

Autism Outreach Policy		DATE APPROVED	June 2017
BRANCH/DIVISION:	Children’s disABILITY Services (CDS)/ Community Service Delivery	APPLICABLE TO	Children’s disABILITY Services
RESPONSIBLE AUTHORITY:		NEXT REVIEW DATE	
	ADM, Community Service Delivery Department of Families	DATE REVIEWED:	March 31, 2019
POLICY OWNER:	Director, CDS	DATE REVISED	Date as applicable

1.0 POLICY STATEMENT

Children’s disABILITY Services supports families raising children with developmental or lifelong physical disabilities, to meet the additional needs they may have.

The Autism Outreach service utilizes individualized and naturalistic teaching strategies to improve the developmental outcomes of children diagnosed with autism spectrum disorder (ASD). Intervention methods are individualized to the unique needs and abilities of each child and are implemented in natural settings where the child lives, learns and plays.

2.0 BACKGROUND/CONTEXT

Parent and family involvement is considered best practice in early autism intervention and is the key to achieving successful outcomes with Autism Outreach. The goal of Autism Outreach is to improve developmental outcomes for preschool aged children diagnosed with ASD, primarily in social, emotional, communication and behavioural domains.

Autism Outreach approaches this goal by providing a consultative service model where staff train parents and caregivers in the methods of evidence-based autism interventions. Autism Outreach emphasizes a family-centred approach where parents and caregivers are supported to have the primary role in the intervention and priorities and strengths of families are incorporated in the development of their child’s service plan. Autism Outreach staff work closely with therapy professionals, early childhood educators and other caregivers involved with the child and family to deliver a comprehensive service plan.

3.0 PURPOSE

The purpose of Autism Outreach is to optimize developmental outcomes of preschool-aged children diagnosed with ASD by providing families and caregivers with assessment, consultation, education and hands-on training. Skills and knowledge are transferred to parents and caregivers through teaching, modeling, coaching and constructive feedback.

4.0 DEFINITIONS

AUTISM OUTREACH STAFF: Individuals involved in the direct delivery of Autism Outreach services. This includes Autism Specialists, Autism Early Intervention Specialists, Child Development Specialists and Child Development Workers.

AUTISM SPECIALISTS: Refers to both Autism Specialists (Winnipeg) and Autism Early Interventions Specialists (Rural and North), who lead the delivery of Autism Outreach services.

CHILD DEVELOPMENT STAFF: Refers to both Child Development Specialists (Winnipeg) and Child Development Workers (Rural and North), who deliver Child Development services, and who work in partnership with Autism Specialists to deliver Autism Outreach.

INDIVIDUALIZED DEVELOPMENT PLAN: A written plan guiding the delivery of Autism Outreach services for the family, other caregivers and service providers. The plan includes information on the specific intervention strategies to be used, time-specific goals intended to be reached and outcome measures to track progress and success.

5.0 POLICY

5.1 ELIGIBILITY

Preschool children (age six and under) who are open to Children’s disABILITY Services with a diagnosis of ASD may receive support from Autism Outreach based on their assessed need.

Children cannot be enrolled in both Autism Outreach and St.Amant Autism Programs at the same time.

Eligible children in the care of a Child and Family Services (CFS) agency may access Autism Outreach services through Children’s disABILITY Services, subject to program availability.

5.2 SERVICE LOCATION

Autism Outreach visits take place in the child’s natural environment (e.g. home, child care facility, nursery school). Initial visits should ideally take place in the home. If the child attends a child care facility, interventions should occur at the facility as soon as appropriate in order to encourage socialization and play skills.

5.3 INITIAL ASSESSMENT

The Autism Specialist will arrange an initial meeting with the family to discuss the service. At the initial meeting, the parameters of the service are defined including content, intensity, and the roles and expectations of those involved. Ideally, in two parent families, both parents are present at the initial meeting and assessment.

The purpose of the initial assessment is to allow the Autism Specialist to assess the needs and abilities of the child. For preschool children, this includes their ability to engage in play with objects and persons, self-regulate mood and attention, form an attachment with a caregiver, communicate with others and express feelings and ideas through play.

Autism Outreach uses a family-centred approach. Parents identify goals, priorities for their child, and behaviours that impact family functioning and that require improvement before further developmental areas are addressed (i.e. sleeping habits, challenging behaviors etc.).

When possible, the assessment and individualized development plan will acknowledge the recommendations and input from the family, physiotherapist (PT), occupational therapist (OT), speech and language pathologist (SLP), Child Development staff, Community Services Worker (CSW) and other designated team members involved with the child. Autism Outreach services should be planned in a way that best compliment the recommendations of other professionals and avoid overlap or conflict between roles.

INTERVENTION:

Following the initial assessment, the Autism Specialist prepares an individualized development plan outlining prioritized learning goals and teaching strategies. When services begin, the Autism Specialist may make up twelve visits with the child and family/caregivers over a 3-4 month period following enrollment. Additional visits may be provided as required by programming. The frequency and duration of visits may be adjusted to

accommodate for the travel time required to make a visit. In these cases, Autism Outreach staff will endeavor to deliver the most consistent level of service possible.

After the Autism Specialist consultation period, Child Development staff may take the lead role in service delivery, while seeking input and direction from the Autism Specialist as necessary. The Autism Specialist and Child Development staff review with parents opportunities to practice the techniques being taught in their natural, day-to-day routines. Parent and caregivers are expected to continue working with the child between visits to achieve the child's development goals.

EVIDENCE-BASED INTERVENTIONS AND CURRICULUM:

Autism Outreach places emphasis on implementing evidence-based autism interventions based on relevant scientific literature. Research on ASD is constantly being updated and adding new information to our existing knowledge of effective interventions for children diagnosed with ASD. The Autism Specialist may draw upon a combination of evidence-based interventions based on the child's individual strengths and needs as well as the goals identified by the family.

Examples of interventions that may be included as part of an individualized development plan include:

- Developmental/relationship based interventions;
- Naturalistic developmental behavioral interventions;
- Joint attention interventions; and
- Modeling.

EDUCATION AND CAPACITY BUILDING:

Where available, families are encouraged to attend educational seminars presented by Autism Outreach staff. Seminars are presented on topics including general information on autism, sensory issues, communication, social development and behaviour management. Seminars help families and caregivers to further their understanding of ASD and to learn about best practice strategies for approaching the ongoing development opportunities and challenges that a child may present.

5.4 TRANSITION PLANNING

TRANSITION INTO CHILD CARE:

Autism Outreach staff participate with the family, other caregivers and therapists in the child care facility intake meeting. Review meetings may also be attended when possible.

TRANSITION INTO SCHOOL:

Autism Outreach staff are available to participate as part of the school support team during the student-specific planning process, both at intake and follow-up meetings. Autism Specialists are available to provide follow-up consultations to the child's school during the kindergarten year (consultations may be limited to the first half of the kindergarten year, based on available resources). Follow-up consultations are provided to resource teachers, classroom teachers, therapy staff or education assistants on request by the school, or on request by parents with the consent of the school.

5.5 WAITLIST

Enrollment in Autism Outreach is based on the date of referral. Children may be assigned at regular intervals (e.g., three times per year) or as referred, depending on service capacity. Children on the waitlist for Autism Outreach are eligible to receive Child Development services prior to receiving Autism Outreach services.

Children can be on the waitlist for both Autism Outreach and St.Amant Autism Programs. However, children cannot be enrolled in both Autism Outreach and St.Amant Autism Programs at the same time.

Families may defer their spot in Autism Outreach for a three-month period, after which point a decision must be made by the family when a spot in Autism Outreach is again offered.