satisfaction and "1" indicated participants complete dissatisfaction with the activity.



# **AUTISM INSTITUTE 2004**

The Kentucky Autism Training Center hosted its 5th annual Autism Institute in the form of three regional sessions in Louisville, Lexington and Covington. The first session, Aspergers' Diagnosis Through Intervention, took place June 28-June 30 at the Galt House Hotel in Louisville. The KATC hosted a panel of Professional and Family Members and also Dr. Peter Tanguay on Day One. Day 2 and Day 3 brought Dr. Brenda Smith Myles and Steven Shore to discuss Asperger's Syndrome across the Lifespan: Practical Strategies for Parents and Professional Approximately 266 participants attended these sessions from 36 counties across Kentucky and 30 organizations from Kentucky and surrounding states.

In July, of 2004 the next two sessions welcomed Linda Burkhart as she presented to 271 participants at Tate's Creek High School in Lexington and 177 participants at the Northern Kentucky Convention Center in Covington. The session in Covington was co-sponsored by the Ohio Department of Education.

During the presentation, the focus was on practical strategies for motivating and communication with young children with autism spectrum disorders. After Ms. Burkhart's one and a half day presentation at each location, she led a post-conference make-and-take session for 90 participants and provided an opportunity for guided practice in building communication and social supports.

At the Lexington site, attendees at the session represented 63 counties and 20 organizations across Kentucky and at the Covington site, attendees represented 20 counties and 14 organizations across Kentucky. In addition, 16 counties and 22 organizations in Ohio were represented at the Covington session.

Below is a breakdown organizations and school districts that were represented at the Lexington site:

# Organization

The Adanta Group
Big Sandy Area Headstart
Bluegrass First Steps District
Bright Pathways, LLC
Caritas Peace Center
Central Baptist Hospital
Cerebral Palsy Kids Center
Community Early Childhood Council
Comprend Inc.
Eastern Kentucky University
Ephraim McDowell Regional Medical Center

Expressive Arts Therapy Center
First Steps
Home of the Innocents
Kentucky School for the Blind
Kentucky Valley Educational COOP
Lifeskills
Pediatric Occupational Therapy
Seven Counties Services
Swigert & Associates
Western Baptist Hospital
University of Kentucky



Allen County Anderson County Ashland Independent

Barren County

Bowling Green Independent

Boyd County **Boyle County Bourbon County** 

Bowling Green Independent

Breckinridge County

**Bullitt County** Boyle County Calloway County Carter County Christian County Clay County **Daviess County** 

East Bernstadt Independent

Estill County Fayette County Franklin County

**Grant County** Greater Clark County, IN

Green County Hardin County Harlan County Harrison County Hart County Henry County

Hopkins County Jefferson County Jessamine County Johnson County Kenton County

Knott County LaRue County Laurel County Letcher County

Lewis County Mason County Mercer County

Middlesboro Independent

McCracken County Muhlenburg County Nicholas County

Paducah Independent

Perry County Pike County Powell County

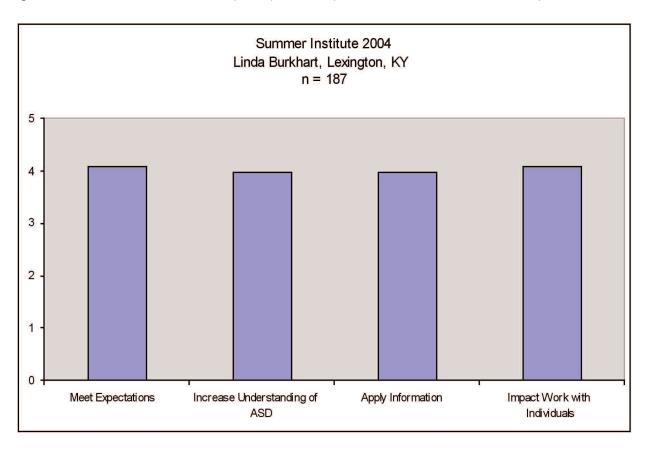
Raceland Worthington

Independent Rockcastle County Rowan County Scott County Spencer County Taylor County Washington County Washington County Warren County

Wayne County Williamstown Independent

**Woodford County** 

Figure 9 represents feedback from workshop participants regarding material presented. Utilizing a five point scale, participants were asked to provide feedback regarding training activity, with "5" representing highest satisfaction and "1" indicated participants complete dissatisfaction with the activity.





Below is a breakdown of organizations and school districts that were represented at the Covington site:

# Organization

Autism Spectrum Disorders Network

Auglaize County Educational Services Center

Caveland Educational Support Center Central Kentucky Educational COOP

Central Ohio SERRC

Cincinnati Center for Autism

Comprehend Inc. Delaware ESC

Eastern Local Schools

Fairfield County Board of MR/DD, OH

Fairfield County ESC

First Steps

Hazard Community and Technical College

Hopewell SERRC KCEOC Head Start

Licking County Educational Services Center

Lifeline Home Health

MCESC Educational Assessment Team

MEO SERRC

Mercer County Educational Services Center

Miami Valley SERRC

Muskingum Valley Educational Service Center

NCO SERRC

Newport Independent Northern Kentucky COOP NorthKey Community Care Ohio Department of Education

ORCLISH, OH

Pilasco Ross SERRC/Scioto Redwood Rehabilitation Center

River Region COOP

SEO SERRC Starlight Center

Upper Cumberland Special Educational COOP

WCD SERRC, OH WE JOY SING

Western KY Educational COOP

# School District/County

Blanchester Local Schools

Boone County Bourbon County Campbell County Cardington OH

Covington Independent Delaware City Schools

Eastern Local/Brown County Ohio

Fleming County

Glasgow Independent

Greater Clark County Schools, IN

Hamilton County
Heath City Schools, OH
Jefferson County
Kenton County

Lakota School District,OH

Leslie County

Logan County
Ludlow Independent
Martin County
New Richmond, OH
Newport Independent
Norwood City Schools,OH

Oldham County

Olentangy Local Schools,OH Princeton County Schools, OH

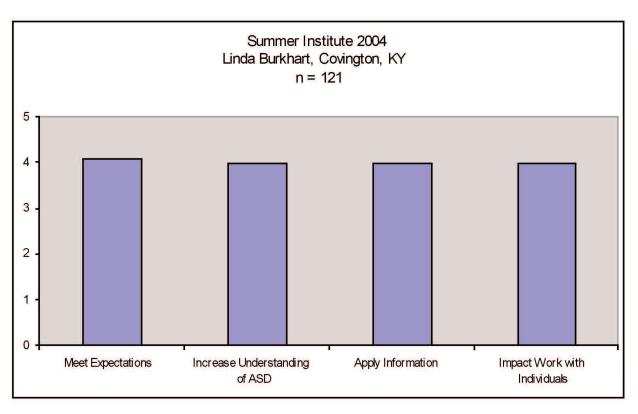
Russel Independent

Southwestern City Schools, OH Walton Verona Independent Schools

Williamstown Independent Winton Woods City Schools Worthington County Schools Worthington Schools,OH. Wyoming City Schools



Figure 10 represents feedback from workshop participants regarding material presented. Utilizing a five point scale, participants were asked to provide feedback regarding training activity, with "5" representing highest satisfaction and "1" indicated participants complete dissatisfaction with the activity.



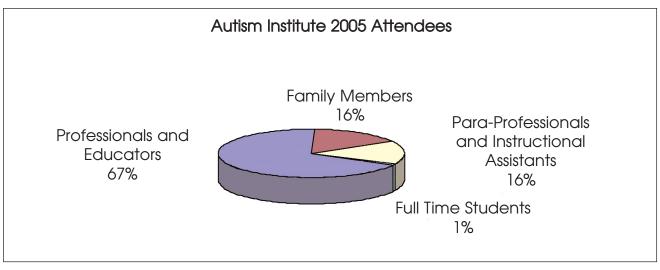


# **AUTISM INSTITUTE 2005**

"Putting the pieces together through collaboration" is a constant theme at the Kentucky Autism Training Center (KATC) and a mantra that is highlighted at the Autism Institute each year. During our sixth annual conference we had the good fortune to collaborate with the Ohio Center for Autism and Low Incidence (OCALI). Due to this collaborative effort we were able to offer participants a three day event with thirty-four different presentations that offered both quantity and quality.

The conference presentations were generally categorized into four areas of focus: Parents and Family Members of Individuals with Autism, Individuals with Complex Needs, Asperser's Syndrome, and Adolescence and Adults with Autism Spectrum Disorder (ASD). With this focus in mind, we invited internationally recognized speakers, Brenda Smith Myles, Ph.D., Peter Gerhardt, Ed. D., and Julie Donnelly, Ph.D. to support us in meeting the needs of individuals with ASD in the state. A further area of partnership was in planning and presentations by the Regional Special Education Cooperatives and their Complex Needs Consultants: Cheryl Dunn and Marsha Harper (West Kentucky), Kathy Meredith (Big East), Deb Myers (Green River), Terri Sinn (Ohio Valley), and Therese Vali (River Region).

Due to these collaborative efforts, between June 15th and 17th, over 850 participants attended Autism Institute 2006. We had a variety of participants from every region in Kentucky, six different states, and Japan. A breakdown of participants is listed below in Figure 11.



Professionals/Educators	384
Family Members	91
Para Professionals/ Instructional Assistants	89
Full Time Students	4
Special Session Early Childhood/Daycare	248
Special Session Law Enforcement & First Responders	35
Special Session Volunteer Model	14
Total Attendees	865



It was our great privilege to honor Peter Tanguay, M.D., F.A.C.P., during our Keynote luncheon. Margaret Tanguay accepted the award on behalf of Dr. Tanguay. Dr. Tanguay is the Spafford Ackerly Endowed Professor of Child and Adolescent Psychiatry in the Department of Psychiatry and Behavioral Sciences, School of Medicine, University of Louisville. His research has focused on autism and Asperger's Disorder. It is based upon an understanding of social communication and incorporates interviews designed to assess core deficits in the condition. One goal of the work has been to develop practical ways in which teachers and clinicians can become expert in the diagnosis, understanding, and treatment of persons within the autism spectrum. Dr. Tanguay's recent publications include an invited ten year review of Pervasive Developmental Disorder in the Journal of the American Academy of Child and Adolescent Psychiatry. Currently he is Associate editor of the Child PRITE – the Psychiatric Resident-in-Training Examination. He was an expert consultant on the film Rain Man which starred Dustin Hoffman.



Margaret Tanguay (accepted award on behalf her husband) and Nat McKay (Chairperson of the KATC Advisory Board) at the keynote lunch



Dr. Burke, Kristen Frarey and Shawn Henry address attendees at the opening ceremony



# Attendees at Autism Institute 2005 represented the following counties:

Anderson County Barren County Barren County Bell County Boone County Bourbon County Bourbon County Boyd County Boyle County Bracken County Breathitt County Breckinridge County Bullitt County Calloway County Campbell County Carter County Christian County Clark County, IN Clinton County Cuyahoga County, OH Davidson County, TN Daviess County

Delware Coubty, OH Estill County Fairfield County, CT

Fayette County Fayette County, OH Floyd County Franklin County

Franklin County, OH Garrard County Grant County Graves County Grayson County Hardin County Harrison County Harlan County Hart County Hazard County Henry County Hopkins County Jackson County, IN Jefferson County Jessamine County Johnson County Kenton County

Knott County Knox County Lake County, OH Laurel County Lawrence County Lee County Lincoln County Logan County Madison County Marion County Marshall County Meade County

Mercer County Metcalfe County Montgomery County Morgan County Calloway County Nicholas County Nelson County Ohio County Oldham County Pendleton County Perry County Pike County Pulaski County

Robertson County Rockcastle County Rowan County Russell County Scott County Shelby County Spencer County Trimble County Union County Warren County Washinaton County Williamson County, TN Webster County, TN Whitley County **Woodford County** 

In addition to guests from the counties listed, the KATC was proud to host individuals from Japan representing several disability organizations.

Towards promoting the community awareness of autism spectrum disorders, during Autism Institute 2005 the KATC hosted 3 special sessions on June 17th. The topics of three special session were:

- Promoting Autism Awareness for Law Enforcement Professionals and Other First Responders.
- Developing Volunteer Community Based Recreational Programs for Individuals with Autism.
- Simple Strategies for Daycare Workers and Early Childhood Professionals.

These sessions were offered available to community members at no charge. Attendance at these sessions exceeded the number originally anticipated. Below is a breakdown of attendance regarding the special sessions.

# Early Childhood Special Session attendees were from the following counties:

Barren County Grayson County Madison County Hardin County Boone County McCracken County Harlan County **Bourbon County** Meade County **Boyle County** Harrison County Metcalfe County Bracken County Hart County Muhlenburg County Breckenridge County Henry County Nelson County Hopkins County Nicholas County **Bullitt County Butler County** Jackson County Oldham County Calloway County Jefferson Count Pulaski County Carlise County Johnson County Robertson County Casey County Kenton County Rowan County Daviess County Russell County Knox County LaRue County Edmonson Counv Shelby County

Laurel County

Lee County

Franklin County
Graves County
Liberty County
Lincoln County

Fayette County

Fleming County

# Law Enforcement Special Session from the following counties in KY:

Spencer County

Union County

Warren County

Boone CountyHardin CountyNelson CountyBullitt CountyJefferson CountyOldham CountyFayette CountyMadison CountyTaylor CountyGreen CountyMarshall CountyWoodford County

McCracken County

# Volunteer Model Special Session from the following counties in KY:

Barren County Jefferson County Spencer County

Bullitt County Montgomery County

Figure 12 (next page) represents a summation of session evaluations from Autism Institute 2005. Figure 6 represents feedback from participants regarding material presented. Utilizing a five point scale, participants were asked to provide feedback regarding training activity, with "5" representing highest satisfaction and "1" indicated participants complete dissatisfaction with the activity.







Figure:12 Participant Feedback from Autism Institute 2005

Figur	Figure:12 Participant Feedback from Autism Institute 2005						
Presentation Title	Speaker(s)	Meet Expectations	Increase Understanding	Apply Information	Impact Work		
Initial Steps in Developing a Comprehensive Student Program	Shawn Henry, M.Ed. Kelly Shepperd, M.A.	4.2	4.1	4.2	4.1		
How to develop social skills for individuals with Asperger's Syndrome	Myrabeth Bundy, Ph.D.	4	4.3	4.1	4.1		
ABA Beyond Discrete Trials: The Application of ABA for Older Learners with ASD	Peter Gerhardt, Ed.D.	3.8	3.8	3.7	3.8		
Medical Issues Concerning Parents	Gail Williams, M.D.	4.2	4.4	4	3.8		
Structuring the Classroom for Success and Independence	Kathy Meredith, M.A.	4.4	4.6	4.3	4.4		
Sexuality and Socially Appropriate Behavior	Peter Gerhardt, Ed.D.	4.3	4.1	4.1	4.2		
Daily Schedules and Mini- Schedules: Working toward Independence	Kelly Shepperd, M.A.	4.2	4.3	4	4.1		
Verbal Behavior Strategies Integrated into the Classroom	Terese Vali, M.A. Deb Myers, M.A.	3.8	4.2	4.5	4.4		
An Understanding of Asperger's Syndrome for the LBD Teacher	Brenda Smith Myles, Ph.D.	4.8	4.8	4.8	4.8		
Social Skills and Transition Programming for Competent Adulthood for Learners with Autism	Peter Gerhardt, Ed.D.	4.5	4.6	4.5	4.5		
The Resourceful Parent	Julie Donnelly, Ph.D.	4.5	4.4	4.4	4.3		
Promoting Receptive and Expressive Language: Using Single and Multi-pictured Based Supports	John Burke, Ph.D. Kelly Shepperd, M.A.	4.6	4.6	4.5	4.5		
The Cycle of Tantrums, Rage and Meltdowns	Brenda Smith Myles, Ph.D.	4.7	4.6	4.6	4.7		
Toilet Training	John Burke, Ph.D. Kelly Shepperd, M.A.	4.6	4.6	4.5	4.4		
Analysis and Intervention of Problematic Behavior in Workplace or Community	Peter Gerhardt Ed.D.	4.6	4.4	4.4	4.5		
Behavior and Social Skill Strategies in the Home	Julie Donnelly, Ph.D.	4.8	4.8	4.6	4.7		
An Overview of the DIRtm Model: A Comprehensive Approach to Reversing the Core Deficits of ASD	Ann Pilewskie, M.A.	3.7	3.9	3.7	3.7		
Practical Strategies to Teach the Hidden Curriculum to your Students	Brenda Smith Myles, Ph.D.	4.7	4.7	4.6	4.6		
How to Develop and Implement a Sensory Diet for Students with ASD	Brenda Smith Myles, Ph.D.	4.7	4.9	4.8	4.9		
Special Needs Trusts	Bryan Borellis, J.D.	4.2	4	4.3	4.3		
Understanding Autism for Preschool and Childcare Professionals	Cheryl Dunn, M.A.	4.6	4.5	4.6	4.4		
Understanding Autism for Law Enforcement and Other First Responders	John Burke, Ph.D.	4.5	4.4	4.6	N/A		
Simple Strategies for Preschool and Childcare Professionals	Teri Sinn, M.A.	3.9	4.1	4.3	4		
Decreasing Behavior Problems: What Causes these Problems? Practical Guidelines for Educators	Richard Hudson, Ph.D.						
& Parents Supports for Students with Asperger's Syndrome in Middle and	Brenda Smith Myles, Ph.D.	4.7	4.7	4.4	4.5		
High School Communication & Play Strategies for Preschool & Childcare	Brenda McMillan, CCC-SLP Shawn	4.6	4.8	4.8	4.8		
Professionals  Multisystems Approach to	Henry, M.Ed.	4	3.9	4	4		
Intervention for Pre-school Children with Autism	Ann Pilewskie, M.A.	3.7	3.9	3.7	3.7		



Towards our mission to enhance supports for persons with autism spectrum disorders by providing information and technical assistance, the KATC hosted a Provider Expo at Autism Institute 2005. The purpose of the Provider Expo was to provide a networking opportunity for families and professions. Providers and support organizations from across the Commonwealth were invited to participate. Below is a list of participating organizations at the Provider Expo:

Autism Society of Kentuckiana
Building Bridges
Camp KYSOC
Cardinal Hill Health System
Cardinal Hill of Northern KY
Carriage House Educational Services and
Preschool
Center for Accessible Living
CHRC/Easter Seals of Louisville
Exceptional Equitation
Families for Effective Autism Treatment
Family Works
Great Plains
Harmony Habitat

Journeys: Music for Life

Kentucky Autism Training Center

Kentuckiana Children's Center
Kid Power
KY-Spin
Luci Center
Parent Outreach/Council on Mental
Retardation
Partners in Speech Pathology
Professional Evaluation and Developmental
Services
Protection and Advocacy-State of Kentucky
Rockcastle Hospital and Repertory Care
Center
Sheltered Risks Inc. and Kamp Kessa
Systematic Treatment of Autism & Related
Disorders

TLC Supported Living Services

# GRADUATE COURSES AND PROGRAM OFFERINGS AT THE UNIVERSITY OF LOUISVILLE IN THE AREA OF AUTISM

Based on the need for knowledge and education in the areas of Autism and Assistive Technology in Kentucky and at the national level, the Distance Education Programs in Special Education has created a new delivery system utilizing distance education technology. Students seeking a Master's Degree in the area of special education with a concentration in Autism or Assistive Technology have the opportunity to participate in courses during the Fall, Spring, and Summer delivered via the Internet. In addition, students will have access to interactive distance education library support systems and with computer technology such as e-mail, chat rooms, and the Internet to communicate with the professor and complete course assignments.

In conjunction with the Department of Teaching and Learning/Distance Education at the University of Louisville's College of Education and Human Development, Dr. John Burke and senior staff have offered multiple graduate courses on autism.

These courses taught during this year include:

- Introduction to Autism
- Autism Strategies & Techniques
- Applied Behavior Analysis.
- Single Subject Research Methods



John C. Burke, Ph.D., Director. The Kentucky Autism Training Center is directed by Dr. John C. Burke who oversees all aspects of the operation of the Center under the direct administration of the College of Education and Human Development at the University of Louisville. Prior to coming to UofL in August of 1997, Dr. Burke served as faculty at Johns Hopkins University as well as a Program Director at the Center for Technology in Education (JHU). Dr. Burke earned degrees and credentials in Psychology, Education, Speech Communication, and Speech and Hearing Sciences from the University of California, Santa Barbara. He also received a Post-Doctoral Fellowship from the Department of Pediatrics, The Johns Hopkins University School of Medicine and the Department of Behavioral Psychology the Kennedy Krieger Institute.

Dr. Burke has been extensively involved in several major research and training projects pertaining to autism funded by various government agencies (e.g., U.S. Department of Education, National Institute of Mental Health). He has taught several courses pertaining to understanding and educating students with autism and implementing effective technology-based behavioral and instructional supports. He has worked with Local and State Educational Agencies in planning, implementing, and evaluating major collaborative training programs pertaining to preparing teams of professionals and parents to work with students with autism and other pervasive developmental disorders. Dr. Burke has extensively published in several major journals and has presented at regional, national, and international conferences on such topics as strategies for facilitating communication and social skills, application of technology with children with autism and team-based training with parents and professionals.

Katie Carnazzo, M.A., Coordinator. Katie Carnazzo graduated from the University of Kansas with a Masters degree in Human Development and Behavior Analysis. She has worked with children with autism for approximately 9 years in various roles. At Juniper Gardens Children's Project, Ms. Carnazzo designed and implemented programs, which promoted successful integration of children with autism into regular, age-appropriate classrooms. She trained teachers to use such programs as peer tutoring, cooperative learning groups, social skills groups, and social networks. In her current role at the KATC, Ms. Carnazzo coordinates the KATC's school-based technical assistance activities. Currently, Ms. Carnazzo works .40 FTE for the KATC.

Theresa Ellis, Unit Business Manager. Theresa Ellis has worked for University of Louisville for approximately 5 years. She oversees the financials of several grants in the Department of Teaching & Learning, Special Education. She has been brought to the Kentucky Autism Training Center to oversee the financials of grants as well as the general budget.

**Kristen Frarey, Program Assistant.** Kristen Frarey joined the staff in 2001 to assist in the coordination of KATC's school-based services and professional development seminars for organizations and family groups across Kentucky. She coordinates requests for training and consultative services offered by the



KATC and coordinates the billing for these services. She also serves as a Co-Chair for the KATC's annual Autism Institute held each summer.

Rebecca Grau, M.P.A., Program Coordinator. Rebecca Grau graduated with a Masters degree in Public Administration at the University of Louisville. Ms. Grau coordinates many of the Center's administrative responsibilities and is working to increase collaboration among parents and professionals to develop an efficacious system of care for individuals with autism and their families across the Commonwealth.

Shawn Henry, M.Ed., Field Training Coordinator. Shawn Henry graduated from the University of Kentucky with a Bachelor's degree in Special Education in the area of Moderate to Severe Disabilities and Elementary Education. He holds a Master's degree in Special Education with a concentration in autism, augmentative communication, collaboration, learning and behavior disorders from the University of Louisville. He has worked with children and adults with autism for ten years. Prior to his arrival at the KATC, Mr. Henry served as an elementary special education teacher, primarily teaching students with autism. In his current position at the KATC, Mr. Henry coordinates the KATC's annual institute and provides training and technical assistance to families and professionals across the Commonwealth.

Richard Hudson, Ph.D., Field Training Coordinator. Richard Hudson worked as a Rehabilitation Counselor for the Kentucky Department of Vocational Rehabilitation for seven years, serving a diverse population of persons with severe disabilities. Holding a Master's of Education in Psychology from the University of Louisville and a Master's of Rehabilitation Counseling from the University of Kentucky. Richard received his doctorate in Educational and Counseling Psychology at the University of Louisville. At the KATC, Mr. Hudson serves as a resource for teachers, families, comprehensive care personnel, supported employment providers, school-to-work transition providers and rehabilitation counselors of persons with autism attempting to achieve community based employment.

Kelly Shepperd, M.A., Field Training Coordinator. Kelly Shepperd graduated from Western Kentucky University with a Master's degree in exceptional child education and holds certification in three areas: K-4 Elementary Education, K-12 Trainable Education and Director of Special Education. She has worked with individuals with autism and other disabilities for eleven years. Prior to her arrival at the KATC, she served as a special education teacher for nine years, three of which were in the secondary setting and 6 of which were in the elementary setting. For the last 5 years of her career in the public school setting, she primarily taught elementary students with autism, implementing a variety of programs in both regular education and special education settings. In 1999, in an effort to support and educate parents and families with children with autism, she and a colleague started the Barren River Area Autism Support Group.

In her current position at the KATC Ms. Shepperd primarily provides training and technical assistance to families the southwestern region of Kentucky were she resides.



# KENTUCKY AUTISM TRAINING CENTER 2004-2005 BUDGET EXPENDITURES

## Personnel

Staff include: director, 3 field training coordinators, 1 leadership development specialist, 1 program assistant, 1 part time coordinator, and 1 part-time unit business manager.

Total \$433,843,00

# **Operating Expenses**

Items such as procurement card expenses (including such purchases as office supplies, small equipment, instructional supplies, and registrations), postage, copiers/maintenance, telephone/communications expenses, duplicating/printing, temporary help, honorariums, building rent, stockroom/office supplies, and vehicle rent are included in operating expenses.

Total \$240,915.00

# Travel

Travel expenses include mileage, overnight accommodations, and in some instances meals of KATC employees who travel throughout the state to train and to attend some conferences.

Total \$19,501.00

## **Indirect Cost**

Indirect cost (overhead) was paid on only CSPD and OAR grants.

Total \$13,422.00

Total \$707,681.00



KENTUCKY AUTISM TRAINING CENTER FY 04/05 EXPENSE REPORT									
	TOTAL BUDGET	GENERAL LEGISLATED	KY COUNCIL POSTSECONDARY	INCOME	KDE-CSPD FUNDS	OAR			
	FY03/04	FUNDS	EDUCATION						
		EXPENDED	EXPENDED	EXPENDED	EXPENDED	EXPENDED	TOTAL EXPENDED		
SALARIES	311,771.00	145,484	73,980	30,456	76,445	17,141	343,506		
FRINGE BENEFITS	75,100.00	31,768	15,467	20,749	17,716	4,637	90,337		
TOTAL SAL. & F.B.	386,871.00	177,252	89,447	51,205	94,161	21,778	433,843		
OPERATING EXPENSES	196,403.00	16,492	9,720	49,416	41,097	2,388	119,113		
TRAVEL	20,525.00				18,976	525	19,501		
EQUIPMENT	-				-		-		
RENT			121,802	-			121,802		
INDIRECT COST	15,140.00				11,031	2,391	13,422		
TOTAL OPERATIONS	232,068.00	16,492	131,522	49,416	71,104	5,304	273,838		
REVENUE	140,710.00								
TOTAL	759,649.00	193,744	220,969	100,621	165,265	27,082	707,681		



# Family Focused Positive Behavior Supports-Case Study Comprehensive Autism Planning System-Case Study School-Based Technical Assistance-Case Study







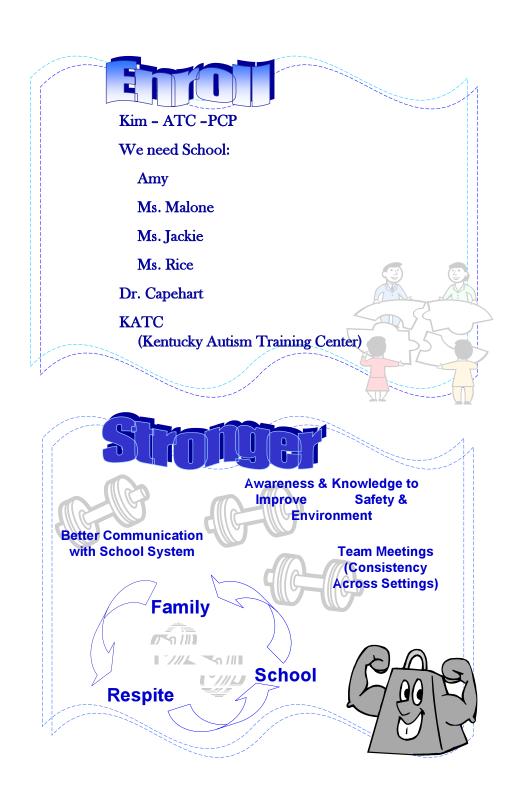












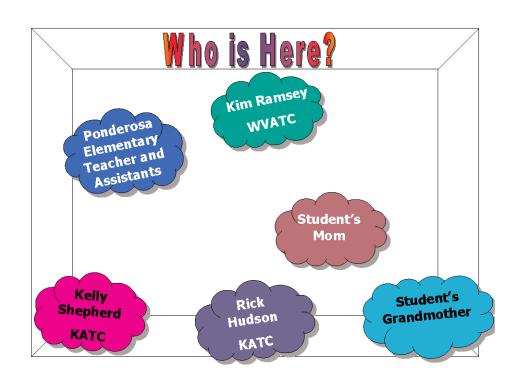


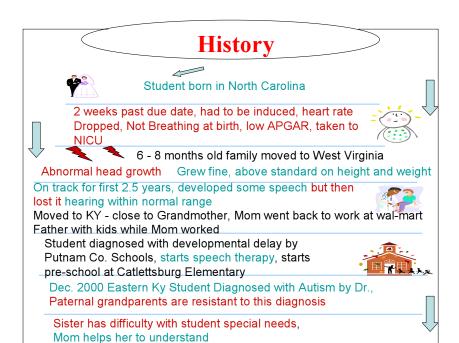


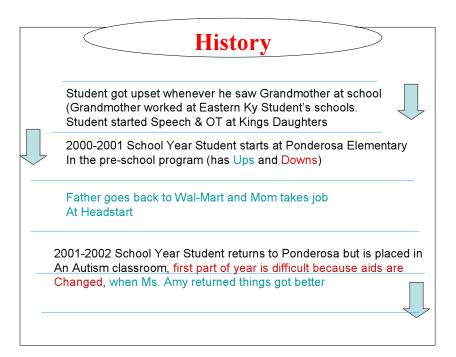
**Analyzed FBA Developed Strategies** 



# Developed Strategies for Household Safety Implementing Daytime Toileting Program Strategies for Increasing Appropriate Response to "NO" Go to YMCA Program With Typical Kids Define What Communication System is Consistent Across Environments. Mall Social Story







## CIRCLE OF SUPPORT



Computer - Jumpstart Pre-School, Scooby Doo, Pikachu

Video - Scooby Doo, Land Before Time, Pikachu

Outside - Trampoline, Bike, Sled

Music -Country

Home



Work

Mom 5x weekly Headstart
M - Th 8 - 3:45 F 8 - 1
Father 5x weekly Wal-Mart
M, Th, Sat 7 - 5

Tu, Fri 7 - 9 off Sun & Wed

Ponderosa Elem. (Eastern Ky Student) 5x week bus

6:30am - 3:30pm

Oakview (Sister) 5x weekly car



School

Community

McDonalds 3x weekly drive-thru

Wal-Mart 2x weekly car

Church 1x weekly car

Therapy 1x weekly car

Park 3x weekly (seasonal) car

Soccor (Sister) 2x weekly

### Family Schedule

### Weekday

5:20 am wake up

6:05 am fix Student's lunch and get him up and dressed, Choc. Milk and meds

6:20 am Get Sister up

6:30 am Student on bus, Father to work

7:15 am Sister to school

7:30 am Mom to work

3:30 pm Sister finishes school day

3:45 pm Mom finishes work day

4:00 pm Mom home starts dinner

5:30 pm Dinner

6:00 pm Homework

6:20 pm Baths

6:45 pm TV Time

7:00 pm meds

8:00 pm bedtime

### Weekend

6:00 am wake up

6:15 am breakfast, choc milk, meds

7:30 am Bath

10:00 am Grocery

12:00 pm Home (Free Time)

5:30 pm Dinner

6:30 pm Baths

7:00 pm meds

8:00 pm bedtime

Choices								
Eastern Ky Student	Family							
Likes McDonalds, KFC	Meals							
Meal Choices	Student's clothes							
Not to wear shoes at school or Home	Places we go							
Waking time on weekends	Bedtime							
Some Mealtimes	Family Trips - whether to take student or							
Free time at home - computer games - movies	leave him with Grandmother							
Sometimes chooses where Family goes								



### Adaptive & Challenging Behaviors

Increasingly flexible (not as routine oriented)

Changing his own pull-ups

Independent (feeding himself)

Always happy (in a good mood)

Going to bed, taking a bath (self care)

Travels well

Expressing choices (wants and needs)

Acrobatic

Determined

Stubborn (makes choices about where he does NOT want to go)

Hard-Headed (difficult to change from what he wants to do)

Determined

Knows how to work you to get what he wants

**Toileting** 

Fussing, whining, screaming, crying

Climbing on furniture

Running to the road

### **Family Fears and Concerns**

What would happen to him if Father and I were gone

What if he were to get separated from us?

Am I getting him the best services?

Am I doing all I can to benefit him?

Fear that he might not be happy

Who will take care of him?

	Family Stressors		
I feel stressed when	-	Who	Rating
When we are in public	Mom	4	
Potty training student		Mom	4
Student is upset and I	Mom	4	
I see a bill from the h	Mom	3	

	Related
Work	Does Not Work
Thinking about you can do to control the situation Crying Get out of the situation Calling Michelle (reaching out to supports) Pigging out Shopping Mom	Crying Trying to calm student or settle him down Keeping it to myself (not looking for support)

### **Themes**

Positive attitude, student is usually happy
Mom is not shy about helping student
Student has a devoted/committed family
Student can communicate his wants/needs
Independent, self-starter, resourceful
Toileting is an issue
Family is NOT at a crisis point
Student has made progress

Student has a strong school program

**Future Plans** Home Work Adding on more space No moving or job changes Student living as independently Fewer hours as possible May choose to stay at home Student having a job one increase knowledge base day Put things in place to help student gain needed skills Increase communication skills **School** student **Community** Maintain stability and consistency Mom increasing her knowledge Maintain Church program Get program at YMCA Keep Ms. Amy with student until graduation Sister taking violin Getting Adam through college

# COMPREHENSIVE AUTISM PLANNING SYSTEM CASE STUDY

The Kentucky Autism Training Center is currently working with a team at Morningside Elementary in the Elizabethtown Independent School District. The team was identified by Therese Vali of the River Region Cooperative as a part of the Comprehensive System of Personnel Development. As a part of the process, the team, along with personnel from the Cooperative and the Kentucky Autism Training Center identified the following areas as priorities: Challenging Behaviors/transitions, Fostering independence and enhancing communication skills. Although the CAPS system is used for one student's team, it is designed to build capacity within the local district.

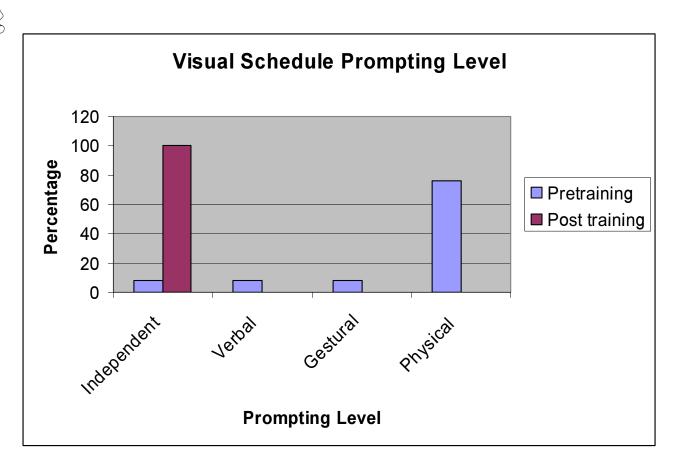
### The Team Approach

The KATC was fortunate not only because the school district provided administrative support but also because the entire team, administration, speech-language therapist, occupational therapist, regular educator, special educator, instructional assistants, regional special education cooperative personnel, as well as family members attended and participated in the training sessions. To begin the process, the team, including the child's mother, participated in a two day initial training process where the Comprehensive Autism Planning System (CAPS) process began. During the process, the team received training in Structuring the Environment, Developing Social-Communication Systems, Developing Sensory Supports, and Data Collection Systems. The team began by simply "walking through" the child's day to identify supports that were needed. As a support was identified, it was added to the CAPS for later implementation. The entire CAPS was not completed, but the team will continue the process when school starts in August 2005.

### Implementation of CAPS

At the beginning of the consultation, the target student was working with a Velcro stationary visual schedule, however, he was verbally and physically prompted to check his schedule each time the activity changed and then prompted to begin the activity. In order to decrease prompt dependency and foster independence, the team adapted his schedule to a single sheet that could travel with him from place to place within the classroom. By doing so, the level of prompting to check his schedule decreased from 76% physical prompting to 100% independent use of schedule as depicted by the graph below.



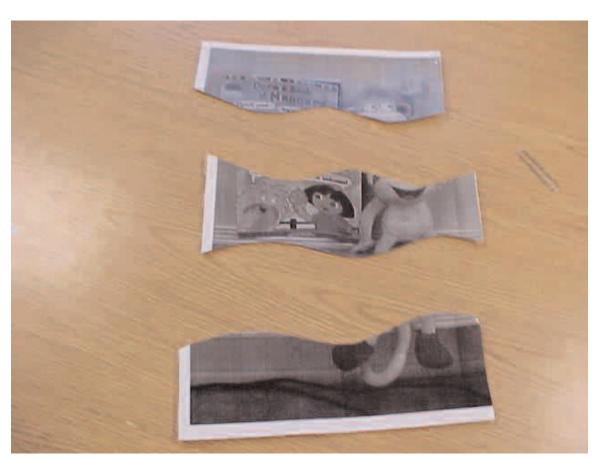


### Sample Supports

In addition to changing the schedule, the team implemented a visual reinforcement monitoring system (VRMS). After completing a reinforcer assessment, it was determined that the character Boots, from Dora the Explorer, was highly reinforcing to the target student. Implementation of the system follows:

- 1. A digital picture of the desired item was taken, laminated and cut into a three piece puzzle.
- 2. As the student completed a portion of a teacher directed task, the first part of the puzzle was given along with specific praise, "Good job, you did X number of math problems you get your first puzzle piece, only two more and you get Boots."
- 3. This process is completed until the whole puzzle is given at which time, the adult says, "Great work, you can play with Boots"
- 4. A timer is set for 5 minutes and the student is allowed to play with the toy.
- 5. When the time runs out, the student gives Boots back and returns to work.
- 6. The process repeats as needed.

The VRMS follows:





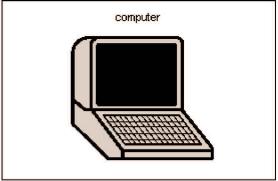
After the initial training dates, the team participated in follow-up hands on training and make-n-take sessions. Supports added during the make-n-take sessions included: The VRMS, choice boards, a folder system for the regular education class, and a sensory diet.



### Home Implementation

During this time, the target student's mother created visual communication supports for home using Mayer Johnson's Boardmaker. This allowed the family to implement supports at home thus enabling generalization. The family was very appreciative of the training and very happy to receive training on implementing visual supports at home. The following pictures were used at home to help clarify computer time.





### Summary

During the annual ARC meeting, Mrs. Brown, the special education teacher, explained how much she appreciated KATC's involvement with her team. She stated, "\_\_\_\_\_\_ has made so much progress, and I know it is because of the changes KATC helped us make." The team looks forward to completing the CAPS process in the fall as there are many supports that the team would like to add but due to time constraints were unable to.



Local School-Based Team: From the left. Mrs. Daphne Whithers, instructional assistant, Mrs. Carole Brown, special education teacher and Mrs. Diane White, instructional assistant

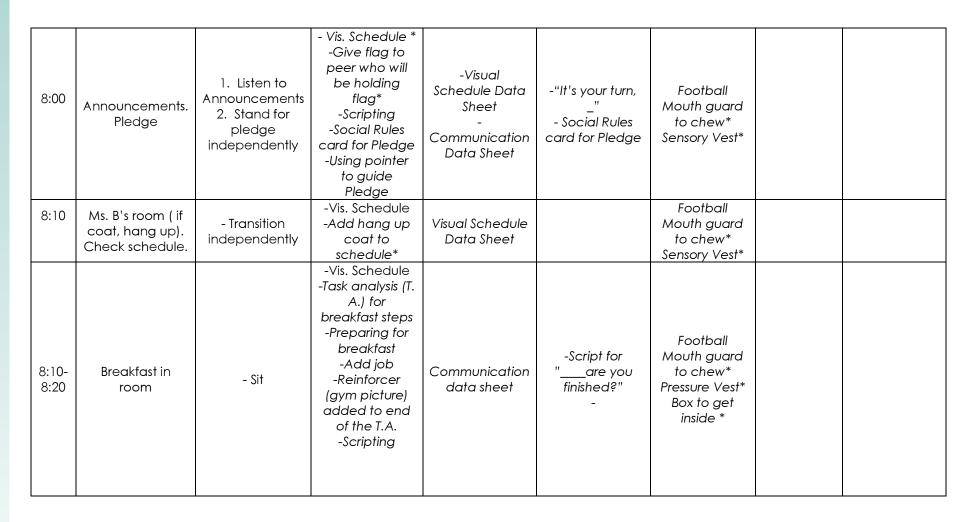


# Comprehensive Autism Planning System (CAPS)

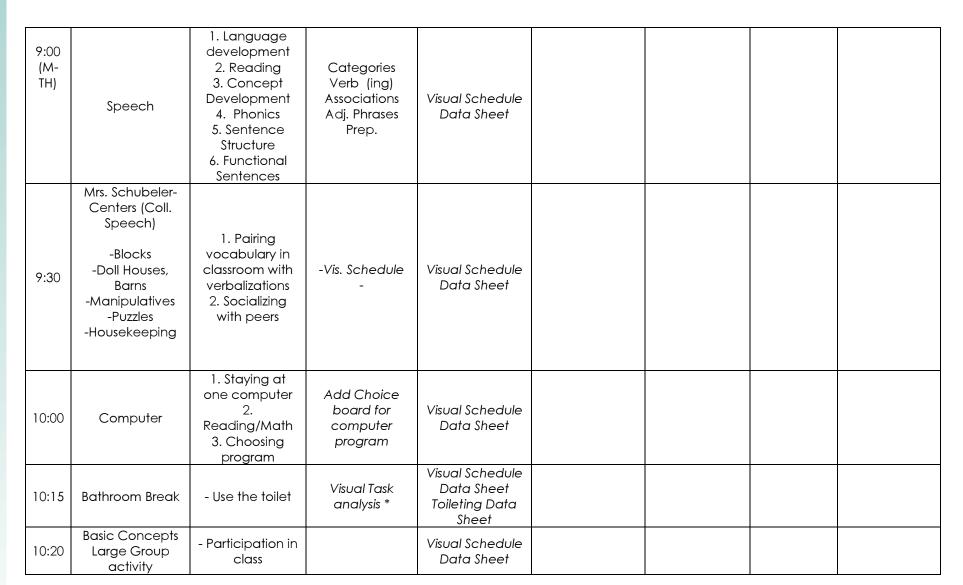
MORNINGSIDE ELEMENTARY SCHOOL

Please note that this is a work in progress. Items in italics or indicated with an \* were added as a part of CAPS implementation.

Time	Activity	Targeted skill short-term objective	Specially Designed Instruction	Data collection forms	Communication / Social Skills	Sensory Strategies	Instructional Materials	Generalization Plan
7:50	Ms. S Puts bookbag away.	- Independent - Vocational skills	- Vis. Schedule * -Routinely rotate personnel - Give folder to * - takes folder to pile *	Visual Schedule Data Sheet		Football Mouth guard to chew* Sensory Vest*		
7:55	Complete morning activity sheet.	- Transition Independently: 1. Following Directions	- Chooses activity off shelf and completes paper - Stop sign over computer* -Vis. Schedule * -Choice Board * -Systematic Prompting -Reinforcer Puzzle*	Visual Schedule Data Sheet		Football Mouth guard to chew* Sensory Vest*	Morning Activity Sheet	



8:20- 8:40	Gym	-Walk laps – exercise	Vis. Schedule -Digital pictures of gym activities (cards on ring or pictorial representation of each activity placed on wall) -Self-monitoring system for running/walking laps -Reinforcer added to go up bleachers	-Visual Schedule Data Sheet -Self Monitoring for laps		*-Sensory break 1. Mats* 2. Closed in space, bean bag chair, inner tube, box, therapy ball, proprioceptive input 3. Systematically try various items Football Mouth guard to chew*	
8:40- 8:45	Music	- Imitation skills	Vis. Schedule Check schedule and starts music -Eventually add pictures of songs for students to choose songsScripting	-Visual Schedule Data Sheet - Communication data Sheet	-Scripting for "who wants ———"	*May need a sensory break -Sensory choice board	
8:45- 9:00	Calendar	1. Participate in entire activity independently 2. Answering questions 3. Sit independently	Vis. Schedule Prompt "What's next or Check Schedule" -	Visual Schedule Data Sheet		Pressure Vest*	





		1. Number					
10:30	Math	identification to 20 2. Counting objects 3 to 10	Visual Reinforcer System (puzzle)*	Visual Schedule Data Sheet			
10:45	Spelling	1. Writing words	Visual Reinforcer System (puzzle)*	Visual Schedule Data Sheet			
11:00	Reading (Balanced with Literacy) or Spanish	1. Read in his environment (functional signs) 2. Reading comprehension (answering questions)	Visual Reinforcer System (puzzle)*	Visual Schedule Data Sheet			
11:30	Lunch	Speaking to others     Stay in seat		-Visual Schedule Data Sheet - Communication Data sheet	Picture ring of food		
12:00	Music/Physical Act.	- Imitate movements in music/physical activities	Visual Reinforcer System (puzzle)*	Visual Schedule Data Sheet			
12:15	Calendar (Whole Group)	- Complete calendar sheet independently	Visual Reinforcer System (puzzle)*	Visual Schedule Data Sheet			
12:30	Folder Work (Ind.) 1. Day of Week 2. Name 3. Shapes 4. Handwriting	- Independently complete worksheets	Visual Reinforcer System (puzzle)*	Visual Schedule Data Sheet			

1:00	Bathroom Break	- Use toilet	Visual task analysis*	-Visual Schedule Data Sheet -Toileting Data Sheet			
1:15	Computer	Staying at one computer     2.     Reading/Math     3. Choosing     program	Choice board	Visual Schedule Data Sheet			
1:30	Theme Time	Participate in activity     Answer questions-		Visual Schedule Data Sheet			
2:00	1. Snack	Make a     choice     Clean-up     after snack	-Key ring for snack -Task Analysis	Visual Schedule Data Sheet	Key ring for snack		
	2. Centers (Teacch Tasks)	- Complete task he has been given		Visual Schedule Data Sheet			
2:15	Home	- Preparing himself for home 1. get backpack 2. pack 3. Put on coat	-Self-monitoring checklist* -	Visual Schedule Data Sheet			



# SCHOOL-BASED TECHNICAL ASSISTANCE CASE STUDY

The Binet School for Brent Parker during the 2004/2005 school year. KATC conducted an observation and team meeting at Binet on Dec. 13th, 2004. Per school report and naturalistic observation it is noted that Brent engages in severe behaviors e.g., kicking, biting, scratching, that result in frequent use of Safe Crisis Management (SCM) techniques. Based on the meeting it was decided that the team required training in the areas of visual supports/schedules, structuring the environment and behavioral training. Additionally, a Functional Behavioral Analysis (FBA) was conducted as part of this consultation and a newly hired assistant was provided autism specific training.

Hands-on training with the target student and members of the educational team were conducted across multiple school environments, 10 hands-on trainings were provided on January, 4<sup>th</sup>, 24<sup>th</sup>, February, 2<sup>nd</sup>, 14<sup>th</sup>, 24<sup>th</sup>, March 1<sup>st</sup>, 8<sup>th</sup>, 14<sup>th</sup>, 22nd and 29<sup>th</sup>. Three small team trainings were provided to the local educational team and family members on January 12<sup>th</sup>, February 2<sup>nd</sup> and 9<sup>th</sup>.

### Background

Brent Parker is a 6-year-old student placed in an MMD classroom at Binet School. Brent is functionally non-verbal, though he does use some words and echolalia. It is noted that Brent engages in severe behaviors that include kicking, spitting, scratching, hitting and biting. These behaviors appear to be connected to times/incidences in which Brent is attempting to avoid a demand/request from staff or during transitions. It is further noted that Brent was initially placed in secluded time-out room when these behaviors occurred but school staff began to suspect that he was engaging in the behaviors as a way to gain the time-out.

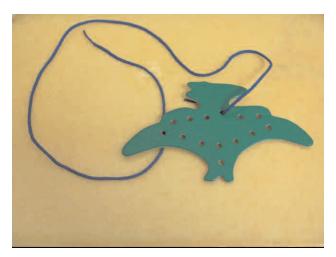
### Interventions

Due to the behavioral nature of the presenting problems a detailed Functional Behavioral Analysis was conducted for Brent. Data was collected over several weeks and across multiple school environments and compiled from a combination of observational and school collected data. Behaviors observed/noted during the data collection period included biting, scratching, kicking, spitting and hitting. The results of the FBA suggest that Brent's behaviors arise predominantly from seeking to escape/avoid demand/requests and during unstructured times or time of transition. Based on the data it appears that approximately 93% of the noted behaviors are attempts to escape or otherwise avoid task demands from teachers or other staff, i.e., a teacher makes a demand of Brent, "get off the computer, it is time for math," and Brent responds with kicking, biting or spitting. It is noted that the times in which the behaviors were most severe were those in which high task demands were made e.g., during speech therapy. Approximately 90% of these behaviors also involved transitions from either one environment to another or one activity to another.

KATC staff took numerous digital photographs of the student engaging in his daily activities across school environments and used these photographs toward the creation of visual schedules, a mini-schedule, a choice board and other visual supports. These visuals were assembled as part of a make-and-take small-group training session on visual schedules and supports. Hands-on training days were utilized to assist Binet staff, particularly an additional instructional assistant hired during the consult, to utilize these materials toward providing a structured and predictable schedule for Brent.



Picture from Visual Schedule denoting a series of tasks to be performed during morning work time, this is a mini-schedule





Each task in the mini-schedule has an individual picture to provide the student with concrete representations of what is expected and when the task is done.



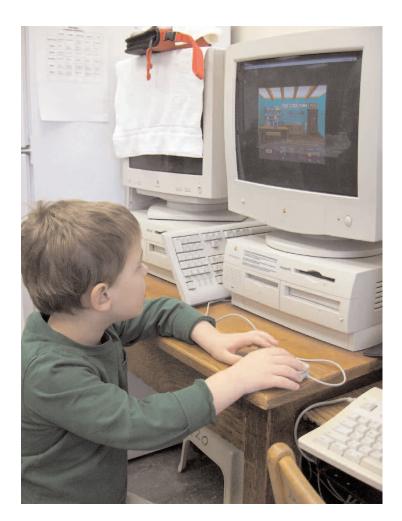




The final item in the mini-schedule is of the reinforcer for completing the task. This allows the student to know what they are working toward and that a preferred item or activity is awaiting them.



The student engages in the task from the mini-schedule with minimal prompting. The goal is for the student to use the schedule independently.



The student engages in his preferred activity (reinforcer) following successful completion of the previous tasks in the mini-schedule. This is the student's reward for engaging in targeted behaviors (task completion).

Brent's schedule was examined and adjusted to pair non-preferred tasks between two or more preferred activities to capitalize on behavioral momentum. Timers were strongly encouraged to demonstrate to the student the passage of time during non-preferred activities and the availability of upcoming preferred activities or choices.



Example of a visual timer to allow the student to monitor the time he has to enjoy his reward before returning to his schedule to begin the next task.



Data from school behavioral logs from 63 days were reviewed for dates from 11/04/04 to 3/28/05 (see attached graph). The first 21 days of data represents the time just prior KATC's involvement and serves as the baseline data. School behavioral logs did not record the actual behaviors but rather recorded the number of times a student was placed in a Safe Crisis Management (SCM) hold. Because SCM is used as a last resort when behaviors continue despite less invasive attempts at behavioral management e.g., verbal redirects etc., it is considered reasonable to equate SCM with the existence of significant behaviors. During this time period there were an average of 19 SCMs used daily. The second time segment represents the 21 days during which KATC staff attempted to implement visual schedules, mini-schedules and other visual and behavioral supports. There were an average of 11 SCM's used per day during this time period. The final time segment includes the use of visual supports and schedules as well as the inclusion of an additional teacher's assistant in the classroom who was provided individualized training on autism and the use of visual schedules. During these final 18 days of data collection there were an average of 3 SCM's used daily. This suggests that there was approximately an 80% drop in the use of Safe Crisis Management with this student during this time period as compared with baseline data.

Data for Decreased use of **Safe Crisis Management** (SCM) for Student with Behavioral Issues

