

ADDING THE EARLY START DENVER MODEL
INTO PART C SERVICE DELIVERY: THE
EXPERIENCE OF TWO EI PROVIDERS

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DISCLOSURE

Barb and Merle have no conflicts of interest in
relation to this presentation

OBJECTIVES

- Participants will be able to:
- Describe components of the ESDM assessment and curriculum
 - Discuss research regarding the ESDM
 - Discuss the certification process
 - Describe the presenters' experiences with implementation of the ESDM in home-based EI settings

REFERENCES/RESOURCES

- Rogers, S. J., & Dawson, G. (2010). Early Start Denver Model for young children with autism: Promoting language, learning, and engagement. New York: Guilford Press.
- Rogers, S. J., Dawson, G., & Vismara, L. A. (2012). An early start for your child with autism: Using everyday activities to help kids connect, communicate, and learn. New York: Guilford Press



WHAT IS THE ESDM?

- A comprehensive early intervention approach that is:
- Evidence-based
 - Play-based and routines-based
 - A blend of behavioral and developmental approaches
 - Can be implemented in a variety of settings
 - Targets all developmental areas
 - Appropriate for children 12-60 months

FOUNDATIONS OF THE ESDM

- The Denver Model
- Rogers' and Pennington's Model of Interpersonal Development in Autism
- The Social Motivation Hypothesis of Autism
- Pivotal Response Training (PRT)

SENSORY SOCIAL ROUTINES

TEACHING STRATEGIES

- Blend of ABA/PRT, Denver Model
- Positive affect
 - Play as a framework for intervention
 - Intensive teaching
 - Positive behavior approaches
 - Family involvement

RESEARCH STUDIES

Waddington, H., van der Meer, L., & Sigafoos, J. (2016). Effectiveness of the Early Start Denver Model: A systematic review. *Review Journal of Autism and Developmental Disorders*, 3(2), 93-106.

- 12 studies/15 articles; methodological limitations in 8 that reduce certainty of evidence
- "promising treatment for young children with, or at risk, for an ASD diagnosis"
- "Given the generally promising results, the ESDM can be recommended as a practical approach to delivering a sensible early intervention program to children with, or at risk for, an ASD diagnosis. Still, more research is needed on all aspects of this model, particularly independent replications of the findings."

RESEARCH STUDIES, CONTINUED

Baril, E. M., & Humphreys, B. P. (2017). An evaluation of the research evidence on the Early Start Denver Model. *Journal of Early Intervention, 39*(4), 321-338.

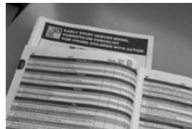
- 10 met criteria: ESDM was primary intervention, targeted and reported child outcomes, children ≤60 months, published in scholarly peer-reviewed journal in English
- "...promise as an evidence-based practice.....preliminary evidence to support the implementation of the ESDM."
- "...through rigorous ESDM training, family members as well as teams of professionals in community-based settings have successfully met criteria for fidelity of implementation."
- "...the extent to which child improvements are due to the ESDM intervention alone is not fully known." Additional replications needed

CERTIFICATION PROCESS

- Introductory workshop
- Advanced workshop
- Supervision

ASSESSMENT: CURRICULUM CHECKLIST

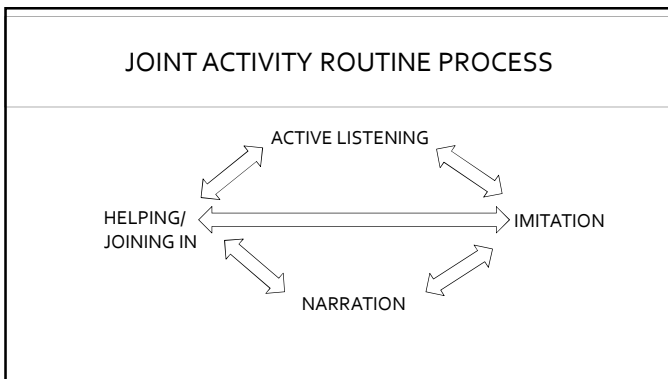
- Level 1: 12-18 months
- Level 2: 18-24 months
- Level 3: 24-36 months
- Level 4: 36-48 months



Areas include Receptive Communication, Expressive Communication, Joint Attention, Social Skills, Imitation, Cognition, Play, Fine Motor, Gross Motor, Behavior, Personal Independence

SHORT-TERM OBJECTIVES	LEARNING STEPS
<ul style="list-style-type: none"> • Behavioral objective format • 2-3 from each domain on checklist based from parent priorities, data from ESDM Curriculum Checklist, input from other professionals • Functional • Twelve week time frame 	<ul style="list-style-type: none"> • Based on task analysis and chaining • Incorporate prompt fading • Build on increasing frequency, accuracy, and or complexity of a skill

INTERVENTION
<p>Joint Activity Routines:</p> <p>opening/set-up ⇌ theme/activity ⇌ elaboration/expansion ⇌ end/transition</p> <p>Adult and child have shared control and "co-construct" the activity. Unwanted behaviors are addressed as needed.</p>



DATA COLLECTION: CHILD PROGRESS

- Daily data sheets
- Data taken every 15 minutes

DATA COLLECTION: FIDELITY OF TREATMENT

- Management of Child Attention
- ABC Format: Quality of Behavioral Teaching
- Instructional Techniques Application
- Adult Ability to Modulate Child Affect and Arousal
- Management of Unwanted Behaviors
- Quality of Dyadic Engagement
- Adult Optimizes Child Motivation for Participating in the Activity

FIDELITY, CONTINUED

- Adult Use Positive Affect
- Adult Sensitivity and Responsivity to Child Communicative Cues
- Multiple and Varied Communicative Opportunities Occur in the Activity
- Appropriateness of Adult Language for Child's Language Level
- Joint Activity Structure and Elaboration
- Transitions Between Activities

IMPLEMENTATION
ESDM IN ACTION

ASSESSMENT

COLLABORATION
<ul style="list-style-type: none">• Discuss ESDM with families as a treatment option• If family would like to use the ESDM, discuss with other providers on team• When providers would like to be involved in goal selection they collaborate on assessment and determination of objectives

JOINT ACTIVITY: AVERY PLAYING WITH TOYS

- Objectives:
 - During play with toys when an adult models an action, Avery will imitate the action within 5 seconds , 4/5 opportunities, across 3 activities and 2 people for 3 consecutive sessions.
 - During play with toys when an adult models a sound or word and pauses expectantly, Avery will approximate it 4/5 opportunities, across 3 activities and 2 people for 3 consecutive sessions.
- Watch for: being a play partner, active listening, imitation, joining in, managing unwanted behaviors

JOINT ACTIVITY ROUTINE: PLAYING WITH TOYS

- Video Segment 1: Attends briefly to another person with eye contact; Responds to preferred objects; Responds to activities via gaze, reach, smiles and movements
- Video Segment 2: Imitates motor action; Combines vocalization and gaze; Asks for help
- Video Segment 3: Follows verbal directions; Carries out single action with a prop on a doll or animal
- Watch for: Following child's lead, narrating, helping/joining in, elaborating/expanding

JOINT ACTIVITY: GROSS MOTOR

- Objective: When given a ball and told to kick it, Tony will independently kick the ball 4/5 x, in 2 settings, for 2 different people, for 3 consecutive sessions.
- Watch for incorporating sibling into session, coaching mother, generalizing skills, transition

COACHING PARENTS AND SIBLINGS

Watch for:

- Positioning that facilitates optimal engagement of the child and parent/siblings
- Strategies used to help parent/siblings be play partners, use prompts, and provide opportunities for practice
- Use of reflective questions and statements
- Variety of routines: snack and play

WHAT WE LIKE ABOUT THE ESDM

- Evidence based curriculum for children with autism
- Supports collaboration across providers within a pre-determined curriculum
- Data collection is systematic
- Caregiver capacity is expanded by using ESDM strategies
- Capitalizes on motivation and care giver priorities

WHAT WE HAVE DISCOVERED ABOUT THE ESDM

- Many competing reinforcers exist in home settings
- Homes not organized like clinics
- Materials for teaching may be absent or unavailable
- Families may not have ESDM objectives as their weekly priority
- Managing unwanted behavior may be frequent priority
- Transfer of play partner skills to caregivers may take many sessions
- Siblings may be present during sessions and need to play an active role when appropriate

PARENT VOICES

QUESTIONS?
Thanks so much for coming!
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