Tri-State Autism Spectrum Disorder Webinar Series

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TRI-STATE WEBINAR SERIES

EMBEDDING EVIDENCE BASED PRACTICES INTO DAILY ROUTINES: YOUNG CHILDREN WITH ASD

Presented by:
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COLORADO Department of Education

NEBRASKA autism spectrum disorders NETWORK

TASN Autism and Tertiary Behavior Supports
www.ksdetasn.org

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Presenter Information

Teri McGill taught Early Childhood Special Education in Nebraska for 18 years. She is currently a Regional Coordinator for the Nebraska ASD Network. As a regional Coordinator Teri presents on a variety of topics related to Autism and provides consultation and coaching for educators working with students Birth-21 with Autism or related disorders in her region. Teri holds a Master's Degree in Special Education from University of NE-Lincoln and is a Board Certified Behavior Analyst (BCBA).

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Learner Objectives

Participants will:

- Understand what qualifies an intervention as an Evidence Based Practices (EBP)
- Be aware of a variety of Evidence Based Practices that can be used for young children with Autism
- Understand how EBP can be used in daily routines to increase child outcomes

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Presentation Summary

This webinar will describe a variety of Evidence Based Practices (EBP) that can be used with families during daily routines!!

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ROUTINES

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What are Routines?

- Naturally occurring activities happening with some regularity including caregiving events and simply hanging out times

Individualized Intervention with-in Routines:
- Joining the child in what-ever the child is engaged in and weaving interventions into the child and family activity

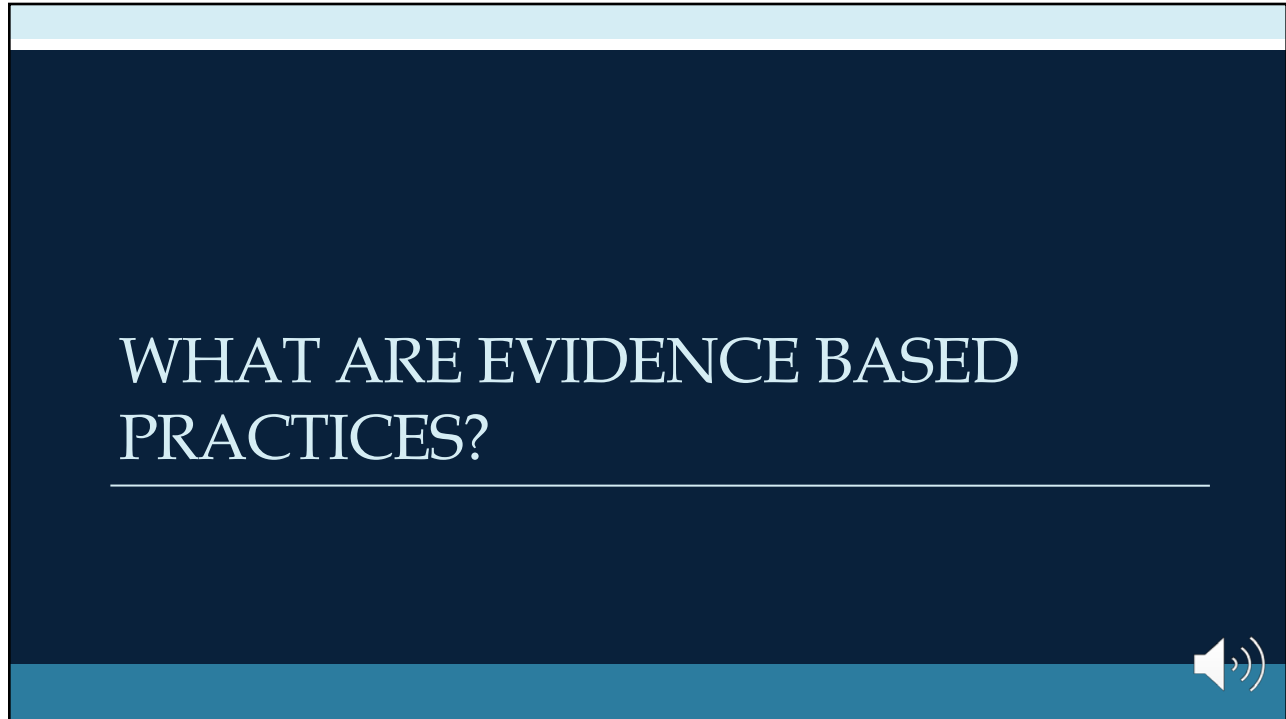McWilliam, R. A., Routines-Based Early Intervention (2010)

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Routines-Based Interview (RBI)

- A semi-structured interview
- Gathering information about the child and family's daily activities
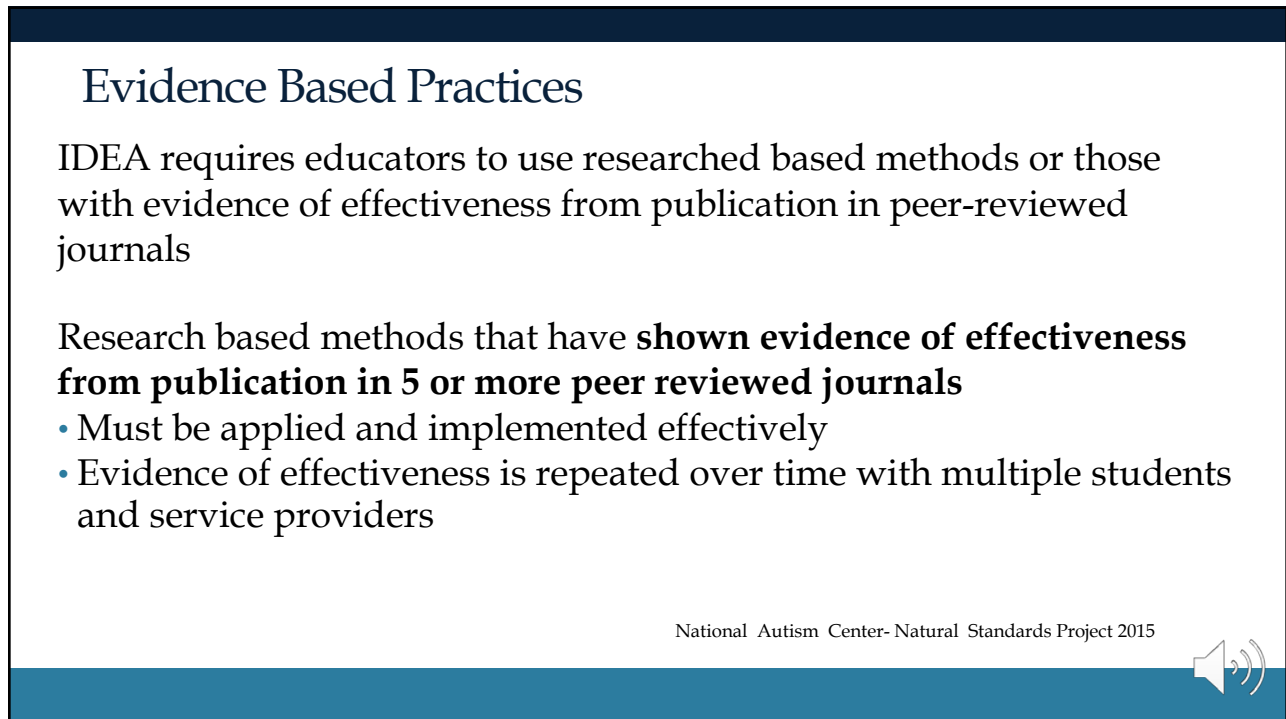- Determining priorities for Individual Family Service Plan(IFSP)

McWilliam, R. A., Routines-Based Early Intervention (2010)

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WHAT ARE EVIDENCE BASED PRACTICES?

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Evidence Based Practices

IDEA requires educators to use researched based methods or those with evidence of effectiveness from publication in peer-reviewed journals

Research based methods that have **shown evidence of effectiveness from publication in 5 or more peer reviewed journals**
• Must be applied and implemented effectively
• Evidence of effectiveness is repeated over time with multiple students and service providers

National Autism Center- Natural Standards Project 2015

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Established Evidence-Based Interventions

- Behavioral Interventions
- Cognitive Behavioral Intervention
- Comprehensive Behavioral Treatment for Young Children
- Language Training(Production)
- Modeling
- Joint Attention Interventions
- Natural Teaching Strategies

- Parent Training
- Peer Training
- Pivotal Response Training
- Schedules
- Scripting
- Self-Management
- Social Skills
- Story-Based Intervention
- Exercise

National Autism Center- National Standards Project 2015

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PARENT TRAINING

Coaching our parents during home services

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Parent Training

- Training on how to implement various strategies (after determining the best routine)
- First describe the intervention- -having the steps in writing is important
- Model the intervention
- Have the parent try the intervention with the child
- Give gentle feedback – have parent try again- -answer questions for parent
- Always be willing to model the strategy again for families

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Taking Advantage of Technology…

- Do a video model and leave it with parents

- Pictures of the steps of the strategy

- Zoom in with parents in between visits to answer questions, review your video model etc.

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Trouble-Shooting with Parents

▪If the family is not implementing the strategy…find out why!!

▪Is the strategy not fitting into the family routine?

▪Is the child not responding to the intervention?

▪Is the family struggling to remember to implement

▪Did the family try but was not sure they were implementing it correctly?

McWilliam, R. A., Routines-Based Early Intervention (2010)

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Polling Question #1

Steps to train and coach parents on using a new evidence based practice include which of the following….

(check all that apply)

❑Describe the strategy (also have it in writing/pictures for parent)

❑Model the strategy

❑Have parents try the strategy

❑Tell them what they did wrong and not to do it again

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Polling Question #1 Answer

❑**Describe the strategy (also have it in writing/pictures for parent)**

❑**Model the strategy**

❑**Have parents try the strategy**

❑Tell them ~~what~~ they did wrong and not to do it again

- First describe the intervention- -having the steps in writing is important
- Model the intervention
- Have the parent try the intervention with the child
- **Give gentle feedback – have parent try again- -answer questions for parent**
- **Always be willing to model the strategy again for families**

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USING EVIDENCE BASED PRACTICES DURING DAILY ROUTINES

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Programs for young children with ASD should include the following

- Joint Attention
- Intentional Communication
- Imitation
- Beginning Play with Objects

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JOINT ATTENTION INTERVENTIONS

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Sample Child Outcomes

- Susie will look at mom or dad when they walk into the room
- Paige will respond to her name by coming to mom when she calls her name
- Danny will shift to look toward a sound, toy or person in his environment
- Zach will give eye contact when he needs something

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Joint Attention Interventions

Evidence Based Practice	Daily Routines
• Joint Attention Interventions • Start with **Responding** to joint attention then move to **Initiating** joint attention • Handouts	• **Play Time:** Use preferred toys in order to get your child to shift (move their hand or tap on item) • **Play Time:** Sabotage an activity so the child needs help- - Time delay for engagement • **Bath/dressing time-** - Peek a boo with towel • **Mealtime** –hold bottle or sippy cup up by your eyes so child will give you a quick fleeting glance • **Daily Routines-** -Call child's name to see if they look or come to you

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Responding to Name and "Come here"

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Joint Attention: Response Training

- Level I- Response to hand on object
- Level 2- Response to object being tapped
- Level 3-Response to showing of an object
- Level 4- Eye contact
- Level 5- Following a point
- Level 6- Following a gaze

de la Cruz, Berenice. (2016)

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Joint Attention- Shifting to Tap During Play

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Other Forms of Initiating-Active- Joint Attention

- Coordinated Gaze Shift- Showing with eye gaze
- Protodeclarative Pointing- showing or commenting
- Bringing an object for help
- Making choices
- Pointing to request
- Bringing an object to show

de la Cruz, Berenice. (2016)

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Joint Attention Strategies

❑ "Spotlighting"

❑ Time Delay

❑ Move the child's arm toward the new item

❑ Joint Line of Regard- Get in the Child's Line of Vision

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FUNCTIONALLY EQUIVALENT REPLACEMENT BEHAVIORS

Functional Communication

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Teaching Functionally Equivalent Replacement Behaviors

Behavior is communicative and purposeful! We can't just stop a behavior. We need to teach a replacement behavior to the student.

• **Functional Communication- - Manding/Requesting**

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Sample Child Outcomes

• John will communicate his wants and needs at mealtimes and during other times of the day

• Sally will say single words for what she wants

• Molly will use a simple sign to ask for preferred snacks

• Brigid will say 2 or more words when asking for items

• Noah will go to mom to ask for toy or snack

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Communication Manding/Requesting

Evidence Based Practice	Daily Routines
• **Mand/Request Training** • Start with the child requesting most highly preferred items or activities	• Requesting preferred items during meal-times • Daily Activities: Asking for missing or needed item- need cup for favorite juice, need shoes to go outside • Bath-times- - Requesting favorite toys for parent or child to toss in tub • Outside- - Swing, wagon etc.

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What is a Mand?

The Basic Principle:
Want it, say it, get it!

• Hungry, say banana, someone gives you a banana

• Need to open a door, ask for key, someone gives the key

• Lost, ask for directions, someone gives directions

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Mand Forms

Requesting/asking can take many forms:

❑ Speaking

❑ Gestures

❑ Sign Language

❑ Picture Systems

❑ Various AAC devices (i-Pads, vocal output devices)

<u>Defective Mands</u> (Less pleasant form)

❑ Grabbing, screaming, climbing, hitting, self-injurious behavior, biting etc.

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Caution… All Mands are NOT Created Equal

▪ These are general mands and are not specific enough!

EAT
MORE
PLEASE

▪ When teaching first words-- teach specific nouns

▪ Approximations are great!!

▪ Then add words such as more and please

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Manding Procedure-
Second Trial Transfer

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Manding- Natural Environment

Manding During Daily Routines

Examples:

"fast" for pushing the truck

"open" when going through a door

"water" while washing hands

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Manding in the Natural Environment (NET)

PIVOTAL RESPONSE TREATMENT

Pivotal Response Treatment

- PRT® targets pivotal areas of a child's development, such as:
  - **motivation**
  - **responsivity to multiple cues**
  - **self-management**
  - **social initiations**.

- Super Nanny uses PRT!
- The reinforcement is NATURAL
- The Reinforcement is CONTINGENT on a specific behavior
- Increase motivation by making the reinforcer MORE fun WITH you than it is alone

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ECHOIC TRAINING

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Echoic Training

Evidence Based Practice
Behavioral Interventions • Echoic Training

Daily Routine
• **Car Rides-** - Vocal play with child as you are riding in the car "Sally say go", "say moo", "say mmm" etc. • **Outside Play-** -As you are playing add simple vocalizations for child to repeat (Wee, Zoom, up-up-up, Whoosh, go-go-go etc.) • **Bedtime**- -Repeat labels in a bed-times story (dog, cat, truck, cow)

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COMPREHENSIVE BEHAVIORAL TREATMENT FOR YOUNG CHILDREN / EARLY INTENSIVE BEHAVIORAL INTERVENTION

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Comprehensive Behavioral Treatment for Young Children / Early Intensive Behavioral Intervention

• Applied Behavior Analysis: "The process of systematically applying interventions based upon the principles of learning theory to improve socially significant behaviors to a meaningful degree"

(https://www.google.com/search?q=ABA&ie=utf-8&oe=utf-8, 2016.)

- Discrete Trial Training
- Incidental Teaching
- Errorless Learning
- Behavioral momentum
- Shaping
- Modeling
- Echoic Training
- Prompting and Repeated Practice

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Sample Child Outcomes

- Molly will make more vocalizations and say simple words during the day
- Meg will follow simple directions
- John will play by himself for short periods of time
- Josh will play with toys in a coordinated way in the evening
- Molly will pay attention to adult
- Brady will respond quickly when adult talks to him

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Modeling- - Imitation

Evidence Based Practice	Daily Routine
• Modeling-Imitation • "Do This" • I Do…You Do!!	• Play Time • Outside Play • Learning walk • Bath time • Transitions around the house • Riding in the grocery store cart

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Simple Discrete Trials

Evidence Based Practice	Daily Routine
• Applied Behavior Analysis • Simple Discrete Trials and- Object Sort: 	• Structured play time • Sibling "Homework time" • Evening play time

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Great Place to Start with Early Learners

- Difficulty with:
  - Sustained attention
  - Sitting
  - Following directions etc.
- Very Early Learner- - not playing with objects, toys or interacting with other
- Begin with **Context Controlled Responses**

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Contextually Controlled Responses

Our goal is for the instruction is to teach children to sit, attend to the adult and respond to directions given in a fun playful way!!

Ask child to **"Do This"** and model or give simple direction such as **"put in"**

- Push buttons
- Put things in
- Open/Close
- Taking items out (dumping)
- Push
- Give
- Tapping
- Roll

- Teacher or parent can be a SILENT shadow prompt partner behind the student if needed for engagement or for prompting

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Object Sort Activity…

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Polling Question #2

Context Controlled Responses are simple responses that happen due to a history of learning and the context of the materials??

A) True

B) False

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Polling Question #2 Answer

Context Controlled Responses are simple responses that happen due to a history of learning and the context of the materials??

A) **True**

B) False

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Imitation and Simple Discrete Trial

Evidence Based Practice	Daily Activities
•Simple Discrete Trial •Imitation Training	•Play Time •Bath time •Outside play •"Work-time" •Meal time

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Sample Child Outcomes

- Taylor will play babies with her cousins
- John will play with animals with his brother
- Emma will cooperate when getting dressed
- Gracie will put a tooth brush in her mouth when mom shows her
- Emma will use a washcloth after mom demonstrates

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Sample Child Outcomes

- Susie will sit to do an activity
- Maggie will play with toys in a variety of ways
- Brady will watch (little brother or parent) and do what they do with toys
- John will sit at the table with the family
- Joey will recognize names of a variety of items in the home in order to follow directions

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Simple Discrete Trial-Receptive Identification

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Polling Question #3

Discrete Trials can only be done at a table and are not fun??

A) True

B) False

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Polling Question #3 Answer

Discrete Trials can only be done at a table and are not fun??

A) True

B) **False**

Simple Discrete Trials- -Teaching Beginning Object Play

- Find a less distracting area to sit with you child
  - Rug on the floor
  - Small table
  - Smaller space or corner of room

Object Based Play ...Simple Imitation

1. Gain the child's attention and give the simple instruction "do this" as you model a simple action with an object. Do NOT verbalize the instruction (i.e. "do this, push car")

2. Help them by providing a prompt (usually hand-over hand for our little ones)

3. Reinforce immediately!!

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Imitation… Play, Motor and Natural Environment

- Place block in bucket
- Ring bells
- Push toy car
- Walk animal
- Feed doll
- Roll play-doh
- Bang toy hammer
- Stir food
- Stack 2 blocks
- Put hat on head
- Put animal in truck
- Pound play-doh

- Jump
- Clap
- Tap table
- Arms up
- Stomp feet
- Fine motor actions- sign for "Cracker"

- Wipe face with cloth
- Put toothbrush in mouth
- Put toy in box
- Put cup in sink
- Wash hands

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Teaching Simple ONE Step Play with Prompt

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Simple Motor Imitation- Getting Dressed

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SUPPORTING FAMILIES

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Embedding Evidence Based Practices into the Daily Routines

Target Mands
- Juice
- Cheerios
- Ball

Target Imitation: "Do This"
- Hand up
- Toothbrush in mouth
- Throw ball

Other Targets Receptive-
- Touch nose
- Put in

Echoic: "Say"
- "Hi"
- "All done"

Daily Routine	Planned Opportunity/Skill	Check-off

Wake-up Routine	• **Echoics**- - Vocal Play
	• **Imitation**- -
	  o "Do This"- -hands up to put shirt on
	  o Do this "Put toothbrush in mouth or wipe face)	

Breakfast	• **Manding**-Requesting
	  o Juice
	  o Cheerios
	• **Echoic** – Say "all done"
	• **Imitate**- "Do this" Wiping face
	• **Receptive Directions**- "Put in" (cup in tub)	

Car Ride	• **Echoics**- -Vocal Play • **Receptive Directions**- "touch nose, touch tummy, touch eyes) • **Simple Fill-in**- - • "Wheels on the _____ "	
Outside Time	• **Imitation**- "Do this" with toys • **Manding** –for ball • **Echoic** -Say "hi" to neighbor	

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ADDITIONAL INFORMATION FOR YOU!!

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Conclusion

Providers of young children with Autism should consider three things:

1. Determine specific individualized outcomes for the child's educational plan

2. Determine the family's daily routines that will lend to working on specific child outcomes

3. Determine Evidence Based Practices that will be most effective to teach to the child's outcomes during daily routines

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Some Additional Information for you!!

Additional information on the following….
• Story Base Interventions
• Scripting
• Antecedent Intervention (schedules and other visuals)
• Reinforcement
• Play box ideas for early learners

Handouts:
• Joint attention
• Providing Communication and Language Opportunities
• Blank embedding opportunities during daily routines sheet

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Additional Tri-State Webinars

• Autism in Early Childhood (4-part series)
• Autism and the Very Young Child
• Communication: A Vital Tool to Student Success Part 1: Teaching Manding (Requesting). - -2 Parts
• Pivotal Response Treatment- (2 Parts)
• Sensible Sleep Strategies
• Picky Eaters- 2 part series (strategies in part 2)
• Overcoming Daily Drama
• Toilet Training for Children with Autism Spectrum Disorders

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Any Questions??

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THANK YOU!

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