AUTISM PROGRAM QUALITY INDICATORS

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_____   _____   _____
Administrative Unit   School Year   Evaluation Site/Student

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COLORADO DEPARTMENT *of* EDUCATION

Administrators, Educators, Parents and Support Staff,

There has been a significant rise in the number of students being identified with an Autism Spectrum Disorder (ASD), not only across our state but across the country. Special education and general education teachers and related service professionals are increasingly seeing students with ASD in their classrooms. Because ASD is a disorder with such a very broad spectrum the experiences and needs of students with severe forms of autism will be very different from those of learners with high functioning autism and Asperger Syndrome.

Just as the prevalence of ASD is increasing so too is information about how to teach and support these students. Some of this information is based on scientific and effective-practice methodology; some is not. Thus there is a significant need for application of educational methods that are most effective and that bode best for agreed-upon student outcomes. In this connection this document is intended to be a guide for teachers, principals, special education directors, superintendents and anyone with the responsibility of ensuring that students with ASD receive an effective and relevant education. The Quality Indicators may be used to evaluate the program provided for a single student or a classroom of students relative to ensuring that these students are provided a comprehensive and evidence-based program.

Relative to its intended use, this document was designed with multiple purposes in mind. A teacher may use it to evaluate a student's program to ensure that all recommended components are in place. Or it may be used by building principals to determine if the students with ASD in their building are receiving appropriate programming and if the staff has the resources and professional development assets needed to work effectively. These Quality Indicators may also be used by educational leaders, including superintendents, special education directors, Autism Team members, and so forth, to determine if systems are in place to support a high quality educational program.

Although the indicators are specific to the needs of children and youth with ASD they are built on the foundation of an overall strong and well designed special education program. Thus this document does not address generic program elements such as how to write an IEP, Response to Intervention, appropriate inclusion, and other standard special education service practices.

The development of this document is due to the efforts of:
The Colorado State Autism Task Force
Dr. Rich Simpson, University of Kansas
Consultants from the Colorado Department of Education, Exceptional Student Leadership Unit

Autism Quality Indicators
Rubric for Evaluation

Score	Domain	Indicator	Component
FI	Fully Implemented - Every **indicator** in the domain is implemented at the fully implemented level.	Every **component** of the **indicator** is fully implemented.	Every **aspect** of the **component** is fully implemented (in all settings within all curricula, with all staff members, and for all students).
PI	Partially Implemented – Every **indicator** is addressed with at least one indicator not at the FI level and no more than one indicator at the EI level. If more than one indicator is at the EI level, score EI	Every **component** is addressed with at least one **component** not at the FI level and no more than one at the EI level. If more than one component is at the EI level, score EI	Every **aspect** is addressed, with at least one **aspect** not at the FI level and no more than one item at the EI level. If more than one aspect is at the EI level, score EI
EI	Emerging Implementation – Not all **indicators** are addressed but at least one **indicator** is at the PI or FI level, AND no more than half of items are at EI; IF ALL ITEMS ARE EI, SCORE EI	Not all **components** are addressed but at least one is at the PI or FI level AND no more than half of items are at EI; IF ALL ITEMS ARE EI, SCORE EI.	Not all **aspects** are addressed but at least one is at the PI or FI level. AND no more than half of items are at EI; IF ALL ITEMS ARE EI, SCORE EI.
NI	Not Implemented – No evidence of **domain** being implemented. OR more than half of items are NI	No evidence of **indicator** being implemented OR more than half of items are NI	No evidence of **component** being implemented. OR more than half of items are NI

Domain = Six domains
1. **Individual Evaluation and Individualized Education Program**
2. **Curriculum, Instruction and Methodology**
3. **Review and Monitoring of Progress and Outcomes**
4. **Family Involvement and Support**
5. **Transition Planning**
6. **Behavior**

Indicators = each numbered item under the domain
Components = each lettered item under the indicator

INSTRUCTIONS:

Read each section, and begin scoring from the component level, then move on to indicator level, and finishing with the domain. Mark each box with a check mark to indicate the level of proficiency. Write NA if a section is not applicable. In the gray box, indicate with an X whether you observed (O) the item or the item was reported (R) to you by team members.

	FI	PI	EI	NI	O	R
INDIVIDUAL EVALUATION and INDIVIDUALIZED EDUCATION PROGRAM: Thorough diagnostic, developmental, and educational assessments using a comprehensive, multidisciplinary approach are used to identify students' strengths and needs. This evaluation leads to the development of a thorough and appropriate IEP.						
1) Evaluations are conducted by a multidisciplinary team comprised of qualified personnel who are familiar with the characteristics and response patterns of students with autism spectrum disorders. Evaluations use a variety of measures and sources of information including:						
a) appropriate standardized, developmental, and observational methods (e.g. WISC, PEP-R, BASC, Vineland, FBA)						
b) autism-specific measures (e.g. CARS, ADOS, GADS, ASDS)						
c) review and consider outside reports, records, testing (e.g. DSM-IV diagnostic report)						
d) parent and family input						
e) review of data on recent progress and present levels of performance (e.g. IEP quarterly progress reports)						
2) For both verbal and nonverbal students, speech and language evaluations use standardized measures, parental report, observation, and spontaneous language samples to assess:						
a) receptive language (i.e. CELF-4, PLS-4, Mullens)						
b) expressive language (i.e. CELF-4, PLS-4, Mullens)						
c) use of symbol systems (i.e. INCH by PRO-ED, objects, photos, tangible symbols, picture communication symbols, sign, writing)						
d) speech production						
e) use of people as means to ends (i.e. engages people to gain desired objects, people actions, joint attention, initiation)						
f) use of immediate or delayed echolalia for communicative function						
g) problem solving (i.e. TOPS)						
h) pragmatic functions (i.e. Communication Matrix by Rowland, opportunities to request throughout the day, comment about the events, protest, brag, question)						
3) Academic access is linked to students' strengths and needs, identified by evaluations conducted by a multidisciplinary team comprised of qualified personnel. Evaluations use a variety of measures and sources of information including:						
a) appropriate standardized measurement (i.e. CSAP, NWEA)						
b) curriculum based measurements						

		FI	PI	EI	NI	O	R
	c) executive functioning (i.e. organizing, planning, prioritizing)						
	d) utilizing or considering area of particular interest or intense focus						
	e) excessive rigidity or concreteness of thinking						
	f) scheduling (i.e. material, order, peers, staff)						
4)	Social Interaction of students is assessed through formal and informal observations and is targeted for improvement through:						
	a) direct instruction specific to ASD need (i.e. 1:1, small groups)						
	b) addressing social code of conduct (i.e. hidden curriculum taught in 1st hour, respect personal bubble space)						
5)	Behavior and emotional development is assessed by qualified personnel and specific strategies are in place, including:						
	a) Use of self-regulation and coping skills taught (i.e. Incredible 5-Point Scale)						
	b) Use of emotions receptively and expressively						
6)	Other relevant information is identified and addressed in individualized programming, such as the following:						
	a) Sensory needs (i.e. Sensory Profile)						
	b) Co-Morbid Disorders (e.g. OCD, ADHD, Bi-Polar, Seizure, Anxiety, Depression)						
	c) Motor needs (i.e. hand writing and other fine motor tasks, gross motor awkwardness)						

COMMENTS:

		FI	PI	EI	NI	O	R
	CURRICULUM, INSTRUCTION and METHODOLOGY: The programming is based on evidence or research-based curriculum, instruction, and methodology that address the significant skill deficits of students with autism spectrum disorders in least restrictive environments. Additionally, the programming is individualized and linked to state standards and access skills. Decisions regarding curriculum changes/modifications are based on reliable/consistent data-collection methods. The programming provides a variety of developmental, functional and age appropriate activities and experiences.						
1)	Curriculum focuses on maximizing appropriate independent functioning in home, school, vocational, and community settings.						
2)	Curriculum emphasizes (when applicable for pre-k-21) the development of skills across multiple domains, including:						
	a) communication and language (i.e. functional communication, pragmatics, conversation, perspective taking)						
	b) social relationships						
	c) symbolic play, imagination, and creativity						
	d) self-regulation and self-monitoring						
	e) academic skills to meet the content standards and address the expanded benchmarks						
	f) vocational skills						
	g) self-determination skills						
3)	With respect to communication, curriculum emphasizes the development of a functional communication system (expressive and receptive) for students who are nonverbal or have emerging verbal skills.						
4)	With respect to social relationships, curriculum emphasizes the development of social interaction skills with adults and peers for a range of occasions and environments.						
5)	Curriculum focuses on the maintenance and generalization of learned skills within ongoing and natural routines in natural environments (e.g., home, school, vocational and community settings).						
6)	Progress monitoring is used to drive instruction and is based on reliable and consistent data-collection.						
7)	Instruction includes:						
	a) opportunities for initiating and responding to communication throughout the day (e.g., PECS book in History and Choir)						
	b) activities that are appealing and that incorporate students' areas of interest						

		FI	PI	EI	NI	O	R
	c) meaningful, active engagement of the students						
	d) focus on foundational skills before more complex skills						
	e) activities are embedded within ongoing and natural routines of home, school, vocational and community settings, and are designed to promote generalization of knowledge and skills						
	f) education in the general education environment with typical peers whenever possible and appropriate						
8)	A variety of instructional formats, such as direct instruction, small group instruction, student-initiated interactions, teacher-directed interactions, play, and peer-mediated instruction, are utilized.						
9)	Instruction takes place in the general education environment with typical peers to the extent appropriate.						
10)	As instruction proceeds, an effort is made to teach students to cope with the distractions, disruptions and changes in routine that are an inevitable part of daily living.						
11)	Instructional activities are appropriately paced to eliminate unnecessary "break-time, free-time", by keeping students actively engaged.						
12)	Environments are initially simplified, as needed, to help students recognize relevant information (area is free of distractions –visual and auditory, and activity areas are clearly labeled and identifiable, etc.)						
13)	Classrooms have defined areas that provide clear visual boundaries for specific activities.						
14)	Environmental supports (e.g., the use of visual schedules) are provided that facilitate the students' ability to:						
	a) predict events and activities						
	b) anticipate change						
	c) understand expectations						
	d) conceptualize the beginning and end to an activity, class, school day, etc.						
	e) transition to new events, activities, and environments in a calm and safe manner						

COMMENTS:

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REVIEW AND MONITORING OF PROGRESS AND OUTCOMES: Relative to the needs of students with ASD, ongoing and systematically collected and monitored student achievement data are used to make decisions regarding educational programming.						
1) The programming provides regular and ongoing developmental and academic assessment of each student's progress on his/her specific IEP goals and objectives. Written data are gathered reliably and consistently on a frequent (daily or weekly) and consistent basis and utilized as a means to inform and guide instruction.						
2) Progress monitoring is used for the following reasons:						2)
a) to identify objectives that have and have not been achieved						
b) to document when progress is and is not observed after an appropriate trial period						
c) to target objectives that have and have not been achieved after an appropriate trial period						
d) to note if there is and is not an unexpected change in a student's behavior or health status						
e) to document significant changes that occur in the home, school, vocational, or community setting						
f) to record when progress is and is not being maintained/generalized						
g) to document regression						

COMMENTS:

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FAMILY INVOLVEMENT AND SUPPORT: Parents/guardians are recognized and valued as full partners in the development and implementation of IEPs for children with ASD.							
1)	Parents/guardians and family members are supported as active participants in all aspects of their child's ongoing evaluation and education.						
2)	The program makes available services, which:						
	a) provide parents/guardians with information about child development, and/or specific instructional strategies being utilized in the classroom						
	b) assist parents/guardians to understand the needs of their child						
	c) foster coordination of efforts between school and home (daily communication system)						
	d) provide parent opportunity for training to support the family (i.e. behavior management strategies, use of visual structures, identifying professional resources)						
3)	Parents/guardians are provided with information about educational conferences, workshops, support groups, etc.						
4)	Parents receive regular (daily or at minimum, weekly), comprehensible and accessible communication from the service providers regarding their child's progress (data showing updated progress/regression on goals/objectives is consistently shared throughout the year). Parents' observations and questions are sought and responded to in a timely manner and on a regular basis.						
5)	Parents are assisted in accessing services from other agencies (when available and as appropriate) such as respite, in-home behavior support, home health care, transportation, CCB,etc.						
6)	The program develops links with different community agencies that provide the comprehensive services often needed by students with autism spectrum disorders. Collaboration and communication with outside service providers is evident.						
7)	The multidisciplinary team (which includes the parents) helps to determine which IEP goals/objectives will be generalized to home. Likewise, a relevant timeline for implementation is developed, taking into account the environmental barriers, such as work schedules and limited access to materials, which may exist in the home.						
8)	The program assists parents in defining their child's outside-of-school needs, such as respite, in-home behavior support, home health care, transportation, etc. Assistance is provided to parents in determining and aligning parent/home needs with students' academic needs.						

COMMENTS:

		FI	PI	EI	NI	O	R
TRANSITION: *A coordinated set of activities for a student, designed within an outcome oriented process that promotes movement from school to post-school activities (IDEA)*. Relative to ASD, parents/guardians, professionals and students work collaboratively in planning transitions from one activity to another or one environment to another.							
1)	Transition planning:						1)
	a) begins while students are in their current educational placements						
	b) provides the students and families with the opportunity to visit the new setting (i.e., meet teachers, view classrooms and/or new environments)						
	c) is a collaborative effort between the two settings						
2)	Planning integrates considerations of future environments with the students' current program.						2)
3)	Planning includes teacher preparation, ongoing professional development and other supports to ensure success of the students in the new environments so students' programming moves from level to level.						
4)	Self-determination skills are taught to the students so they advocate for themselves in new and continuing environments. Students are taught self-advocacy skills in order to lead their own IEP meetings or participate to the greatest extent possible (i.e. presenting their own strengths and interests and/or summarizing goals from their previous years).						
5)	Post-school goals are identified by and/or for the students, and comprehensive transition plans are developed for progress toward those goals as early as possible, but no later than the age of 15 or the end of 9th grade (or earlier if deemed appropriate by the IEP team).						
6)	Comprehensive transition plans, including appropriate measureable postsecondary goals, annual goals that are based upon age appropriate transition assessments, transition services, including courses of study, that will reasonably enable the students to meet their postsecondary goals, are developed and utilized with all students beginning with the first IEP developed when the child is age 15 but no later than the end of 9th grade (or earlier if deemed appropriate by the IEP team).						
7)	Students transitioning to adulthood are connected with post-school agencies at least one year prior to completing school.						

COMMENTS:

	FI	PI	EI	NI	O	R
BEHAVIOR: Relative to the students with autism spectrum disorder, positive behavior intervention supports are used to address challenging behavior.						
1) The program has a school-wide positive behavior support system that:						
a) defines expectations for appropriate behavior in all instructional settings						
b) uses proactive approaches to managing behavior						
c) has established strategies for crisis intervention						
d) provides training for staff in recommended behavioral strategies						
2) A Functional Behavior Assessment (FBA) is used to direct intervention planning for persistent challenging behaviors, from which a Behavior Support Plan (BSP) is developed.						
3) Multiple methods (e.g., direct observations, functional assessment, rating scales – parent, teacher, student, and interviews) are used in conducting the FBA.						
4) The FBA identifies both immediate (e.g., request to perform a task) and more distant (e.g., poor sleeping habits) factors that increase challenging behaviors.						
5) The FBA identifies and tests one or more hypothesized functions for the challenging behaviors; and based on the findings of hypothesis testing a suitable intervention plan is designed and implemented.						
6) Behavioral goals focus on increasing positive behaviors/interactions instead of exclusively decreasing undesirable behaviors.						
7) Environmental accommodations and adaptations are used to prevent or minimize occurrences of the problem behavior.						
8) Instruction in replacement behaviors, self-monitoring and cognitive based methods (i.e. story-based interventions, cognitive behavior management, self-advocating) is routinely incorporated into behavior support plans.						
9) Reinforcement is based on positive supports and strategies that are determined by the individual students' needs and preferences.						
10) A reinforcement inventory is used and regularly updated to identify motivating items and activities.						
11) A clear data collection system is established within the BSP to monitor progress toward increasing positive behavior, as well as a timeframe for determining progress.						
12) Behavior support plans focus on long-term outcomes (e.g., making new friends, participating in extracurricular activities, self-determination).						

COMMENTS:

Autism Spectrum Disorders Quality Program Indicators