

Title of Module:

What Is ASD



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Module Content Description

- Prevalence of ASD
- Medical Diagnosis
- Qualifying for Regional Center Services
- Special Education Eligibility
- What's Next After Identification



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What is CAPTAIN

The California Autism Professional Training And Information Network (CAPTAIN) is an interagency network developed to support the understanding and use of evidence based practices (EBPs) for individuals affected by Autism Spectrum Disorders (ASD) across the state of California.



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What is CAPTAIN

Marin County SELPA in partnership with CAPTAIN, are members of the Statewide System of Support as the SELPA Content Lead for ASD.

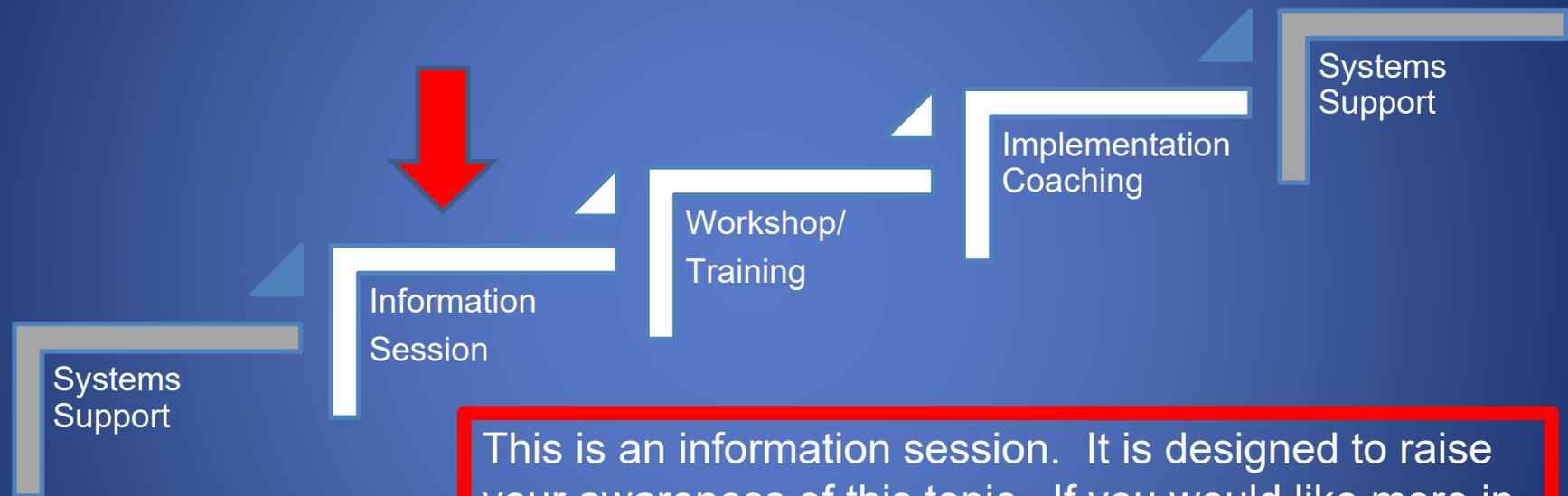
This project is funded by the California Department of Education and the California Collaborative for Educational Excellence.



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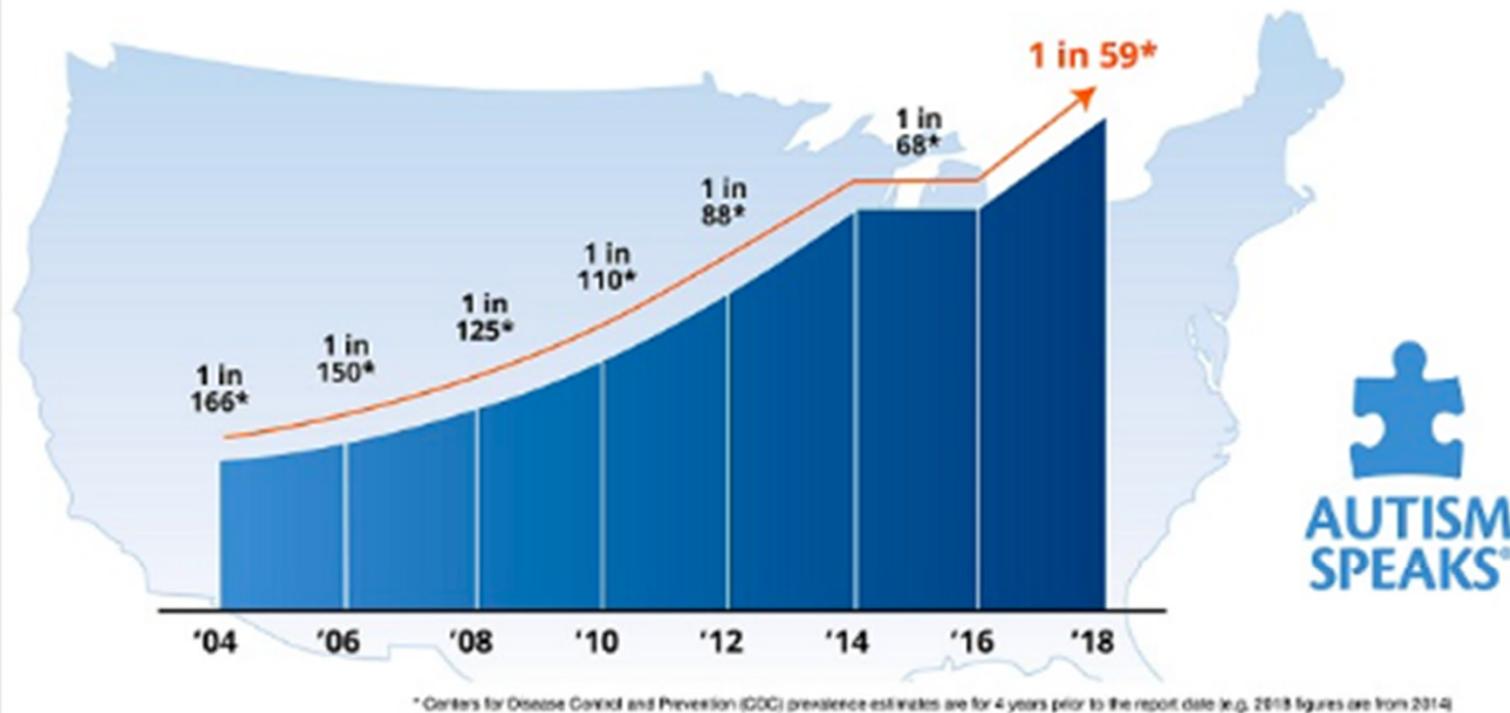


Levels of Professional Development to Reach Implementation



This is an information session. It is designed to raise your awareness of this topic. If you would like more in depth training on this topic or need to learn to implement components of the content, please follow up with your trainer to explore additional options.

Estimated Autism Prevalence 2018



CDC increases estimate of autisms prevalence by 15 percent, to 1 in 59 children

autismspeaks.org

Steady Increase in Number of California Students with Autism



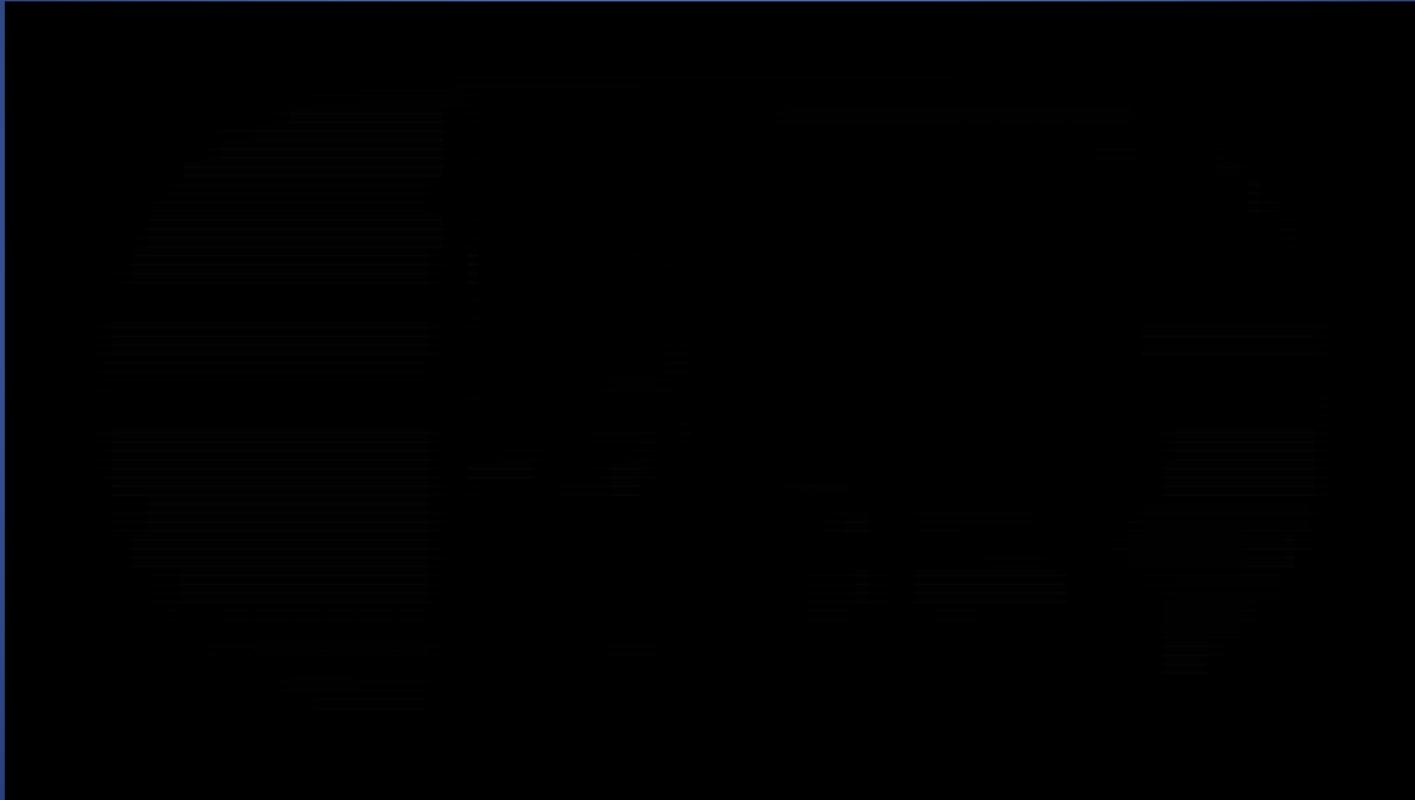
Students with Disabilities Total Population for Ages 0 to 22: 804,101
Source: CASEMIS December 2019 CA Dept. Education



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California's Response to Increases in ASD



ASD is Characterized and Diagnosed by Certain Patterns of Behavior:

- Deficits in Social Communication and Social Interactions
- Restrictive and Repetitive Patterns of Behavior, Interests or Activities (RRBs)

Getting Identified

- Medical Diagnosis
- Qualifying for Regional Center Services
- Special Education Eligibility

Medical Diagnosis

- State licensure in a medical or mental health profession is required to render a diagnosis of autism (DDS, 2002)
- Typically performed by a medical practitioner
 - Developmental Pediatrician
 - Neurologist
 - Licensed Psychologist (including L.E.P.)
 - Psychiatrist

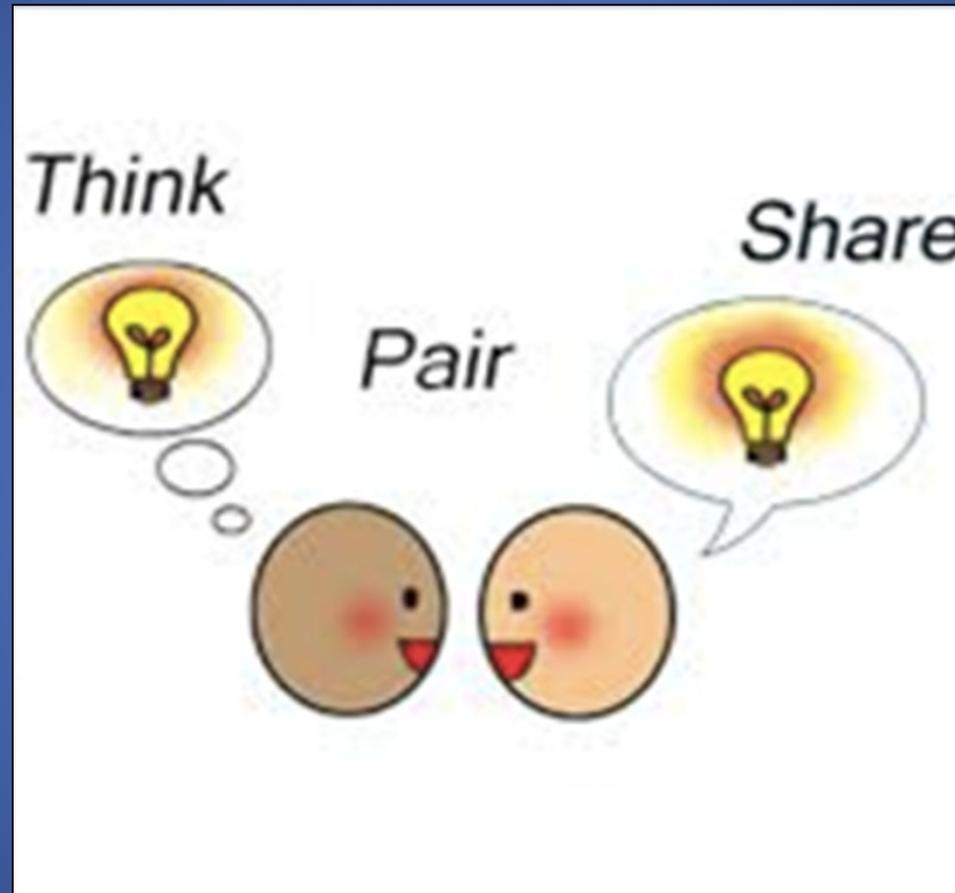
Medical Diagnosis

- May determine access to treatment or services available through
 - Regional Center
 - Private healthcare provider/insurance
- Should be taken into consideration by IEP Team when determining eligibility for special education

Dimensional Descriptions of Symptoms

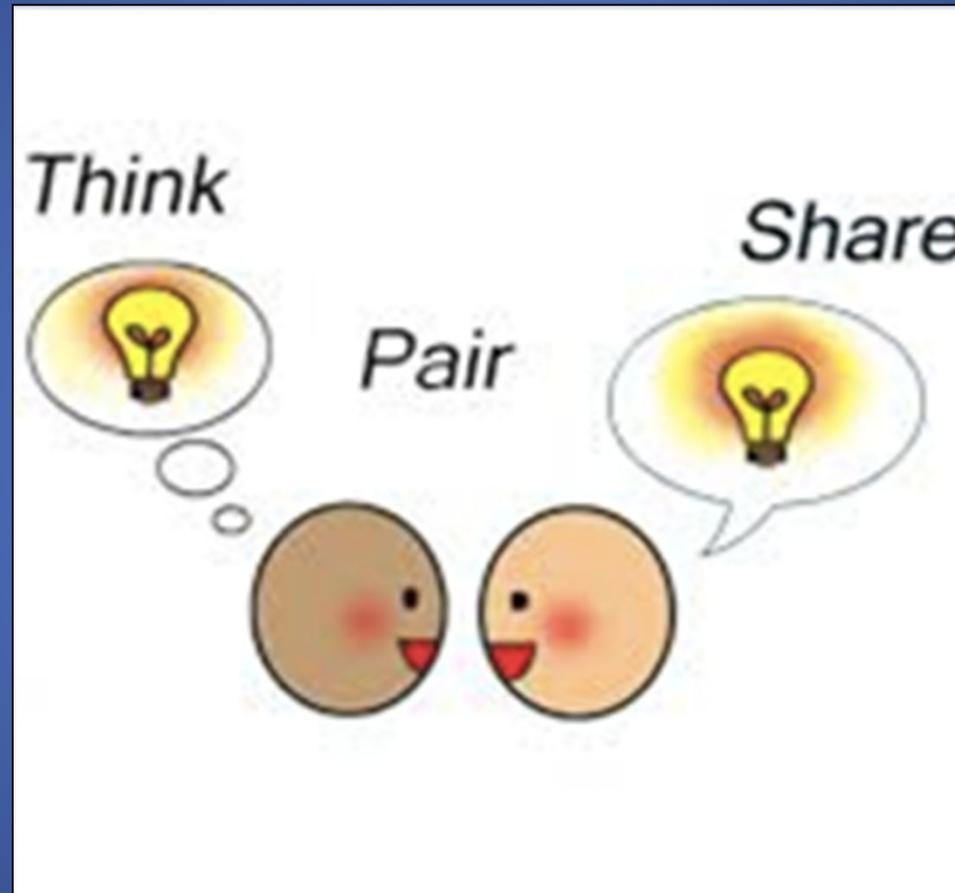
SOCIAL-COMMUNICATION (all 3)	Range of expression and examples
Deficits in social-emotional reciprocity	<ul style="list-style-type: none">• abnormal social approach and failure of normal back and forth conversation• reduced sharing of interests, emotions, affect, and response• failure to initiate or respond to social interactions
Deficits in nonverbal communicative behaviors used for social interaction	<ul style="list-style-type: none">• poorly integrated verbal and nonverbal communication• abnormalities in eye contact and body language or deficits in understanding and use of nonverbal communication• total lack of facial expression or gestures
Deficits in developing and maintaining developmentally appropriate relationships	<ul style="list-style-type: none">• difficulties adjusting behavior to suit different social contexts• difficulties in sharing imaginative play and making friends• absence of interest in people

Think - Pair - Share



REPETITIVE (at least 2)	Range of expression and examples
Stereotyped or repetitive motor movements, use of objects or speech	<ul style="list-style-type: none"> ▪ motor stereotypies ▪ lining up or flipping objects ▪ echolalia ▪ idiosyncratic speech
Insistence on sameness, inflexible adherence to routines, or ritualized patterns of behavior	<ul style="list-style-type: none"> ▪ extreme distress at small changes ▪ difficulty with transitions ▪ rigid thinking patterns ▪ greeting rituals ▪ insistence on same route or food
Highly restricted fixated interests abnormal in intensity or focus	<ul style="list-style-type: none"> ▪ strong attachment to/preoccupation with unusual objects ▪ excessively circumscribed or perseverative interests
Hyper-or hypo-reactivity to sensory input or unusual interest in sensory aspects of environment	<ul style="list-style-type: none"> ▪ indifference to pain/temperature ▪ adverse response to sounds/textures ▪ excessive smelling/touching objects ▪ visual fascination with lights/movement/objects

Think - Pair - Share



DSM-5 Severity Level	Social Communication	Repetitive Behaviors
Level 3: Requiring very substantial support	Severe deficits in function: very limited social initiations, minimal responses to others' initiations	Inflexible behavior (IB), extreme difficulty coping with change, or RRBs markedly interfere with functioning in ALL spheres
Level 2: Requiring substantial support	Marked deficits even with supports in place: limited social initiations, reduced or abnormal responses to others' initiations	IB, difficulty coping with change, other RRBs appear frequently enough to be obvious to casual observer and interfere with functioning in variety of contexts
Level 1: Requiring support	Without supports, deficits cause noticeable impairments. Difficulty initiating social interactions, clear examples of atypical or failed responses. May have decreased interest in social interactions	IB causes significant interference in one or more contexts. Difficulty switching between activities. Problems of organization and planning hamper independence

What Does ASD Look Like?

 **AFIRM** Autism Focused Intervention
Resources and Modules

Symptom Expression Differs

- Across individuals
- Periods of Development

Qualifying for Regional Center Services: Lanterman Developmental Disabilities Act

- Definition of developmental disability
 - Substantial disability because of
 - Cerebral palsy
 - Epilepsy
 - Autism
 - Intellectual disability
 - Other conditions closely related to intellectual disability that require similar treatment/supports

Substantial Disability

- “A condition which results in major impairment of cognitive and/or social functioning”
- The existence of significant limitations in **3 or more** of the following areas:
 - Communication
 - Learning
 - Self-care
 - Mobility
 - Self-direction
 - Capacity for independent living
 - Economic self-sufficiency

Conditions of Eligibility

Developmental Disability:

- Originates before age 18
- Is expected to continue indefinitely
- Constitutes a substantial disability

Does not include conditions that are:

- Solely psychiatric disorders
- Solely learning disorders
- Solely physical in nature

Diagnosis vs. Eligibility for Special Education

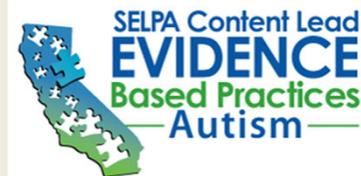
- IDEA and Ed Code have specific criteria that must be met in order to be eligible for Special Education under the Autism category
- Focused not on whether there is a diagnosis of Autism, but the presentation of characteristics associated with Autism and the need for (specialized) academic education and related services that may result (Watts, 2011)

When Autism is suspected educators are required to conduct an assessment in all areas of suspected disability in order to:

- Determine eligibility for special education
- Develop goals in the areas of identified need
- Provide Free and Appropriate Public Education (FAPE) in the Least Restrictive Environment (LRE)



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Educational Disability of Autism

IDEA Sec. 300.8 (c) (1)

- “A developmental disability significantly affecting verbal and nonverbal communication and social interaction generally evident prior to age 3 that adversely affects the child’s educational performance.”
- Other characteristics often associated with autism are engaging in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences.”

Educational Disability of Autism

IDEA Sec. 300.8 (c) (1)

- “The term does not apply if the child’s educational performance is adversely affected primarily because the child has an emotional disturbance, as defined by IDEA in 300.7 (b) (4).
- Educational performance does not ONLY mean academic performance. Areas could include: development, academic, behavioral and social domains.

California Administrative Code Title 5, Section 3030(g)

- (1) Autism means a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three, and adversely affecting a child's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences.

California Administrative Code Title 5, Section 3030(g)

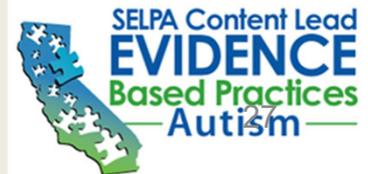
(A) Autism does not apply if a child's educational performance is adversely affected primarily because the child has an emotional disturbance, as defined in subdivision (b)(4) of this section.

(B) A child who manifests the characteristics of autism after age three could be identified as having autism if the criteria in subdivision (b)(1) of this section are satisfied.



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ABTA 2014



Once Identified What Is Next?

- Access to evidence based treatments and practices (EBPs)
- EBPs selected based on child's unique needs, context, preference of family and training of staff in EBPs
- Remember: There is no "One Size Fits All"



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Once Eligible for Special Education

- The next step is to write and implement what is known as an Individualized Education Program (usually called an IEP)
- The IEP is a written document that describes the educational program designed to meet a student's individual needs. Every student who receives special education must have an IEP.
- The IEP has two general purposes: (1) to set learning goals for the student; and (2) to state the supports and services that the school district will provide for the student.



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Our Statewide Network: Links to Vetted Resources

Evidence
Based
Practices

www.CAPTAIN.CA.gov



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ABTA 2014



Before We Begin...

- Please complete the Pre Training Questionnaire



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Learning Objectives

Participants will develop knowledge about Time Delay as an evidence based practice for skills teaching

Participants will be able to describe the two different types of time delay procedures in preparation for using them in practice



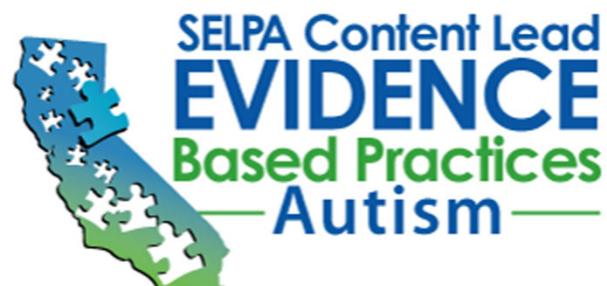
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Examples



AFIRM Autism Focused Intervention
Resources and Modules



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