

MACMHB

State Training Guidelines Workgroup

Training/Curriculum Recommendations

The intent of this Training Guideline is for the development and presentation of training content. Curricula based on this guideline will contribute to statewide training quality, uniformity, and reciprocity.

Topic: *Autism Spectrum Disorder (ASD)*

Defining Paragraph (Vision, Boundaries, Overall Outcome Statement):

Given the rise in the occurrence and statewide awareness of Autism Spectrum Disorders (ASD), the purpose of this course is to provide the Direct Support Professional the knowledge and skills to work with a person diagnosed on the Autism Spectrum.

Definitions:

Content – These are a listing of the areas covered in the subject.

Outcomes/Competencies – These are statements about what participants will be able to do as a result of having participated in the course.

Outline – A suggested approach to meeting Outcomes/Competencies.

These three are interrelated, but not necessarily a one-to-one relationship.

Content:

1. What is Autism Spectrum Disorder (ASD) (including co-occurrence)
2. Myths associated with ASD
3. Common terminology associated with ASD
4. How is ASD diagnosed – diagnosis information and causes
5. What is the occurrence of ASD
6. Common characteristics of persons with ASD
7. What is the impact of ASD
 - a. On individuals with ASD (independence, challenges, etc.)
 - b. On families
 - c. On schools/communities
 - d. On staff working with individual
8. Brief introduction/overview to Evidence Based Practices (EBP) in ASD (including, but not limited to):
 - a. Behavioral Interventions (i.e. imitation, chaining, prompting, positive reinforcement, reinforcement schedules, modeling, video-modeling)
 - b. Naturalistic Teaching Strategies (i.e. child directed, incidental

- teaching, milieu teaching)
- c. Parent and Peer Training
- d. Pivotal Response Treatment
- e. Schedules
- f. Self-Management
- g. Story-based Interventions
- 9. How to support a person with ASD
 - a. Commonalities (communication and relationship skills, etc.)
 - b. Unique considerations (transitions, structure, predictability, sensory issues, data collection, etc.)
 - c. Working as a team with other professional

Outcomes/Competencies:

1. Describe Autism as a neurological/developmental disability and some of the characteristics along the spectrum
2. Recognize and respond to some of the common behaviors and/or responses of persons with ASD
3. Identify important factors in supporting persons with ASD
4. Distinguish between myth and reality regarding ASD
5. List strategies for how to support family structures living with ASD
6. Describe the process of building meaningful relationships with persons with ASD
7. Recognize how someone with ASD may perceive environments and relationships
8. Describe Direct Support Provider's role in the implementation of Evidence Based Practices

Outline/Recommendations:

1. What is Autism Spectrum Disorder (ASD) (including co-occurrence)
 - a. Definition
 - b. Occurrence of ASD
 - c. How is ASD diagnosed – diagnosis and causes
 - d. Common terminology
2. Myths associated with ASD (some common myths may include)
 - a. Don't want relationships
 - b. Caused by vaccines
 - c. Don't touch
 - d. Lower intellect
 - e. Everybody has a special skill
 - f. Lack language or communication skills
 - g. And others

3. Common characteristics of persons with ASD (common items may include)
 - a. Sensory
 - b. Communication
 - c. Social
 - d. Structure and order
 - e. Concreteness and specificity
 - f. And others
4. What is the impact of ASD
 - a. On individuals with ASD
 - i. Perceptions of the world
 - ii. Relationship with the world or others (fitting their organized world into our less structured world)
 - iii. Communication
 - iv. What a social relationship looks like—awareness, interpretation, and expression of social cues
 - b. On families
 - c. On schools/communities
 - d. On staff working with individual
5. Brief introduction/overview to EBP in ASD
 - a. Definition of Evidence Based Practice
 - b. EBP currently in use in Michigan (including, but not limited to):
 - i. Behavioral Interventions (i.e. imitation, chaining, prompting, positive reinforcement, reinforcement schedules, modeling, video-modeling)
 - ii. Naturalistic Teaching Strategies (i.e. child directed, incidental teaching, milieu teaching)
 - iii. Parent and Peer Training
 - iv. Pivotal Response Treatment
 - v. Schedules
 - vi. Self-Management
 - vii. Story-based Interventions
6. How to support a person with ASD
 - a. Commonalities (communication and relationship skills, etc.)
 - b. Unique considerations (transitions, structure, predictability, sensory issues, data collection, etc.)
 - c. Working as a team with other professionals

Trainer Qualifications:

Check all that apply, be specific (years, degree, skills, etc.):

- ☒ College Degree: Qualified trainer with education in human or social services preformed Preferred
- ☐ License:
- ☒ Years' Experience (please specify below):
- ☒ Documented Skill Set: Training, experience or expertise in ASD and behavioral health
- ☒ Training Experience: Prefer one-year experience or guidance from Professionals listed above
- ☒ Trainer in Adult Learning Styles/Methods:
- ☐ Other:

Specified experience:

Access to consultation with a certified behavior analyst (BCBA) or a professional with a master's degree in a mental health-related field from an accredited institution who is trained and has one-year of experience in the examination, evaluation, and treatment of children with ASD with extensive knowledge and training in behavioral analysis. Extensive knowledge is defined as having taken documented course work at the graduate level at an accredited university in at least three of six following areas:

- 1) Ethical considerations
- 2) Definitions & characteristics and principles, processes & concepts of behavior
- 3) Behavioral assessment and selecting intervention outcomes and strategies
- 4) Experimental evaluation of interventions
- 5) Measurement of behavior and developing and interpreting behavioral data
- 6) Behavioral change procedures and systems supports

Length of Training:

2-3 hours for Instructor Led
1.5- On-line

Format:

The acceptable format(s) for the class:

- ☒ Blended Learning (Online + Instructor-Led)
- ☒ Instructor-Led Class
- ☒ Instructor-Led Webinar
- ☒ Online Course
- ☐ Other (specify):

Teaching Methods:

These are the best teaching methods for teaching course content. Additional methods may also enhance learning.

- ☒ Individual
- ☒ Classroom/Group
- ☒ Lecture
- ☒ Group Discussion
- ☒ Skills Practice
- ☐ Return demonstrations
- ☒ Activities
- ☒ Videos, supplemental to other teaching methods
- ☒ Online Activities
- ☒ Individual Assignments
- ☒ Homework assignments
- ☐ Case Study
- ☐ Other (specify):

Method of Assessment:

How to measure entry-level competency in this course.

- | | | |
|-------------------------------------|----------------------|----------------------------|
| <input checked="" type="checkbox"/> | Written Test | Performance Indicator: 80% |
| <input type="checkbox"/> | Return Demonstration | Performance Indicator: |
| <input checked="" type="checkbox"/> | Online Test | Performance Indicator: 80% |
| <input type="checkbox"/> | Skill Sheet | Performance Indicator: 80% |
| <input type="checkbox"/> | Other: | |

*Online Test encompasses Review questions anchored within the training and/or an online test after the class

Scope of Implementation:

Training recommended for:

- ☐ Specialized Residential direct care staff/home managers
- ☐ Specialized Residential Administrators
- ☐ Community Living Supports (CLS)

- ☐ Pre-Voc Skill Building / Supported Employment (i.e. Competitive Employment, volunteer)
- ☐ Non-Voc Skill Building
- ☐ Supported Living staff
- ☐ Adult Foster Care staff
- ☐ Respite Service staff
- ☐ Self-Determination staff
- ☐ In-Home service staff (children's program)
- ☐ Foster Family Group Home staff
- ☐ Child-caring Institutions (Children's Group Home) staff
- ☒ As identified in the Individual's Person Centered Plan
- ☐ Other employee group (specify):

Frequency:

It is recommended the content be reviewed/retaken.

- ☒ Initial & as needed
- ☐ Initial & Annual
- ☐ Initial & Every two (2) years
- ☐ Initial & Every three (3) years
- ☒ As directed by the Individual Plan of Service
- ☒ As needed:
- ☐ Other:

Additional Comments:

This topic information could be used as a standalone course to further DSP knowledge. It could also be incorporated into other curriculum guides (such as Philosophy & Current trends, Intro. to Human Services, Health, Safety & Wellness, etc.)

References/Legal Authority:

<http://www.gvsu.edu/autismcenter/>
<http://www.autismspeaks.org/>
 Michigan Autism Spectrum Disorders State Plan, December 2012
 National Professional Development Center on Autism Spectrum Disorders at
<http://autismpdc.fpg.unc.edu/>
<http://www.michigan.gov/autism>
 Autism Alliance of Michigan – <http://autismallianceofmichigan.org>
 National Standards Project - <http://www.nationalautismcenter.org/national-standards-project/>

Centers for Disease Control - www.cdc.gov/autism

- 1) R 330.1801 et. seq.
- 2) MCL 400.710(3)
- 3) HIPAA
- 4) Mental Health Code
- 5) Prevailing State Guidelines and Practice Protocols

Note: If training is for an adult foster care, facility/home adult foster care staff must also comply with the adult foster care administrative rules. In addition, in those situations where the contents of the training conflict with an administrative rule, the rule prevails.