



Autism Navigator: Supporting Early Identification and a Routines-based, Parent Coaching Model of Early Intervention 2017 National Autism Conference

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Objectives



Identify:

1. Autism Navigator's (AN) evidence base, resources, content and access options.
2. Early signs of ASD in Toddlers using AN tools
3. Features of the routines-based, parent coaching model of early intervention from the *Early Social Interaction Project* (via AN)

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Handouts

➤ from *First Words Project & Autism Navigator Free Resources*

- FAQs Autism Navigator PA EITA Rollout
- Milestones
- What is ASD?
- 16x16
- About Active Engagement
- Everyday Activities
- How Parents can Support Soc-comm Dev't

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A unique collection web-based courses & tools that include extensive videos and abundant print materials.

Principle Authors:

Amy M. Wetherby, PhD, CCC-SLP
 Juliann J. Woods, PhD, CCC-SLP

<http://www.autismnavigator.com/>

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Autism Institute at Florida State University College of Medicine
<http://med.fsu.edu/?page=autisminstitute.home>

The Early Social Interaction Project (ESI)
Evidence based intervention for Toddlers w ASD

<https://esi.fsu.edu/>

<http://pediatrics.aappublications.org/content/early/2014/10/29/peds.2014-0757>

The FIRST WORDS® Project
Early social communication targeted - includes ASD
<http://firstwordproject.com>



(+ First Words Project)

Multiple Courses and Tools

Target Audience:

- Families
- Early intervention providers, Educators, Healthcare
<http://ecosystem.firstwordproject.com/where-are-you/>

Purpose:

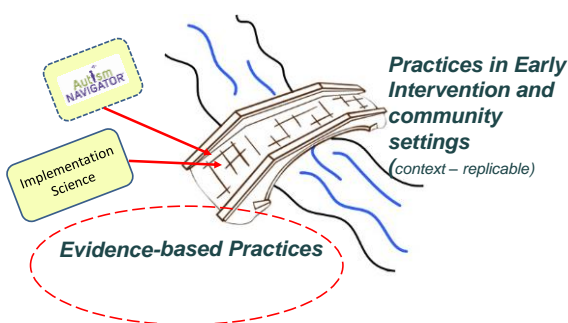
- Designed to bridge the gap between science and community practice
- Building capacity to identify ASD and improve outcomes

How:

- Suite of integrated online resources and courses
<http://www.autismnavigator.com>

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Bridge the Gap

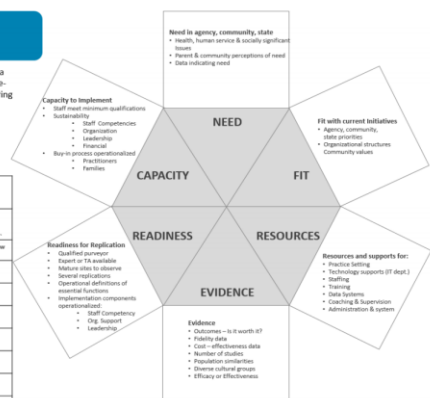


The Hexagon Tool Exploring Context

The Hexagon Tool can be used as a planning tool to evaluate evidence-based programs and practices during the Exploration Stage of Implementation.

See the Active Implementation Hub Resource Library
<http://implementation.hhs.gov/>

EBP:			
5 Point Rating Scale: High = 5, Medium = 3, Low = 1. Midpoints can be used and scored as a 2 or 4.			
	High	Med	Low
Need			
Fit			
Resource Availability			
Evidence			
Readiness for Replication			
Capacity to Implement			
Total Score			



©2013 Karen Blase, Laurel Kiser and Melissa Van Dyke
 Adapted from work by Laurel J. Kiser, Michelle Zabel, Albert A. Zachris, and Jean Smith (2007)

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Similarities and differences Professional vs Public access courses

Assessment of Learning

Certificates of Attendance & ASHA CEU

Narration & content delivery differences

Tools

examples

- ★ Screening tools & how to collaborate w families
- Milestones and Checklists of Red Flags (free course)
- ★ Fidelity & Data checklists, Coaching instruction
- Video samples of varied approaches (free glossary)

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Elements of Model Programs for Young Children with ASD



- ❖ **Earlier is better**
- ❖ **Curriculum emphasizes skill development in ASD core deficit areas**
 - Social Communication & Interaction + Restricted Patterns of Behavior/Interests
- ❖ **Planned, repeated teaching opportunities w/ Generalization Strategies.**
 - Individualized goals and outcomes
 - On-going monitoring and program improvement
- **Predictability and Routines**
- **Functional Approach to Problem Behaviors**
- **Planning for Transitions**
- ❖ **Family Involvement**
 - Sufficiency of support for adults
- ❖ **Intensive Intervention/Active Engagement time @ 25 hours/week**

National Research Council, Dawson, et al

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Earlier is Better

Center for the Developing Child Harvard

- Research on brain development reminds us that “earlier is better” when teaching young children.
- The most critical period for learning is during the first three years of a child's life.
- Pathways in the brain develop as infants and young children learn from exploring and interacting with people and objects in their environment.
- The brain's architecture is developing the most rapidly during this critical period and is the most sensitive to experiential learning.
- By age 3, most of the major brain circuits are mature, and later it becomes more difficult to make significant changes in a child's growth trajectory.

"The Science of Early Childhood Development"

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Early Identification Issues

- Research has shown that a diagnosis of autism at age 2 can be reliable, valid, and stable.
 - ASD signs are recognizable earlier
- Most children are not diagnosed with ASD until after age 4 years.
- Some studies have shown that parents of children with ASD notice a developmental concern before their child's first birthday.
- Physician screen 18 & 24 months for ASD (AAP guidelines)

<https://www.cdc.gov/ncbddd/autism/data.html>

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What's your experience?

- The number of children on your caseload who show risk for ASD and are not evaluated/identified?
- The primary referral concern of caregivers of toddlers with ASD risk or DX?

Core Diagnostic Features of ASD

Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition

Impairment in Social Communication and Interaction

- Deficits in social-emotional reciprocity
- Deficits in nonverbal communicative behaviors used for social interaction
- Deficits in developing, maintaining, and understanding relationships

Restricted, Repetitive Patterns of Behavior

- Stereotyped or repetitive motor movements, use of objects, or speech
- Insistence on sameness, inflexible adherence to routines, or ritualized patterns of verbal or nonverbal behavior
- Highly restricted, fixated interests that are abnormal in intensity or focus
- Hyper or hypo reactivity to sensory input or unusual interest in sensory

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How do diagnostic criteria present in very young children?

Presence of Red Flags

- Checklists of behaviors that indicate need for further assessment

Absence of Social-communication milestones

- Checklists of behaviors that describe typical development

Pre-screening tools

Checklists that identify signs of ASD (presence = possible risk)

Developmental Milestones that identify expected skills (absence = possible risk)

Screening tools (validated)

Screening tools are validated to identify children who are at risk and require further evaluation.

See Resources Handout

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Handout Links

Communication Checklist: 9-24 Months
Babies Learn at an Amazing Rate

Here's what's happening as children develop gestures, sounds, and words to communicate.

How can a parent know what to expect?

9 months

- 1. looks and points while looking at you
- 2. uses vocal sounds that look like they're trying to mean something
- 3. can show more or less happy and surprised

12 months

- 1. respond to their name
- 2. understand simple directions and gestures
- 3. use gestures like giving, showing, and pointing
- 4. use words and explore other words
- 5. play with objects like stacking blocks
- 6. use simple words like "mama" and "dada"
- 7. show you things they're interested in

15 months

- 1. use lots of gestures and sounds
- 2. understand simple directions like "come here" or "show me that"
- 3. use words like "mama" and "dada"
- 4. use words like "mama" and "dada"
- 5. use words like "mama" and "dada"
- 6. use words like "mama" and "dada"
- 7. use words like "mama" and "dada"

18 months

- 1. use more than 10 different nonverbal sounds like "ba," "da," "m," and "ga"
- 2. use more than 10 different nonverbal sounds like "ba," "da," "m," and "ga"
- 3. use more than 10 different nonverbal sounds like "ba," "da," "m," and "ga"
- 4. use more than 10 different nonverbal sounds like "ba," "da," "m," and "ga"

21 months

- 1. use a few words and words
- 2. understand simple directions like "come here" or "show me that"
- 3. use words like "mama" and "dada"
- 4. use words like "mama" and "dada"
- 5. use words like "mama" and "dada"
- 6. use words like "mama" and "dada"
- 7. use words like "mama" and "dada"

24 months

- 1. use more than 10 words
- 2. use words like "mama" and "dada"
- 3. use words like "mama" and "dada"
- 4. use words like "mama" and "dada"
- 5. use words like "mama" and "dada"
- 6. use words like "mama" and "dada"
- 7. use words like "mama" and "dada"

Red Flags of ASD in Toddlers

Social Communication

- 1. Limited use of gestures such as giving, showing, waving, clapping, pointing, or nodding their head
- 2. Delayed speech or no social babbling/chanting
- 3. Makes odd sounds or has an unusual tone of voice
- 4. Difficulty using eye contact, gestures, and sounds or words all at the same time
- 5. Little or no pretending or imitating of other people
- 6. Stopped using words that they used to say
- 7. Use another person's hand as a tool (e.g., putting parent's hand on a car for them to open the lid)

Social Interaction

- 1. Does not look right at people or hard to get them to look at you
- 2. Does not share wants, joyful expressions
- 3. Does not respond when someone calls their name
- 4. Does not draw your attention to things or show you things they're interested in
- 5. Does not share enjoyment or interest with others

Repetitive Behaviors & Restricted Interests

- 1. Unusual ways of moving their hands, fingers, or whole body
- 2. Develops rituals such as lining objects up or repeating things over and over
- 3. Very focused on or attached to unusual kinds of objects such as strips of cloth, wooden spoons, rocks, wheels, or drawings
- 4. Excessive interest in particular objects, actions, or activities that interferes with social interaction
- 5. Unusual sensory interests such as sniffing objects or looking out of the corner of their eye
- 6. Over- or under-reactive to certain sounds, textures, or other sensory input

Absence = Possible Risk

Presence = Possible Risk

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Example Early Autism Screening Tools

MCHAT-RF
SORF (validation in process)

STAT
ESAC (validation in process)

http://www.autismnavigator.com/tools/materials/sorf_fillable_score_form.pdf

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Late Talkers

Late Bloomers or ASD risk?

- A “late talker” is a child with less than 50 words and no word combinations by 24 months of age.
- About 15 to 20% of children are late talkers, and about half of late talkers are “late bloomers”, which means they will catch up by 3 years of age without intervention.

Autism
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Late Talkers

Late Bloomers or ASD risk?

- About half of the children who are late talkers will have speech or language disorders that are primary or have a language delay that is secondary to or associated with
 - a hearing impairment
 - global developmental delay or intellectual disability,
 - learning disability, or
 - **autism spectrum disorder.**

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Late Talkers

Late Bloomers or ASD risk?

Children with persisting language problems will be late in talking **and** show one or more of the following early social communication delays:

- Limited use of eye gaze
- Limited facial expression to share emotion
- Low rate of communicating to share attention and interests
- **Limited use of conventional and symbolic gestures**
- Limited use of sounds and inventory of consonants
- Poor coordination of gestures, sounds, and eye gaze
- Poor language comprehension, and
- Limited conventional use of objects and preten

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Activity

VIDEO

[16 Gestures by 16 Months](#)

Experiences from the field.

- Which social communication delay/ASD “symptom” does this help us to understand more deeply?
- How might you use this with your families?

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Parent Perspective

VIDEO

The Diagnosis of ASD is not necessary to:

Begin services

Focus supports on social communication skill development.

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Autism Navigator: Early Identification Video = A Powerful Tool

Public Access

- About Autism in Toddlers
- [Autism Video Glossary](#)
e.g., Soc Comm – Eye Gaze, Facial Expression, Body Language, Gestures – #1 Charlie/Sam

Enrollment Cost – Professional Courses

See FAQs to see if you are eligible for PA EITA sponsored enrollment

- Primary Care Course
- Knowledge and Skills Course

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Referral Early Intervention Services

Pennsylvania

Early Intervention in Pennsylvania Statewide

CONNECT Line: Linking families to early intervention services and support.

1-800-692-7288

www.connectpa.net

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Stretch Break



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Early Intervention and Early Childhood
Supports and Services



Autism Navigator
Supporting Active Engagement
through
Participation in Daily Routines and Activities

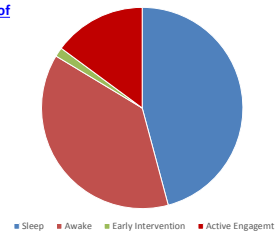
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Time in a Toddler's Week

Intensity?

One Week – 168 Hours

Handout:
[Everyday Activities of
Toddlers & Families](#)



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Active Engagement & Routines Based supports

What is Active Engagement?

The amount of time children spend involved with the environment (adults, peers, materials) in a way that is appropriate of the child's age, abilities and surroundings.

The child is ready to interact, learn, be productive and communicate with others and "hang in" when faced w challenges or change.

Everyday Activities provide opportunities for Active Engagement!

Handouts: [Everyday Activities](#)

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"Layers" of Active Engagement

About Active Engagement

Emphasis on social communication

Active Engagement and Transactional Supports

[Weekly Progress Form](#)

Handout: About Active Engagement
Course: [Weekly Progress Form](#)

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Everyday Activities

VIDEO

- Let's watch active engagement in everyday activities
 - Non engagement to engagement video

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Supporting Active Engagement & Families

1. Building Consensus with families
2. Planning – Building the layers of support within everyday activities
3. Collaborative Coaching for Deliberate Practice

[Fidelity Checklist](#)

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Supporting Active Engagement & Families

1. Building Consensus with families

Includes discussions on building the layers of support within everyday activities

- Fidelity Form – Domain 1
- [Social Communication Growth Charts](#)

VIDEO

Reflect as you watch:

- How was the family experience with first and second child different?
- Does that influence child outcomes? Why?
- What did you notice about dad?

Fidelity Checklist
Domain 1

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Supporting Active Engagement & Families

1. Building Consensus with families

2. Planning – Building the layers of support within everyday activities

Identifying Priority Outcomes and Daily Routine Activities

3. Collaborative Coaching for Deliberate Practice

Fidelity Checklist
Domain 2

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Supporting Active Engagement & Families

2. Planning – Building the layers of support within everyday activities

- Providers guide caregivers and provide feedback
- Identifying Priority Outcomes
 - Active Engagement Levels 1-3: Layer Cake
- Skills within the “layers”
 - [MAETS](#)

Measuring Active Engagement & Transactional Supports
Rating: 0 Absent – 1 Emerging – 2 Practicing – 3 Mastery
- Weekly across activities
 - 1-2 priority outcomes/activity + 3-5 activities + 3 different activity categories
e.g., Productive & socially connected + Chores + feed dog, get mail, laundry

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Supporting Active Engagement & Families

1. Building Consensus with families

2. Planning – Building the layers of support within everyday activities

Identifying Priority Outcomes

3. Collaborative Coaching for Deliberate Practice

Handout: [How Parents can Support Social Communication Dev't](#)

Fidelity Checklist
Domain 3

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Thank you for your
participation!



Questions?
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