

Q's Personal Profile

- 11 years old
- Entering grade 6 at a school for children with learning disabilities (small class sizes, multi-modal teaching, increased one to one time, repetitive teaching/ “over-teaching”)
- Lives with mom and dad
- No siblings
- Abnormal nasal airflow pattern
- Assessment summaries:
 - Central Auditory Processing disorder (November 2011)
 - Articulation disorder diagnosis (March 2012)
 - Diagnosed with ASD at the beginning of grade 5 (September 2012)
 - Psychoeducational assessment (March 2012) summaries below:

WISC-IV Summary		
Verbal Comprehension	19%ile	Low average
Perceptual Reasoning	55%ile	Average
Working Memory	27%ile	Average
Processing Speed	Coding >1%ile Symbol 37%ile	N/A (discrepancy in subtest scores)

WIAT-III Summary		
Reading Comprehension	37%ile	Average
Problem Solving	3%ile	Poor
Word Reading	23%ile	Low average
Pseudo Word Decoding	9%ile	Low average
Numerical Operations	9%ile	Low average
Spelling	13%ile	Low average
Math	5%ile	Poor
Math Fluency	1%ile	Very poor

Strengths	Needs
<ul style="list-style-type: none"> • Visual-spatial skills • Average reading comprehension abilities • Computers <ul style="list-style-type: none"> ○ Minecraft (video game) ○ Typing skills ○ Interactive online games • Aware of and hurt by social rejection at school – wants to “fit in” • Likes movies • Enjoys writing stories 	<ul style="list-style-type: none"> • Visual-motor dexterity • Fine motor control • Social-emotional skill training • Direct, focused instruction in math • Quiet and calm classroom environment (auditory sensory issues) • Visual representation (auditory processing difficulties) • Extra time for processing verbal information

Q's ASD Profile

Summary of ADOS-3	Summary of ADI-R
<ul style="list-style-type: none"> Talked at length about interests without checking in with the listener No interest shown in the examiner nor did Q ask any questions of the examiner Made eye contact when making requests Reduced eye contact when talking about own interests Restricted social overtures – at times awkward Intruded on personal space 	<p>Social domain:</p> <ul style="list-style-type: none"> Less direct gaze and social smiling Diminished range of facial expressions Few friendships Atypical responses to approaching other children Less sharing and shared enjoyment <p>Communication domain:</p> <ul style="list-style-type: none"> Less gestures Less reciprocity in conversations Minimal small talk Less imitation <p>Behaviour domain:</p> <ul style="list-style-type: none"> Slightly unusual interests Sensory issues Rituals No repetitive behaviour
<ul style="list-style-type: none"> Presented as significantly immature “bothered people until they let me play” Seemed quite social in orientation and was aware of and hurt by social rejection at school 	

Social Interaction:

DESCRIPTION OF DOMAIN & POSSIBLE SOURCES OF INFORMATION	A	B	C	
	The student's level of functioning			
<p>SOCIAL INTERACTION</p> <p>-Social/Emotional Reciprocity - Sympathizes and empathizes with others in an intuitive “give and take” fashion that guides social interaction (e.g., desire to please others, concern about effects of behaviours on others)</p> <p>-Social Awareness – Understands the point of view of others</p> <p>-Social Imitation – Copies the actions and attitudes of others</p> <p>-Joint Attention</p> <p>-Symbolic play</p> <p>-Forms relationships with peers</p> <p>-Initiates social interactions and responds</p> <p>-Seeks to share social experiences with others</p> <p>POSSIBLE SOURCES OF INFORMATION</p> <p>-File review</p> <p>-ADOS (Autism Diagnostic Observation Scale) Reciprocal Social Interaction Subtest</p> <p>-ADI-R (Autism Diagnostic Interview-Revised) Current Behaviour: Qualitative Abnormalities in Reciprocal Social Interaction</p> <p>-VABS (Vineland Adaptive Behaviour Scales)</p> <p>-SIB-R (Scales of Independent Behaviour-Revised) - Social Interaction and Communication Skills</p> <p>-ASIEP-2 (Autism Screening for Education Planning) Play Assessment</p> <p>-Other</p>	<p><i>Student exhibits mild impairments in functioning occasionally and intermittently.</i></p> <ul style="list-style-type: none"> Some difficulties with social rules (turn taking, sharing, and/or initiating and maintaining interactions and conversations). Engages others around shared narrow interests but has difficulty engaging interactively, accepts passive role in play, plays beside (rather than with) and seems not to notice if others are not interested. Occasional unconventional play with toys (e.g., lining up toys). Some difficulty understanding and using non verbal behaviours (e.g. limited facial expressions and gestures, eye contact) Some shyness and avoidance of relationships, but does interact socially with some peers. Initiates interactions and responds in social interactions, but in an unusual manner (odd language, fixating on limited topics/activities, silly or immature behaviours). Some difficulty imitating others verbally and/or non-verbally. Imitation may be delayed or stereotyped. Some difficulty empathizing and having insight into the feelings of others. Some limited interest in what others find interesting once the task demands are understood. Wishes to “fit in” but may not. 	<p><i>A history and likelihood of ongoing impairment of functioning, but low intensity and not necessarily in every setting.</i></p> <ul style="list-style-type: none"> Ongoing difficulties with social rules (turn taking, sharing, understanding emotions and perspectives of others) and with initiating and maintaining interactions and conversations. Social play frequently rigid, repetitive and routine. Aware of others but usually does not enter into play with others (e.g., watches other children). Frequently uses toys in very unconventional ways (e.g., lines up toys, stacks blocks). Ongoing impairments with non verbal behaviours (e.g. clumsy, inappropriate body language and expressions, difficulty recognizing or responding to others expressions or emotions) may make student appear insensitive. Considerable aloofness, but does engage in some degree of socially interactive activities with some people. Ongoing difficulties with spontaneous verbal and/or non-verbal imitation of behaviours. Imitation may be mechanical. May offend or antagonize others due to social difficulties. Ongoing difficulties understanding other's thoughts and feelings. Rarely discusses personal feelings or how they believe others perceive him/her. Social interactions are usually one-sided. 	<p><i>Significant impairment of functioning occurs across multiple settings</i></p> <ul style="list-style-type: none"> Severe and sustained delays with socially adaptive behaviours and responsiveness, and with social interaction in a variety of environments. Lacks modesty. Extremely unusual social play or no pretend play. Does not touch or play with toys. Engages in self stimulatory behaviour not involving toys (e.g., stares at toys). Seriously impaired non-verbal behaviours. Extreme aloofness/severe withdrawal/self isolation, appears to be oblivious or unaware of others. Misses contextual cues and does not adjust social language and behaviour to varying contexts and people so behaviour is frequently inappropriate or embarrassing. Does not engage in socially interactive activities, or form even limited peer friendships. Seldom imitates others (verbally and/or non-verbally) severely limiting functionality. Detached from the feelings of others. Little or no understanding of the mental states (intentions, beliefs, desires) of others. 	
		<p>Examples of Supports</p> <ul style="list-style-type: none"> Small group instruction or individualized instruction intermittently throughout the year. Some cueing, direct instruction and support required. Social skills groups, friendship groups Additional supervision during some unstructured times. 	<ul style="list-style-type: none"> Small group instruction or individualized instruction on an ongoing basis throughout the year. Regular cueing, direct instruction and support. Integrated play groups, social stories, visual scripts, regular rehearsal, embedded routines. Additional supervision during many unstructured times, particularly in social situations. 	<ul style="list-style-type: none"> Requires direct individualized instruction and intensive practice in most/all social situations. Specific, intensive individualized support required for student to respond or engage. All social situations require mediation.

Communication:

DESCRIPTION OF DOMAIN & POSSIBLE SOURCES OF INFORMATION		A	B	C
COMMUNICATION	<p>Receptive & Expressive Communication – Understanding and using spoken language as a tool for communication</p> <p>Understanding body language and facial expression</p> <p>Communicates non-verbally with body language and facial expression</p> <p>Pragmatic Language</p> <ul style="list-style-type: none"> - Follows social rules, shifts between speaker and listener roles, initiates and responds to communication and demonstrates prosody of speech (e.g., pitch, tone, etc) - Understands and uses non-literal language (e.g., metaphor, sarcasm, jokes) <p>Uses imaginative play</p> <p>Initiates an/or sustains communication</p> <p>POSSIBLE SOURCES OF INFORMATION</p> <p>-File review</p> <ul style="list-style-type: none"> -Speech/Language assessments -Adaptive assessments -ADOS (Autism Diagnostic Observation Scale): Communication Subtest -ADI-R (Autism Diagnostic Interview-Revised Qualitative Abnormalities in Communication) TOPS (Test of Pragmatic Skills) -Bracken Basic Concept Scale -CELF-4 (Clinical Evaluation of Language Fundamental - 4th Ed) -Other 	<p><i>Student exhibits mild impairments in functioning occasionally and intermittently.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Usually communicates experiences, interests, expectations or curiosity with some help. <input type="checkbox"/> Language may be appropriate and functional but sometimes unusual or idiosyncratic (e.g. echoing memorized phrases, stilted, pronoun confusion, rote repetition, lengthy monologues, pedantic or formal). <input type="checkbox"/> May be non-verbal but can use a technical communication system and can communicate through simple gestures or mime. <input type="checkbox"/> Some difficulty adjusting language to varying social situations. <input type="checkbox"/> Sometimes misinterprets body language, has difficulty with conversations, doesn't follow the flow of a conversation. <input type="checkbox"/> Sometimes appears naïve, less sophisticated and literal <input type="checkbox"/> Occasional clumsy body language (e.g., peculiar gaze), staring, inappropriate expressions). <input type="checkbox"/> Mild difficulties understanding and processing verbal information, especially if delivered quickly, in a multi step format, or if subtle or figurative language is involved. <input type="checkbox"/> Sometimes seems disinterested in the other side of a conversation and may not ask or comment on the other's thoughts. 	<p><i>A history and likelihood of ongoing impairment of functioning, but low intensity and not necessarily in every setting.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Sometimes interacts and attempts to communicate with peers but has ongoing difficulties. <input type="checkbox"/> Alternative or systematized methods of communication may be required. <input type="checkbox"/> May use an alternative communication system, but not yet effectively. <input type="checkbox"/> Meaningful speech is often mixed with the echoing of memorized words or the use of stereotypical and repetitive language. Frequently difficult to follow the individual's train of thought in a conversation. <input type="checkbox"/> Ongoing difficulties adjusting language to varying social situations (e.g., often off topic, many misinterpretations and misunderstandings, "out of sync" with peers and adults, often uses inappropriate comments but doesn't understand what s/he did wrong). <input type="checkbox"/> Comprehends only simple commands and takes comments very literally (e.g. confused by phrases such as "pull up your socks"). <input type="checkbox"/> Frequently ignores others in conversation. 	<p><i>Significant impairment of functioning occurs across multiple settings</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Rarely initiates or attempts to communicate with peers or others. <input type="checkbox"/> Absence of spoken language. <input type="checkbox"/> Limited communication. Profound difficulties communicating by speech or other methods and is not assisted by leading questions <input type="checkbox"/> May be non-verbal with no effective communication system in place. <input type="checkbox"/> Frustration, distress, and possible aggression due to profound communication difficulties. <input type="checkbox"/> Concrete visual supports (real objects, photographs) are often essential. <input type="checkbox"/> Absence of most intelligible words or peculiar use of recognizable language (e.g., significant echolalia, stereotypical language). <input type="checkbox"/> Significant impairments adjusting language to varying social situations (e.g., has no sense of what one says to an adult vs a peer vs storekeeper. <input type="checkbox"/> Student may be interpreted by others as being intrusive or harassing since s/he does not "get" the rules and has serious difficulties with boundary issues.
		<ul style="list-style-type: none"> <input type="checkbox"/> Some case management. <input type="checkbox"/> Small group or individualized instruction on an intermittent basis. <input type="checkbox"/> Some SLP consultation, visual support system and/or individualized instruction. <input type="checkbox"/> Teacher implements specialized supports and strategies in the classroom, may have mediated role playing with peers. 	<p style="text-align: center;">Examples of Supports</p> <ul style="list-style-type: none"> <input type="checkbox"/> Integrated case management. <input type="checkbox"/> Group support, interventions, individualized instruction on a regular basis. <input type="checkbox"/> Structured facilitated group lessons. <input type="checkbox"/> Use of visual cues and supports. 	<ul style="list-style-type: none"> <input type="checkbox"/> Extensive, intensive integrated case management. <input type="checkbox"/> Detailed and direct intervention plan and support system. <input type="checkbox"/> Specialized and complex communication system required for basic needs, and specialized expertise required to maintain this system.

Behaviours/Emotional Functioning:

DESCRIPTION OF DOMAIN & POSSIBLE SOURCES OF INFORMATION		A	B	C
BEHAVIOURS/ EMOTIONAL FUNCTIONING	<p>Adapts and adjusts behaviour across environments and contexts in order to meet social and community expectations for behaviours that are desirable, socially acceptable and which support learning.</p> <p>Emotional Functioning (e.g., mood, anxiety, compulsions, thought problems, obsessive behaviours)</p> <p>Motivation</p> <p>POSSIBLE SOURCES OF INFORMATION</p> <p>-File review</p> <ul style="list-style-type: none"> -ADOS (Autism Diagnostic Observation Scale) Stereotyped Behaviours and Restricted Interests Subtest -ADI-R (Autism Diagnostic Interview-Revised) Current Behaviour: Restricted, Repetitive and Stereotyped Patterns of Behaviour -VABS (Vineland Adaptive Behaviour Scales) -SIB-R (Scales of Independent Behaviour-Revised): Maladaptive Behaviour -ACBC (Achenbach Child Behaviour Checklist) -BASC-2 (Behaviour Assessment System for Children - 2nd Ed) 	<p><i>Student exhibits mild impairments in functioning occasionally and intermittently.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Some fascination with particular people/interests/activities and avidly collects information on interest, but not intrusive. <input type="checkbox"/> Develops some elaborate routines/rituals that must be completed. <input type="checkbox"/> Some inflexibility/rigidity and may resist transitions but usually responds if cued. <input type="checkbox"/> Likes routine and sometimes unduly distressed by minor changes to the environment (e.g. taking a different route to school), but can be redirected. <input type="checkbox"/> Some interest in objects/parts of objects, but will put them down if requested. <input type="checkbox"/> Occasional stereotyped and/or repetitive body movements (e.g., hand or finger twisting or flapping) or abnormalities of posture (e.g., toe walking). <input type="checkbox"/> May not always respond to usual classroom motivators (e.g., social praise, peer pressure) or deterrents (ignoring inappropriate behaviour). <input type="checkbox"/> Some withdrawal and indifference to others. <input type="checkbox"/> Some lack of subtlety or precision in expression of emotion (e.g. distress or affection out of proportion to the situation). <input type="checkbox"/> Minor levels of anxiety and worry. <input type="checkbox"/> Some difficulty distinguishing between reality and make believe. 	<p><i>A history and likelihood of ongoing impairment of functioning, but low intensity and not necessarily in every setting.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Restricted range of interests/activities which intrudes on classroom functioning <input type="checkbox"/> Strong need to follow routines in precise detail and readily distressed or anxious. <input type="checkbox"/> Frequent difficulties with transitions. <input type="checkbox"/> Marked distress and resistance to trivial environmental changes. <input type="checkbox"/> Preoccupation with parts of objects or repetitive use of objects, and which often causes distress upon separation. <input type="checkbox"/> Often observed stereotypical and/or repetitive body movements or posture abnormalities, but stops if interrupted. <input type="checkbox"/> Motivated by unique, individualized interests. <input type="checkbox"/> Appears indifferent to usual motivators, rewards or deterrents. Low interest in peers. Considerable aloofness. <input type="checkbox"/> Potential to place self and others at risk. <input type="checkbox"/> May appear threatening (non-specific) <input type="checkbox"/> May run/leave assigned area. <input type="checkbox"/> Frequent difficulties modulating expression of emotions (e.g. strong reactions to seemingly minor incidents) <input type="checkbox"/> Ongoing anxiety and easily overwhelmed by everyday life demands. <input type="checkbox"/> Frequent difficulty distinguishing between reality and make believe. 	<p><i>Significant impairment of functioning occurs across multiple settings</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Engagement in restrictive, repetitive behaviours and interests that severely limits any other activities. <input type="checkbox"/> Persistent preoccupations with socially inappropriate topics. <input type="checkbox"/> Ongoing, frequent self-stimulatory characteristics, and is very difficult to distract. <input type="checkbox"/> Persistent adherence to non-functional routines/rituals and great anxiety and distress if change is necessary. <input type="checkbox"/> Trivial changes to schedules may result in extremely high anxiety. <input type="checkbox"/> Persistent inappropriate interest with the use and exploration of parts of objects or attachments to unusual objects is intrusive and interferes with activities. <input type="checkbox"/> Stereotypic and/or repetitive movements significantly impair functioning. <input type="checkbox"/> Rarely engages in interaction with others. <input type="checkbox"/> Severe tantrums. <input type="checkbox"/> Bolting and/or running frequently attempted. <input type="checkbox"/> Damages property. <input type="checkbox"/> Prolonged periods of severe anxiety. Stress, fatigue and sensory overload cause significant distress, panic attacks* and even aggression.
		<ul style="list-style-type: none"> <input type="checkbox"/> Structured classroom routines, cues for transitions, re-directions, adaptations and explicit explanations. <input type="checkbox"/> Intermittent consultation and group work from specialized staff. <input type="checkbox"/> Small group, classroom based, peer supported strategies and adaptations. 	<p style="text-align: center;">Examples of Supports</p> <ul style="list-style-type: none"> <input type="checkbox"/> Consistent classroom routines and highly structured classroom. <input type="checkbox"/> Frequent specialized supports and staff support and redirection required. <input type="checkbox"/> Interventions to distract and interrupt. <input type="checkbox"/> Individualized programming, explicit, direct instruction. 	<ul style="list-style-type: none"> <input type="checkbox"/> Highly specialized and structured individualized programming, classroom structures and behaviour intervention. <input type="checkbox"/> Constant, intensive staff support. <input type="checkbox"/> Visual schedules, individualized routines. <input type="checkbox"/> Unique, highly structured and directed motivators.

Self-determination and Independent Living:

DESCRIPTION OF DOMAIN & POSSIBLE SOURCES OF INFORMATION		A	B	C	
SELF DETERMINATION & INDEPENDENT LIVING	<p>Independence to access the larger social community.</p> <p>-Meets and responds to the demands of daily life.</p> <p>-Acts independently, making choices and decisions, free from undue external influence.</p> <p>-Daily Living Skills: Dressing, grooming, safety related behaviours</p> <p>-Self Care: Mobility, Toileting, Feeding, Service dependency</p> <p>Sleep, sexuality. As social environments and expectations become more complicated they encompass things such as ability to use public transport, to shop, to ask for directions.</p> <p>-Self Determination: choice-making, decision-making, problem-solving, goal-setting, task-performance, self-regulation, motivation, Initiation</p> <p>-Generalizes across settings</p> <p>POSSIBLE SOURCES OF INFORMATION</p> <p>-File review</p> <p>-Transition meetings</p> <p>-PATH (Planning Alternative Tomorrows with Hope)</p> <p>-MAPS (McGill Action planning System)</p> <p>-SIB-R (Scales of Independent Behaviour-Revised) Personal Living Skills Subtest; Community Living Skills</p> <p>-VABS (Vineland Adaptive Behaviour Scales)</p> <p>-BRIEF (Behaviour Rating Inventory of Executive Function)</p> <p>TOPS (Test of Problem Solving)</p>	<p><i>Student exhibits mild impairments in functioning occasionally and intermittently.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Has most of the required skill set and follows most routines and transitions. <input type="checkbox"/> Functions independently in the school environment most of the time. <input type="checkbox"/> Some sensitivities, preoccupations, or disinterest with clothing results in some odd or unique patterns of dressing. <input type="checkbox"/> Some lack of concern for grooming skills. 	<p><i>A history and likelihood of ongoing impairment of functioning, but low intensity and not necessarily in every setting.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Follows some routines, makes some transitions, completes some basic self care routines, and/or life skills and/or self direction (eating, toileting, playing). <input type="checkbox"/> Does not yet generalize learned skills. <input type="checkbox"/> Rigid behaviours regarding clothing results in odd or peculiar ways of dressing. <input type="checkbox"/> Frequently disinterested in grooming or hygiene. 	<p><i>Significant impairment of functioning occurs across multiple settings</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Does not follow routines and/or perform activities or participate in classroom routines. <input type="checkbox"/> Little desire to achieve independence in self care and does not care for self (e.g. toileting, grooming, dressing, feeding). <input type="checkbox"/> Adolescent sexual behaviours may be obsessive and repetitive and significantly interfere with classroom functioning. <input type="checkbox"/> Leisure activities are not learned incidentally. <input type="checkbox"/> Risk to self or others is a persistent concern due to physical aggressiveness/self injurious behaviour. <input type="checkbox"/> No awareness of danger. 	
		Examples of Supports			
		<ul style="list-style-type: none"> <input type="checkbox"/> Occasional reminders, cueing, guidance, interventions, and support. <input type="checkbox"/> Some support or guidance with occupational goals. 	<ul style="list-style-type: none"> <input type="checkbox"/> Regular cueing, redirection, guidance and strategic support for problem solving. <input type="checkbox"/> Frequent supervision and case management. <input type="checkbox"/> Ongoing exploration of community and post-secondary resources. <input type="checkbox"/> Direct instruction and strategies. 	<ul style="list-style-type: none"> <input type="checkbox"/> Constant direct supervision, guidance, redirection and supervision on a daily basis. <input type="checkbox"/> Supervision required for safety. <input type="checkbox"/> Extensive planning and support required for transitions and for community programs. 	

Cognition:

DESCRIPTION OF DOMAIN & POSSIBLE SOURCES OF INFORMATION		A	B	C	
COGNITION	<p>Thinks and reasons, profits from experiences, and generalizes learning.</p> <p>Components:</p> <p>Reasoning, abstract and conceptual thinking, concept formation, processing of sensory information and perception of stimulus arousal, orientation, attention, executive functioning, memory, information, processing functions, problem solving</p> <p>POSSIBLE SOURCES OF INFORMATION</p> <p>-File review</p> <p>-WISC-IV (Wechsler Intelligence Scale for Children - 4th Ed.)</p> <p>-SB-V (Stanford Binet Scale for Children - 5th Ed)</p> <p>-TONI-11 (Test of Non Verbal Intelligence)</p> <p>-LIPS (Leiter International Performance Scale)</p>	<p><i>Student exhibits mild impairments in functioning occasionally and intermittently.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Occasional preference for sameness and familiarity sometimes limits curiosity to new learning experiences (e.g., student may be slow to show interest in new activities, may show some resistance to learning anything new or that is not related to interests, and has some trouble learning from mistakes and understanding that rules often change). <input type="checkbox"/> Minor difficulties attending and shifting attention and sometimes distracted by internal or external stimuli, but responds if cued. <input type="checkbox"/> Difficulty with multiple cues or information from two sources at the same time. <input type="checkbox"/> Often memorizes rote responses rather than understanding concept. <input type="checkbox"/> Some difficulties with problem solving (planning, organizing, sequencing, generating alternatives). <input type="checkbox"/> Skills/abilities appear fairly evenly developed across assessed areas. <input type="checkbox"/> Can learn information, but may not readily generalize or easily apply the concepts learned. <input type="checkbox"/> Some difficulty understanding mental states (intentions, beliefs, desires) of others that are not concrete and readily observable. 	<p><i>A history and likelihood of ongoing impairment of functioning, but low intensity and not necessarily in every setting.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Ongoing preference for sameness, rigid thinking, rule bound behaviours, and aversion to new objects and experiences has the effect of limiting curiosity and exposure to new learning experiences. <input type="checkbox"/> Ongoing difficulties with attending and shifting attention which affects learning (e.g., attention to insignificant details or limited aspects, or attention to too much stimuli). <input type="checkbox"/> Frequent difficulties with flexibility and problem solving in many areas. Often repeats same responses over and over. <input type="checkbox"/> Scattered developmental profile in which some skills/abilities are very delayed, while others are, or very near, age appropriate. <input type="checkbox"/> Tendency to learn and use skills exactly as taught and ongoing difficulties producing new responses or alternatives. <input type="checkbox"/> Ongoing problems understanding mental states (intentions, beliefs, desires) of others that are not concrete and readily observable. 	<p><i>Significant impairment of functioning occurs across multiple settings</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Extreme preference for sameness and familiarity significantly impairs new learning (e.g., student may run away from new objects or experiences, or may experience them as threatening). <input type="checkbox"/> Significant and unusual patterns of attention and a tendency to withdraw into a complex, inner world which significantly affects ability to learn. <input type="checkbox"/> Significant discrepancies within and between domains. <input type="checkbox"/> Severely limited problem solving which significantly limits independence. <input type="checkbox"/> Some skills/abilities are extremely poorly developed, while others are age appropriate or well above age expectations. <input type="checkbox"/> Little or no understanding of mental states (intentions, beliefs, desires) of others. 	
		Examples of Supports			
		<ul style="list-style-type: none"> <input type="checkbox"/> Some case management. <input type="checkbox"/> Some adaptations and/or modifications required. 	<ul style="list-style-type: none"> <input type="checkbox"/> Integrated case management. <input type="checkbox"/> Frequent use of adaptations and/or modifications. 	<ul style="list-style-type: none"> <input type="checkbox"/> Extensive, intensive integrated case management. <input type="checkbox"/> Uses functional curriculum concentrating on life skills. <input type="checkbox"/> Intensive, complex remediation. <input type="checkbox"/> Complex adaptations and/or modifications required. 	

Other Health Factors:

DESCRIPTION OF DOMAIN & POSSIBLE SOURCES OF INFORMATION		A	B	C
OTHER HEALTH FACTORS	<p>-Associated health conditions (e.g., Seizure disorder, traumatic Brain Injury, Tourettes, hearing deficits)</p> <p>-Sensory and arousal modulation - Hypo or hyper sensitivities (hearing, vision, tactile, vestibular and proprioceptive, olfactory and gustatory)</p> <p>-Motor Functions (Gross and Fine motor impairments)</p> <p>POSSIBLE SOURCES OF INFORMATION</p> <p>-File review</p> <p>-Occupational Therapy Consultation/Assessment</p> <p>-Physiotherapy Consultation/Assessment</p> <p>-Psychiatric evaluation</p> <p>-Paediatric evaluation</p> <p>-SIB-R (Scales of Independent Behaviour-Revised) Motor Skills</p>	The student's level of functioning		
		<p><i>Student exhibits mild impairments in functioning occasionally and intermittently.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Some additional health concerns, which are manageable. <input type="checkbox"/> Health condition affects classroom functioning occasionally or intensively for short durations of time. <input type="checkbox"/> Some avoidance of sensory experiences (e.g., some lack of eye contact, looks "through" others, lack of response to certain sounds or delayed response to sounds). <input type="checkbox"/> Sometimes does not look at materials, or respond to auditory information. <input type="checkbox"/> Some visual preoccupations or fascinations and seeking of unusual and/or intense sensory experiences (e.g., preoccupation with minor image, lights, smelling, tasting). <input type="checkbox"/> Some hypersensitivity to, and distraction by, certain sounds. <input type="checkbox"/> Some lack of sensitivity to low levels of pain. <input type="checkbox"/> Some adaptations required for fine motor difficulties or resistances to fine motor tasks. <input type="checkbox"/> Some gross motor difficulties (e.g., unusual gait). 	<p><i>A history and likelihood of ongoing impairment of functioning, but low intensity and not necessarily in every setting.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Associated health conditions that produce multiple developmental behavioural and/or learning challenges. <input type="checkbox"/> Frequent unusual responses to sensory stimuli and hypersensitivities to certain sounds that are not distressing to others. <input type="checkbox"/> Regularly seeks unusual and/or intense sensory experiences (e.g., preoccupation with certain visual objects, smelling and/or tasting) and can easily be over-aroused. <input type="checkbox"/> Frequent avoidance of common sensory experiences (e.g., frequently stares into space, looks "through" others) inconsistent response to auditory stimuli). <input type="checkbox"/> Often does not look at what s/he is working on, often misses auditory information. <input type="checkbox"/> Usually under-responsive to sensory input. <input type="checkbox"/> Often requires assistance with fine motor tasks such as eating, toileting etc.). <input type="checkbox"/> Frequent, ongoing motor clumsiness and ongoing difficulty with tasks requiring motor skills. 	<p><i>Significant impairment of functioning occurs across multiple settings</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Extreme, ongoing, or poorly controlled associated health conditions across multiple settings. <input type="checkbox"/> Seeking of unusual and/or intense sensory experiences are ongoing (e.g., mouthing, licking, rubbing), are for sensory rather than functional purposes, and take up major amounts of time. <input type="checkbox"/> Pervasive avoidance of, or extreme hypersensitivity to, common sensory experiences is ongoing, frequent and severely limits ability to learn and fit in with classroom routines. <input type="checkbox"/> Combination of associated health conditions that produce profound multiple developmental challenges. <input type="checkbox"/> Significant lack of appropriate response to pain (e.g., ignored or dramatically overreacted to). <input type="checkbox"/> Usually requires hand to hand assistance to perform fine motor tasks. <input type="checkbox"/> Extreme difficulty with motor control, which severely impacts daily activities.
		Examples of Supports		
	<ul style="list-style-type: none"> <input type="checkbox"/> Occasional monitoring of health conditions. <input type="checkbox"/> Occasional supervision for brief removal to alternate setting (e.g., calm down times). <input type="checkbox"/> Intermittent consultation and/or specialized support staff. <input type="checkbox"/> Adapted environment to limit sensory stimulation (e.g., weighted vests). 	<ul style="list-style-type: none"> <input type="checkbox"/> Regular monitoring of health conditions. <input type="checkbox"/> Requires programming adaptations and/or modifications in his/her educational program. <input type="checkbox"/> Frequent consultation and/or group work from specialized support staff. <input type="checkbox"/> Regularly requires environmental supports or modifications. <input type="checkbox"/> Frequent reminders and repetition of auditory information. 	<ul style="list-style-type: none"> <input type="checkbox"/> Extensive, individualized, attention/instruction and extensive additional supports. <input type="checkbox"/> Extensive adaptations/modifications to the learning environment and highly individualized planning and support. <input type="checkbox"/> May require a medical emergency plan and extensive monitoring. 	

Assessments to administer in September:

The following assessments should be undertaken in September to provide a baseline of acquired skills and those that need to be addressed further. These documents will provide information that will help create the IEP to ensure the classroom is set up to best meet the needs of all pupils. Due to the profiles of the children who attended the school, many of these observation checklists will be utilized for all pupils in the class. Awareness of the skill level of all pupils in the social domain will allow for lessons to purposefully address common areas of need as well as those specific to each pupil. Support provided can be meaningfully adapted to the functional level of each student and will assist those who work with each child to not only have a better understanding of the areas of strength and need but will create a clearer picture of next steps. These observations will allow each child's team to collaborate more effectively and will provide a common language for all adults that interact with the pupils.

- School participation checklist
- Participation in group work checklist
- Class participation checklist

School Participation Checklist: 4th – 8th Grade

Student: _____ Evaluator: _____ Date: _____
 Key: G = generalized; M = mastered; L = learning; N = not ready to learn; ✓ = the demonstrated skill level

Activity/Skill/Behavior	G=0	M=1	L=2	N=3	Comment
1. Responds to classroom rules appropriately					
2. Uses appropriate touch to others (peers and adults)					
3. Stays focused on teacher when appropriate					
4. Responds to individual instructions					
5. Responds to group and conditional directions					
6. Typical class routines are followed without cues (locates seat, gets materials out)					
7. Does not isolate, hangs out with peers					
8. Responds to conversation of peers, adults, or both (note in comment)					
9. Regularly initiates social interaction with peers					
10. Initiates conversation with peers, adults or both (note in comment)					
11. Work/activity completion rate is age-appropriate					
12. Waits patiently as appropriate to age group					
13. Stays in assigned work location (stays in line, stays with group or team)					
14. Conversations and topics discussed are age-appropriate					
15. Takes visual cues from other students; follows the lead					
16. Sings or recites in unison with a group (flag salute, song)					
17. Shares age appropriately (balls, games, snacks etc.)					
18. Asserts self appropriately when peer tries to take something or is teased					
19. Does not exhibit stereotyped behavior (no rigid routines, odd or intense habits/interests)					
20. Uses age-appropriate objects/equipment in a typical manner (balls, Game Boy etc.)					
21. Sustains attention to task for work					
22. Sustains focus on assigned (or chosen) leisure activity (specify assigned/chosen in comment)					
23. Appropriately follows PE exercises and imitates other gross motor physical skills					
24. Takes turns in activities with peers (waits and recognizes when it is his/her turn)					
Total the number of checks (✓) in each column Divide the Total by 24 to determine the percentage					
Percentage of Skills per Level					

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Project _____ Date _____

Participation in Group Work	Student Names											
The student												
• demonstrates attentiveness												
• shows appreciation for others' ideas												
• recalls relevant information												
• clarifies ideas												
• provides feedback												
• asks relevant questions												
• takes turns												
• contributes ideas												
• describes concepts												
• includes everyone												
• paraphrases												
• elaborates												
• criticizes ideas, not people												
• disagrees politely												

Group-Participation Checklist: Adapted from Grades 5 to 8 English Language Arts: A Foundation for Implementation (Marlboro Education and Training BLM-55).

Class Participation Checklist

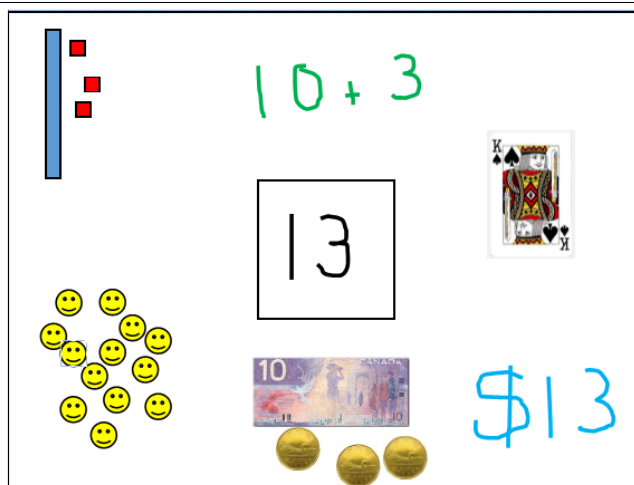
Assess student participation in the classroom by using observable student behaviour as a criterion. Put a ✓ beside the student's name in the column for the observed behaviour when it occurs.

Student Names												
Observable Behaviours												
Takes part in class or group discussions												
Asks questions												
Answers teacher and student questions												
Listens when student or teacher speaks												
Makes constructive or positive comments to other students												
Becomes involved in planned activities												
Avoids interrupting a lesson or student presentation												

Adapted from: Toronto District School Board. (1999). *Strategies and Tools for Planning, Assessment, and Evaluation*.

Grade 6 Sample Lesson Plans

Math
<p>Curriculum Reference: A1 demonstrate an understanding of place value for numbers greater than one million.</p>
<p>Learning Objective: To demonstrate understanding of place value to one thousand.</p> <p><i>(Introduction to place value to determine level of student understanding; to serve as planning guide for the unit of work.)</i></p>
<p>Social Goal for Q: <i>*This would be linked to an IEP goal.*</i></p> <p><i>I feel that social relationships and belonging is most critical for Q (and his peers) at this time. Kluth (2010) and Kagan & Kagan (2009) present many practical ideas for teachers to create conditions in a classroom that provide opportunities for building relationships and the skills necessary to maintain them. A meaningful social goal will be included in each lesson that will be connected to the needs of the student. Social skills will be explicitly taught to the class through role play, social stories and cooperative learning lessons.</i></p> <p>To take turns with his partner. Sharing his ideas and then listening to his partner when they share their ideas.</p>
<p>Success Criteria: ALL students must have 3 representations for each number and be able to show their partner their ideas. MOST students should work with numbers into the thousands with 3 or more representations for each number and take turns sharing and listening when showing their ideas. SOME students could work with numbers up to one million and show active listening (eye contact, body orientation, nodding) when their partner is sharing.</p>
<p>Lesson Content and Adaptations:</p> <ol style="list-style-type: none">1. Check baseline understanding of number by asking how many ways can you represent/show the number 13? (place value blocks, numerals, $12+1$, tally, \$13.00, etc.) Go through a few examples as a class, students using their whiteboards to show their thinking.



2. THINK-PAIR-SHARE: *Students THINK about what they know or have learned about the topic for a given amount of time. Each student should be PAIRed with another student. Students SHARE their thinking with their partner, discuss ideas, and ask questions of their partner about their thoughts on the topic (Kagan & Kagan, 2009).*

(Students will all receive explicit teaching of this learning structure, with role playing of each stage.)

Students will be given a set time (with a visual countdown timer on the SMART board) to record their own ideas. They will then share what they have done with a partner and will add to their own work as new ideas are introduced. Repeat with a few numbers, adjusting difficulty level as necessary.

3. Students will be given a challenge number (based on skill level shown during partner work) to represent with their partner using the same ideas practiced together.

Additional Adaptations for Q by:

- **Content**
If Q demonstrates he cannot yet be successful with three digit numbers, he can go back to one or two digit numbers as necessary until his instructional level is established. The success criteria would be adapted to include his functional level. As place value is very abstract, many visual representations of number will be provided throughout the lesson and unit, modelling as needed.
- **Process**
Q may require extra modelling in turn taking, sharing, listening and acceptable comments to make regarding his partner's ideas. A visual step-by-step (words and pictures) of the process (THINK-PAIR-SHARE) would be available and Q would be shown how to use the checklist to support his interactions. Allow Q to share his ideas first.
- **Product**
Providing manipulatives for Q to place on his paper rather than having him write/draw may support his demonstration of understanding. As Q likes using a computer, he could present his work on a laptop rather than paper. Q enjoyed representing his ideas with modelling clay in the previous year so this could also be an option.

Language Arts

Curriculum Reference:

C3 Write a variety of imaginative writing (poems) featuring well-developed ideas through the use of sensory detail.

Learning Objective: To make observations using all five senses to create a poem.

Social Goal for Q:

This would be linked to an IEP goal.

To use positive comments when sharing with his partner. (Provide phrases he could use and role play will have been carried out prior to using this with his peers).

Success Criteria:

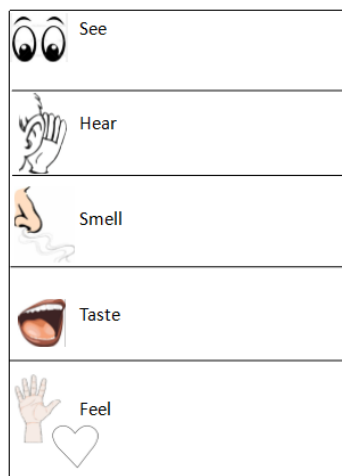
ALL students must make at least 1 observation for each sense.

MOST students should have more than 1 observation for each sense.

SOME students could include figurative language to describe each sense.

Lesson Content and Adaptations:

1. Read some example poems that use the senses for descriptions. Have students draw/ model/record any images that come to mind. Share with a partner.
2. Explain that we are doing a senses investigation to help with our poetry today. Take the class outside. Using their recording sheet, focus on each sense, one at a time. Children find their own space on the playground and look around them (see). Then they record on the sheet what they see Repeat this with the other senses.



3. Return to the classroom and share with a talk partner what they recorded.
4. Students use their observations to write a simple poem. (I see, I hear, etc.). Encourage use of word books for descriptive language.

Additional Adaptations for Q by:

- **Content**
Provide a copy of the poems being read on the SMART board or provide a copy for Q to look at as it is read.
- **Process**
Q could use the class camera to take a photo of what he sees/hears/feels etc. rather than writing his answers. He could also use the laptop to type his observations as he enjoys using the computer and is able to
- **Product**
Q could type his poem, following a template. A word book would be available for reference to assist Q in adding in adjectives to describe his observations. He could then post his poem to his blog page. (All students will have a blog to serve as a portfolio throughout the year.)

Health and Career Education

Curriculum Reference:

C1 describe the benefits of attaining and maintaining a balanced, healthy lifestyle, including the benefits of being physically active, healthy eating practices and an emotionally healthy lifestyle.

Learning Objective:

To identify the food groups and the correct portions for a child in grade 6 to have every day.

Goal for Q:

This would be linked to an IEP goal.

To give one star (positive comment) and one wish (something they could try to do differently next time) to a peer after listening to their presentation.

To listen to one peers star and wish on his own work without losing his temper. (This would only be included in the lesson with prior role play and modelling with Q.)

Success Criteria:

ALL students must identify each of the food groups.

MOST students should provide at least 2 examples of foods from each group.

SOME students could identify portion sizes and nutritional value for each food group.

Lesson Content and Adaptations:

1. Using the following website, children will investigate Canada’s Food Guide to determine what foods they should be eating and how much of each food group they should eat to be healthy.
http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/tour/food_guide-eng.php
2. Using the provided guiding questions, children will tour the food guide. To present their findings, children will create a summary (PowerPoint presentation, poster, story, menu, rap, collage) to share with the class.

Guiding questions: What are the food groups? Give at least 2 examples of foods in each food group. How much of each food group should someone your age eat every day?

3. Students will generate a star and a wish for at least 2 peers following their presentation. Brainstorm some examples of “good” star and wish comments and display these during sharing time. Model thoughtful comments to the students following each presentation.

Additional Adaptations for Q by:

- **Content**

As Q enjoys computers and is able to use this tool independently, he should not need any further content adaptations. The website is “child-friendly” with many visuals so Q should be able to access the information directly from the website.

- **Process**

Provide Q with a template to fill in (electronically) with the guiding questions. Teach Q how to take screen shots and to copy and paste images.

- **Product**

Allow Q to choose how he would like to represent his findings and support him in this choice (specific program features, shortcut keys, etc.)

References

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