THE P.L.A.Y. PROJECT



INTENSIVE WORKSHOP ONLINE PACKET

WWW.PLAYPROJECT.ORG

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TRACK 1

For all professionals and parents – anyone who simply wants to learn more about The PLAY Projects methods, principles, techniques and activities

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For all professionals and parents



Start here! Course Syllabus



Hello and Welcome Aboard The PLAY Project's Intensive Workshop Train!

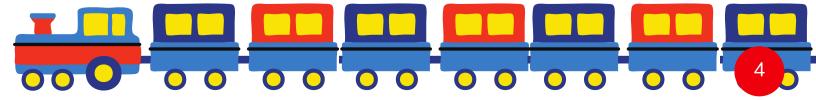
We use the train in our logo and train terminology (and jokes!) in this online course because we know that children with autism spectrum disorders are on a developmental track through the landscape of life. We invite you to get 'on board' and take this train through the various PLAY Project destinations (Tracks & Enginehouses--see below) to help the child with ASD reach their full social and emotional potential.

My name is "Dr. Rick" Solomon, the medical director and founder of The PLAY Project (and the engineer on this train!). As a developmental and behavioral pediatrician, I have worked with children who have autism spectrum disorders and their families for over 30 years. I founded The PLAY Project to support families and train child development experts to help children with autism make real progress! Children, including children with autism, learn best through play in the natural environment of the home. The secret is knowing how to engage the child in a playful way that promotes development—the main learning goal of this online course.

The syllabus below is your 'ticket' to all information you need to get oriented to the PLAY Intensive Workshop Online. All aboard! We hope that The PLAY Project's Intensive Workshop journey will be an enjoyable learning experience that empowers caregivers of children with ASD as well as the wonderful professionals who are dedicated to the children and their families.

On behalf of The PLAY Project team, we are excited to have you on board!

Sincerely,
"Dr. Rick"
Richard Solomon,
MD Medical Director



A Note from the PLAY Project:



The neurodiversity affirming perspective is the idea that individuals have differences in their abilities in how they interact with the world around them. These differences are accepted as natural rather than "deficits" or "disorders" to be "fixed". The PLAY Project fully supports this perspective by accepting the child exactly where they are at developmentally, with the understanding that growth must occur, and skills need to develop for the child to be successful in a shared social world. In our model, PLAY Project Consultants are trained to understand, and coach caregivers to understand, how a child interprets and responds to input from all sensory modalities, how to follow the child's lead and build on the child's interests with the ultimate goal of establishing a joyful relationship with others. It is our wholehearted belief that ALL children, through early and intensive intervention, can reach their full potential, which will be unique for every individual.

The PLAY Project understands that much of the autistic adult community wishes to use identity first language. The PLAY Project also supports parent wishes by using person first language. Many children receiving PLAY have not been diagnosed while others, after often years of intervention, no longer meet criteria for the diagnosis. Therefore, you will notice that both forms of language, when appropriate, are used by The PLAY Project Organization. Please accept our apologies for any outdated language or content in the course. We are evolving! We are making efforts to improve our training materials as research and the cultural aspects of the autism community progress.



Course Outline









Track 1 is for all parents and professionals:

- Track 1 Enginehouse 1: Introduction to The PLAY Project Model
 - o Introduction to the intensive workshop by Dr. Rick
 - Run time: 30 minutes
 - 'Welcome to The PLAY Project' an overview of 'The 7
 Circles of The PLAY Project' where you will learn PLAY
 principles, methods, techniques, and activities.
 - Run Time: 120 minutes
- Track 1: Enginehouse 2: Video Cases Studies and Analysis by Dr. Rick
 - Introduction by Dr. Rick
 - Run time: 10 minutes
 - o FDL 1-3 Case Studies
 - Run Time: 100 minutes
 - Jamie Case Study Videos
 - Run Time: 100 minutes
 - FDL 4-6 Case Studies
 - Run Time: 60 minutes





PLAY IWO Course Instructors:

- Richard Solomon, MD, Medical Director
- Shana Wirth, MA, LPC, Training Director, Certified PLAY Project Consultant

Technical Help Contact Information:

- Primary contact: makena@playproject.org or call 734-219-5037
- Secondary contact: help@playproject.org or call 734-585-5333

Please note: This workshop is supported on Windows, Mac, and Linux only. Mobile devices such as smartphones, iPads/tablets or iOS systems are not currently supported.

<u>Important Dates/Links:</u>

Course opening date:

February 7th, 2024

Course close date:

February 28th, 2024

Course Link: https://playproject.curatr3.com/courses/intensive-workshop-online-feb-24

Live Session dates/times (please note time zone):

- 1) Tuesday, February 20th, 2024 12:00-1:00 PM Eastern Time
- 2) Monday, February 26th, 2023 12:00-1:00 PM Eastern Time

TO JOIN LIVE SESSIONS PLEASE SEE BELOW:

Live Session #1 - Tuesday, February 20th

Join Zoom Meeting

https://us06web.zoom.us/j/83574470032?pwd=a0tYTVZ3dVovNjhsZzY2aThRY0ZoQT09

Meeting ID: 865 0389 6891 Passcode: PLAYFEB24

Live Session #2 - Monday, February 26th

Join Zoom Meeting

https://us06web.zoom.us/j/83574470032?pwd=a0tYTVZ3dVovNjhsZzY2aThRY0ZoQT09

Meeting ID: 834 7034 6370 Passcode: PLAYOCT23



Course Syllabus



Course tutorials:

Topics include: Downloading Materials, Levels and Modules, Course Progress and Completion and Audio. The tutorial folder can be found in the Vimeo folder here.

PLAY IWO Materials:

Before you start the course, please download the following materials from Level 1 of the course. A brief Downloading Materials tutorial can be found here. You can learn more about course Levels and Modules in the tutorial here.

- PLAY Project Intensive Workshop Online Packet
- Child profile
- Glossary
- · Objectives of the course

Course Objectives:

- Explain the 7 Circles of PLAY and how they relate to the PLAY Autism Intervention Program when working with children with ASD
- Define intensive autism intervention, including interventions that are categorized as play-based, developmental, and behavioral
- Identify techniques that help improve language, social skills, behavior, development, and play skills of children with autism
- Participants will gain an understanding of Greenspan's 6 Functional Developmental Levels (FDLs) and how they relate to The PLAY Project Autism Intervention
- Identify the behaviors and symptoms of children who have sensory processing challenges
- Describe how a child's unique profile is created and develop a plan to improve the child's social interactions based on this profile
- Identify developmental progress and PLAY Project methods & techniques through the review of video case studies
- Participants watch evidence-based strategies, through case study videos, that promote engagement. Participants will take a post-test to show what they have learned
- Participants practice developing a child profile, after watching a case study video.
 Participants receive digital handouts that they can use to further practice these skills with children and families
- *Learning outcomes will be assessed through a PLAY Project self-evaluation posttest



Course Syllabus



IWO Course Sections, Run Times, and Live Sessions

This course has 3 Tracks and 2 live sessions.

- Total run time for Track 1: 7 hours
 - Live Session 1: 1 hour
 - Live Session 2: 1 hour
- Total run time for Track 2: 1 hour
- Track 3 is a short form that includes the post-course requirements.

Track 1 is for all parents and professionals:

- Track 1 Enginehouse 1: Introduction to The PLAY Project Model
 - Introduction to the intensive workshop by Dr. Rick
 - Run time: 30 minutes
 - 'Welcome to The PLAY Project' an overview of 'The 7 Circles of The PLAY Project' where you will learn PLAY principles, methods, techniques, and activities.
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 - Introduction by Dr. Rick
 - Run time: 10 minutes
 - FDL 1-3 Case Studies
 - Run Time: 100 minutes
 - Jamie Case Study Videos
 - Run Time: 100 minutes
 - FDL 4-6 Case Studies
 - Run Time: 60 minutes

Track 2 is for professionals seeking to become PLAY Project Consultants and is 1 hour total.

- Track 2: Enginehouse 3: Certification Orientation
- Track 2: Enginehouse 4: Roles of The PLAY Project Consultant
- Track 2: Enginehouse 5: Working with families who need special supports.

Track 3 includes the Activity Submission Gate with post-course requirements. **This track needs to be completed to receive a certificate of participation.**



Online Forum / Discussion:

The online <u>discussion column</u> refers to the space to the right of the slide when viewing the course. The discussion column will be monitored closely, and your comments and questions will be noted and responded to during the IWO. Since each of you brings a unique background and set of experiences to this class, online class participation through the discussion column is an important part of the learning process.

Live Session Information:

The IWO has two general live sessions:

- **Live session 1,** it is highly recommended that participants complete at least the 'Welcome to The PLAY Project' section of the course before live session 1. In this live session participants typically have questions about:
 - The 7 Circles: PLAY Principles, Methods, Techniques, and Activities
 - Developmental, relationship-based models and how they differ from behavioral models
 Certification and implementation of PLAY in various settings
- Live session 2, we encourage all participants to have completed most, if not all of Track 1 sessions to get the most out of this live session. This live session typically addresses participant questions about:
 - The case studies from the IWO
 - Accurately profiling the child in terms of CZ, SMP, and FDL
 - Cases from participants

Live Sessions are scheduled general Q&A sessions with Dr. Solomon, founder and medical director of The PLAY Project. These sessions are open forum – to review the course material and answer any questions you may have! To make the live sessions more meaningful and effective, we encourage you to come with questions, as well as submit them in advance here:

https://podio.com/webforms/28463731/2271755

Trainees will benefit most from attending a live session by computer, smartphone, or tablet. However, you can also join by phone.





Course Requirements and CEUs:

The PLAY IWO requirements depend on whether you are taking the course for professional continuing education units (CEU). ASHA, AOTA, Illinois Early Intervention Credits and MiRegistry (Michigan Training Registry) Training Hours are the only CEUs currently approved for this course offering. Please see below for more CEU requirements. Post-course and CEU Requirements:

- All Track 1 modules/levels of the course
- Post-test
- <u>Satisfaction survey</u> ASHA & AOTA applicants <u>must</u> fill out their informational section in the satisfaction survey in order to receive CEUs
- CEU Applicants Only: Attendance to both live sessions is required (watching the recordings is not sufficient)

The completion of all modules/levels of the course, as well as the completion of the post-test and satisfaction survey, are required to receive a certificate of participation and to pursue certification. These requirements will be checked in the "Activity Submission" button in the last level: Track 3.



Course Syllabus





Helpful Tips for Technical Issues:

- Audio Issues:
 - Try opening the module in a new window by clicking the arrow in the box next to the "x" in the top right of the screen
 - Drag the progress bar to a point midway through the course and back to the beginning
 - Try accessing the course from a different browser,
 Firefox is preferred
- Video Loading Issues:
 - In Google Chrome- please try refreshing the page if the video is still unresponsive. We recommend also checking if your Chrome browser needs any updates
 - Go into your browsing history and clear your cache
 - This learning platform does best with the Firefox browser. If none of the above is working out for you - please try opening the course through Firefox

If you need any extra assistance, please contact help@playproject.org



ENGINEHOUSE 1:

Introduction



Research on The PLAY Project



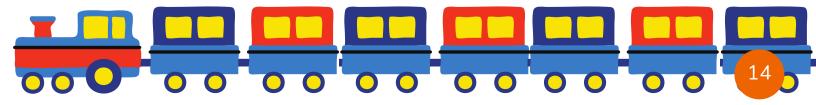
Solomon R, Necheles J, Ferch C, Bruckman D, (2007) Pilot study of a parent training program for young children with autism: The PLAY Project Home Consultation program. *Autism* Vol 11(3) 205-224. https://www.ncbi.nlm.nih.gov/pubmed/17478575

Solomon R, Van Egeren L, Mahoney G, Quon-Huber M, Zimmerman P. (2014) PLAY Project Home Consultation Intervention Program for Young Children with Autism Spectrum Disorders: A Randomized Controlled Trial. *J Dev Beh Pediatr*, 35(8): 475-485. http://journals.lww.com/jrnldbp/Fulltext/2014/10000/PLAY_Project_Home_Consultation_Intervention.1.aspx

Espy-Scherwindt M, Gothard D, Buletko B, et al (2015). *Evaluation of the Ohio PLAY Project,* Ohio Department of Developmental Disabilities CSP904215. https://www.playproject.org/assets/PLAY-Evaluation-Final-Report.pdf

Solomon, R. The PLAY Project Autism Intervention Model, *Encyclopedia of Autism Spectrum Disorders* 2nd Edition. Fred Volkmar, Editor. Springer International Publishing ISBN 978-3-319-91284-4, 2020

PLAY Project Fact Sheet







The 7 Circles of The PLAY Project



The PLAY Project is a play-based early intervention program that can improve social interaction, communication, and functional development in children on the autism spectrum.

Ready, Set, PLAY! An Introduction to Principles and Methods

- 1) To begin, the PLAY Project
 - Consultant (PPC) introduces the family to the principles and methods that will help parents understand the program's goals and gain skills that will lead to improved engagement and social interaction with their child.
 - 2) Understanding Your Child: Creating a Unique Profile Next, the PPC invites the family to share their knowledge about their child. This parent-professional partnership helps to create an individualized plan for the child. Assessment tools are used to identify the child's Neurological Comfort Zone, Sensory Motor Profile, and Functional Developmental Level. The goal is to determine the child's unique profile in order to best support the child through each stage of social and emotional development.
 - **3)** The PLAY Plan: Individualized Techniques and Activities Guided by the child's unique profile, the PPC collaborates with the family to determine appropriate PLAY Project activities and techniques. The PLAY Plan empowers parents to build their skills as players while supporting their child through the stages of development. The plan is updated and changed as the child makes progress.
- **4)** Family Guidance: Coaching, Modeling, and Feedback During each home or clinic visit, the PPC supports the family in their role of play partner with their child. The PPC answers questions, coaches the parents as they play, models the recommended activities and techniques, and provides written feedback. Video footage is taken of both the parent and the PPC, to be used as part of the visit review, which allows the PPC to track and measure progress.
- 5) Engagement: PLAY Time Between Parent and Child Between visits, the family follows the PLAY

Plan's activities and techniques as they interact with their child during daily routines and short play sessions throughout the day. The family is encouraged to playfully engage their child 15-20 hours per week. The goal is to make every interaction a *good* interaction, providing the intensity needed to improve the child's social and emotional development.

- 6) Visit Review: Video and Written Feedback During PLAY visits, video is used to capture the child playing with the family and the PPC. After the visit, the PPC reviews the video to assess the child's progress and the family's engagement in PLAY Project activities. The PPC provides the family with a digital copy of the video and an updated PLAY Plan, including helpful observations and suggestions.
- 7) Change and Growth: Revising the Plan as the Child Develops Children are dynamic and so is the PLAY Plan. On an ongoing basis, the PPC will reassess the child's progress, modifying the PLAY Plan to best meet the changing needs of the child and family.



STATION 1:

Introduction





Welcome to The PLAY Project's Intensive Workshop Online!

This guide is to help you navigate the Intensive Workshop Online course. We strongly encourage you to begin with downloading The PLAY Project's Intensive Workshop Online Packet and the Child Profile, both of which will be used extensively throughout the course.

Intensive Workshop Online video tutorials can be found here. Topics include

Downloading Materials, Levels and Modules, Course Progress and Completion, and Audio.

Please read Dr. Rick's letter if you have not already. You will start the course with Enginehouse 1: Introduction and Welcome to PLAY.

Please reach out to help@playproject.org with any questions.

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Course Materials

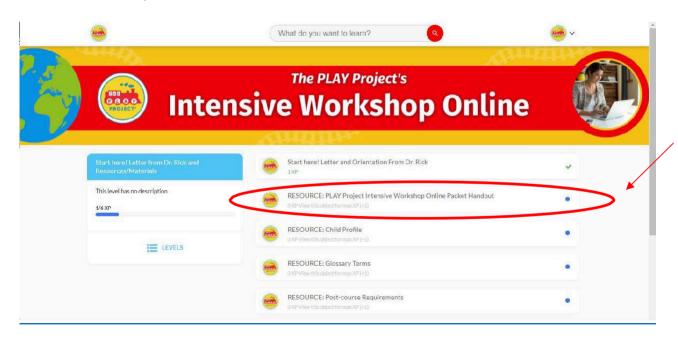
You can view the Downloading Materials video tutorial here.

We strongly encourage you to begin with downloading The PLAY Project's Intensive Workshop Online Packet and the Child Profile, both of which will be used extensively throughout the course.

Resources/Materials are located in this first level of the course. Each section of the course also includes related resources.

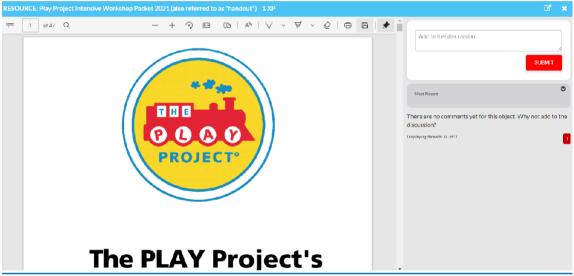
To download materials:

Click the resource you want to download.





To download and save to your desktop, click the icon below and select "Save".



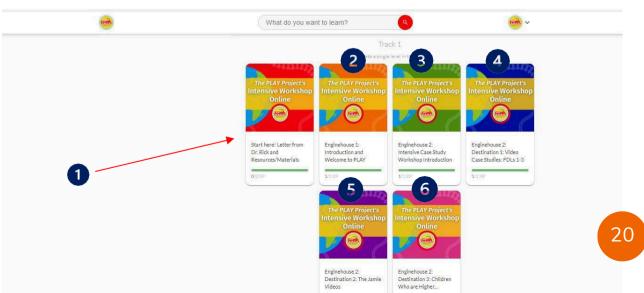
Levels

You can view the Levels and Modules video tutorial here.

Course modules are organized by "Levels". There are 6 levels in Track 1. Levels in Track 1 include: "Start here! Letter from Dr. Rick and Resources/Materials,

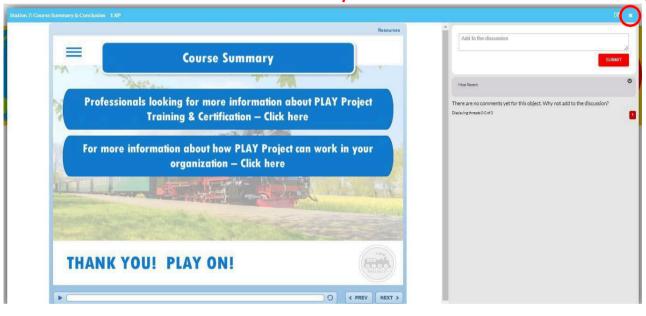
Enginehouse 1: Introduction and Welcome to PLAY," etc. You can return to view all "Levels" at any time throughout the course.

Levels/Course Homepage





To return to the course homepage and view all Levels after completing a module, click on the "X" in the top right corner then click the "Levels" button under the Level description.







Modules

Throughout this guide, we refer to sections of the course as "Modules."

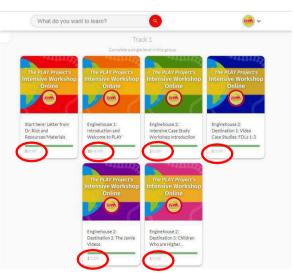


Course Progress

The Course Progress & Completion video tutorial can be found here.

A blue circle shows that a module has not been opened. When you open and participate in a module, the blue circle changes to a green check mark.





XP points show course progress. They are for your own use.



"Leaderboards" are another way for attendees to track your personal progress, but are not used for any additional purposes for the Intensive Workshop Online.



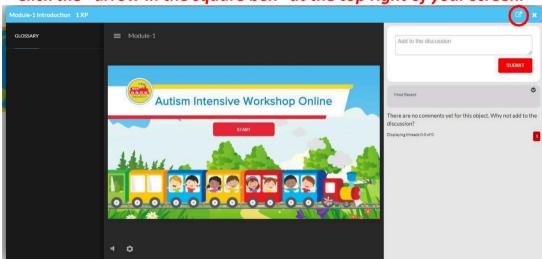
The completion of all modules/levels of the course, as well as the completion of the post-test and satisfaction survey, is required to receive a certificate of participation and to pursue certification. These requirements will be checked in the "Activity Submission" button in the last level of Track 1: Enginehouse 2: Destination 3: Children Who are Higher Functioning. If you completed all requirements and did not receive a course completion notification and certificate, please email help@playproject.org.



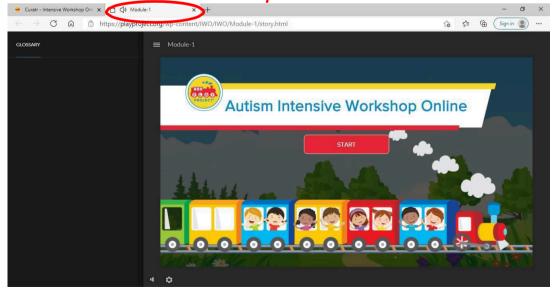
How to Enlarge Module Slides

You can view the Levels and Modules video tutorial here.

Click the "arrow in the square box" at the top right of your screen.

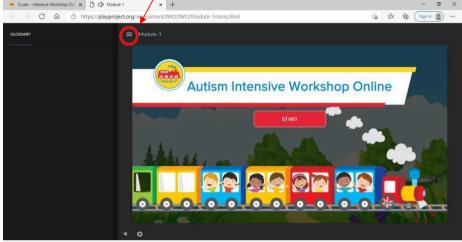


Your module will open in a new window.





You can also hide the menu bar by clicking on the 3 lines icon.



To return to your module menu for a level after the module is finished, close the tab that is playing the course in full screen.



Close out of the module window by clicking the "X" in the top right corner.





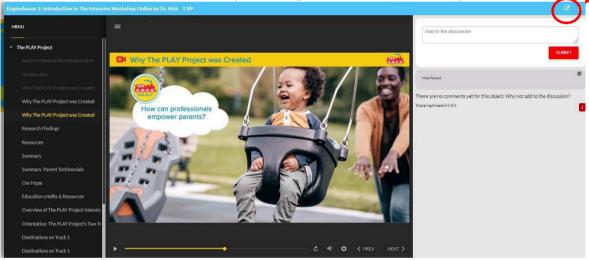
Audio Troubleshooting

You can view the Audio video tutorial here.

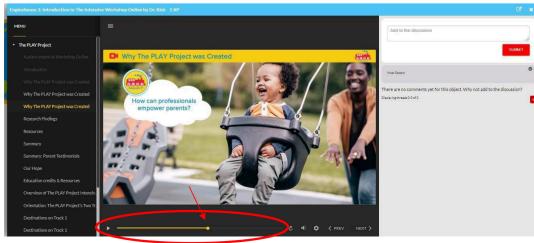
If you are having audio troubles, two simple troubleshooting solutions are 1) opening the module in a new tab or 2) dragging the sliding progress bar at the bottom of the course screen and then back to the start of the slide.

Open the module in a new tab by clicking the "arrow in the square".

Enginehouse: 1: Introduction to The Intensive Workshop Online by Dr. Rick 1XP



Or, with your mouse/cursor, drag the sliding progress bar at the bottom of the course screen to the middle of the course and then back to the start of the slide.





Enginehouse 1

The "Welcome to The PLAY Project" modules begin with the second module in Enginehouse 1. These modules have a different look than the rest of the modules in the course.



Click the blue icon with three lines to populate a menu for the module.

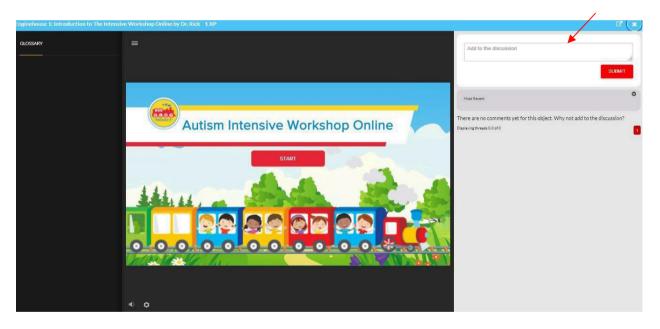






Adding a Comment and Additional Assistance

If you have any additional questions, please email help@playproject.org or comment in the online forum by typing in the textbox to the right of your module slide and clicking "SUBMIT"!



Thank you for participating in The PLAY Project's Intensive Workshop Online!



Julian's 1st Video- Notes:



Mission & Vision



Our Mission:



Our Vision:





STATION 2:

Learning Objectives & Overview



Learning Objectives



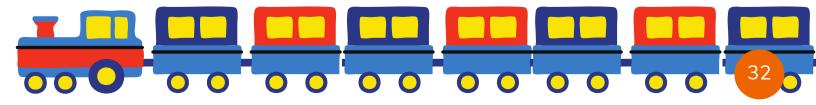
State the Mission & Vision of PLAY

Why are parent-implemented models like PLAY Project needed?

Give a brief description of the key components of The PLAY Project model

List and describe the 7 Circles of The PLAY Project

Summarize the research evidence for The PLAY Project





Learning Objectives & Overview- Notes:





STATION 3:

The Need for PLAY





The Need for PLAY-Notes:





S T A T I O N 4:

What is PLAY?



What is P.L.A.Y.?



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What is P.L.A.Y.?



- PLAY Project Autism Intervention is an evidence-based, * highly structured, parent implemented, intensive intervention model for young children (Birth-3) with autism spectrum disorders (ASD), and/or 'red flags' that has been serving families nationally and internationally for 15 years.
- Certified PLAY Project Consultants, in the home, clinic/office, school (Teaching PLAY) or virtual/online (Tele-PLAY) settings, coach parents to connect with their child in a joyous, playful way that improves the child's social interaction and development addressing the core social deficits of ASD.

NIH funded research* — one of the largest autism study of its kind in the U.S. with 128 study children/families from four states — showed that parents can learn the methods, that children improved in their social interaction, functional development, and autism severity and that PLAY Consultants showed fidelity in implementing the program.

- PLAY Consultants connect in person with families 2-4 hours/month, or conduct services virtually via 'Tele-PLAY', during which they coach parents using our 7 Circles of PLAY approach and videotape samples of play. They provide detailed mid- month written and video feedback for parents on how to keep play fun and engaging so the child moves up developmentally. Parents are encouraged to PLAY with their child 1-2 hours per day in 15-20-minute sessions and through daily activities (the model works in the clinic, early intervention, or office setting as well with as well with weekly one-hour sessions).
- PLAY Project Consultants are child development specialists, including primarily SLP, OT, PT and M.Ed/Early Intervention. Over 500 PLAY Project Consultants are providing PLAY Project services in the U.S.
- One full time PLAY Project Consultant can serve up to 25 families (typical caseload is 3-10) making PLAY
 easy to disseminate in rural or urban settings. PLAY has been implemented in community mental health,
 early intervention, and medical rehab settings.
- Ohio adopted PLAY for its Early Intervention (Birth-3) system, training 120 consultants over a three- year period with 70% of Ohio counties providing services to over 500 children per year.
 - PLAY Project Consultant training is very efficient. An initial training phase—live 2-day intensive workshop, livestream workshop or intensive workshop online, and weekly online training for 6 weeks— is followed by a supervision phase—12 to 18 months of internet- based feedback for PLAY Project Consultants' ongoing cases. PLAY Project Consultants can begin delivering services to families immediately following the initial training phase.

Richard Solomon MD, a developmental and behavioral pediatrician, is the medical director of The PLAY Project. For more information, visit our website at www.playproject.org or call (734) 585-5333.

*Solomon R, Van Egeren L, Mahoney G, Quon-Huber M, Zimmerman P. PLAY Project Home Consultation Intervention Program for Young Children with Autism Spectrum Disorders: A Randomized Controlled Trial. J Dev Beh Pediatr. 2014; 35(8): 475-485. To view the full open access article, click on this link: http://journals.lww.com/jrnldbp/Fulltext/2014/10000/PLAY_Project_Home_Consultation_Intervention.1.as



Julian's 2nd PLAY Visit

- Notes:





STATION 5:

The 7 Circles of The PLAY Project (Part 1)



The 7 Circles of The PLAY Project







Circle 1: PLAY Project Principles



 	 	 _

Circle 1: PLAY Project Principles



- 1) Fun with people-doing what the child loves
- 2 Put in the time-2 hours per day
- 3 Accurately profile the child
- 4 Play at the right level

Zones of Development



Comfort Zone (Fun & Easy)

One of Potential Development (Too Hard)

Comfort Zone
(Fun & Easy)

Circle 1: PLAY Project Methods



- 1 Read the child's cues
- 2 Slow the pace of play to observe and wait
- 3 Follow the child's idea/intention
- 4) Open and close circles of communication
- 5 Build on the child's interests







Circles of Communication Notes-





STATION 5:

The 7 Circles of The PLAY Project (Part 2)





Circle 2: Understanding the Child



Circle 2: Child Profile Comfort Zone (CZ)





What the child does when you let them do whatever they want to do

Repetitive, stereotyped, and dominating interests

In their own world, not 'with us'

Their functional development is not 'solid'

Examples of CZs:

- Lining up trains
- Visually self-stimming on wheels, lines, objects, etc.
- Watching TV, videos, pressing keys on iPad, etc.
- Being stuck on the same topic: planets, trains, dinosaurs, etc.

Circle 2: Sensory Motor Profile (SMP)



The unique way a child experiences the world through the various sensory modalities and movement:

- Visual Processing
- Proprioceptive (feelings in muscles and joints)
- Vestibular (spinning, body in space)
- Tactile (light touch/tickling, deep touch/pressure)
- Oral (food aversions, mouthing)
- Auditory (sound, singing, humming)
- Olfactory (sense of smell)
- Motor Planning (fine/gross motor coordination)



- It is important to identify how the child experiences the 7 senses and whether they are over-reactive or under-reactive to sensation
- If a Sensory Processing Disorder (SPD) is suspected, we recommend an occupational therapy evaluation.
- The child's SMP is gathered through: a parent interview, clinical observation, and assessment measures.

Circle 2: Functional Developmental Levels (FDLs)



- 1 Self-Regulation and Shared Attention (FDL 1)
- 2 Engagement (FDL 2)
- 3 Two-way Communication (FDL 3)
- 4 Complex Two-way Communication (FDL 4)
- 5 Shared Meanings and Symbolic Play (FDL 5)
- 6 Emotional Thinking (FDL 6)







STATION 5:

The 7 Circles of The PLAY Project (Part 3)



Circles 3-7





Circle 3: The PLAY Plan



FAMILY GUIDANCE Coaching, Modeling and Feedback Circle 4: Family Guidance



Circle 5: Engagement



REVIEW: Video & Written Feedback Circle 6: Feedback



Circle 7: Growth & Change

Child Profile



Co	mfort Zones (CZ)
Sen	sory Motor Profile (SMP)
1.	Visual Processing:
2. IV	lotor Planning:
3.	Tactile Input:
4.	Oral:
5. O	lfactory:
6.	Auditory:
7.	Reactivity:
8.	Vestibular/Proprioceptive:
9.	Other:

Child Profile-Continued



Functional Developmental Level (FDL) Level 1: Regulation and shared attention Level 2: Engaging in relationships Level 3: Two-way Communication Level 4: Complex Two-way Communication Level 5: Shared Meanings Level 6: Emotional Thinking

Methods

1. Read the child's cues and intent

Child Profile-Continued

Slow the pace of play, observing and waiting for the child's idea Follow the child's lead, responding to what the child wants



Open and close circles of communication (back and forth interactions)
Build on the child's interests

Techniques

Activities

"Rabbit Hole" Techniques



The "Rabbit Hole" is our metaphor for the self isolation caused by the perseverative, repetitive, restrictive, and stereotypical behaviors characteristically exhibited by children with autism spectrum disorders.

- When children are in their "rabbit hole," it seems like they don't want to be part of the world.
- Perseverative and stereotypical behaviors are not "bad." They are a form of comfort that the child uses to keep their world familiar and safe. In the PLAY Project, we call these behaviors Comfort Zone (CZ) activities.
- CZ activities help the child to regulate (self-calm) in a chaotic world; however, they may become habits which keeps the child isolated (i.e. in their "rabbit hole").
- 'Joining' a child in their CZ allows for engagement (FDL 2) and as engagement increases, the perseverative and repetitive behaviors naturally decrease. This is the goal of the "Rabbit Hole" Techniques!

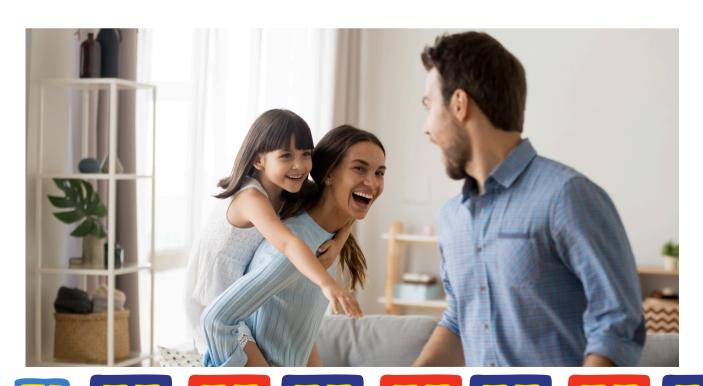
The 6 Rabbit Hole Techniques:

- 1. <u>Being With:</u> Simply be with (i.e. sit next to or quietly observe) and wait for the child to re-engage.
- 2. Narrate: Label and provide a running commentary. Focus on paying attention to what the child is doing. This means to watch and describe out loud what it is that he/she is doing. You may sound just like a sportscaster -- that's good! As an example, let's say they are coloring. You might follow what they're doing by saying, " ... and now you're coloring the hat red." Don't tell the child what to do. You should just describe their actions. Also, stop paying attention if he/she starts demonstrating naughty/unwanted behaviors. If for instance, he/she starts whining, don't say, " ... and now you're whining." In cases like this, ignore the bad behavior.
- 3. <u>Help them do it better:</u> For example, if the child is lining up cars you would begin to hand him or her additional cars to add to the line of cars or show the child new ways of using the cars.

"Rabbit Hole" Techniques Continued



- 4. <u>Imitate/Parallel Play:</u> Do something similar to what the child is doing (and see if he/she will imitate you). If the child is lining up his or her toy cars, you can begin to line up a set of cars next to them but add a slight variation (e.g., line them up facing in the opposite direction).
- 5. <u>Theme and Variation:</u> Do something different with the same activity. For instance, open and close a door. Sing a song while you open and close the door, hold the door closed until the child complains.
- 6. <u>Change the Sensory Mode:</u> If the child is " in his or own world," you can try to engage their attention with a really fun activity (e.g., bubbles or offer other sensory activities). *Keep in mind the child's primary/preferred sensory modality (i.e. visual, tactile, auditory, etc.)



Techniques



PLAY Techniques: FDLs 1-4

PLAY Techniques: FDLs 4-6

- 1. Being With/Going for Affect
- 2. Sensory-motor Play
- 3. Taffy Pulling
- 4. Theme & Variation
- 5. Salient Language
- 6. Playful Obstruction

- 1. Imitative Pretend Play
- 2. Pretend Play: Everything Come Alive
- 3. Pretend Play: One Thematic
- 4. Mirroring-Reflecting/Labeling: Feelings
- 5. Speaking 'to' and Speaking 'for' the Child
- 6. Modeling Empathy

Techniques with Examples



PLAY Techniques with Examples for Functional Developmental Levels 1-4

Shared Attention/Engagement & Two-Way Communication

Being With

<u>Definition</u>: Being present in the same physical space with the child and just observing.

<u>Purpose</u>: To help caregivers see exactly what the child is doing or intending to honor the *child's* ideas.

Examples:

- Sit near the child as they play in their Comfort Zone.
- Make comments on what they're doing: "You're jumping so high!"
- Repeat words/sounds the child makes.

Sensory-motor play

<u>Definition</u>: Connecting with the child in a physically playful way through various sensory modalities.

<u>Purpose</u>: To physically engage the child using mostly touch, proprioceptive (deep pressure and muscular movement) and vestibular (movement in space) interactions.

<u>Examples:</u>

- Touch: gently squeeze each finger, rub the back, tickle, wrestle, rough house.
- Vision: blow bubbles, stack blocks, flip pages, read numbers, letters, colors.
- Sounds: hum, drum, sing.

Taffy Pulling

<u>Definition</u>: Stretching out interactions to make engagement last.

<u>Purpose</u>: To prolong engagement and strengthen the social bond/connection between people. Examples:

- Keep eye contact going for as long as possible by slowing down your actions.
- Play dumb for a couple of circles (back and forth interactions) and ask the child what they would like to do.
- Give them a toy and then ask for it back, then try to take it back and let them resist you.
 - Have fun 'tussling;' say "mine" and gently tease the child.
 - S-t-r-e-t-c-h it out.

Theme & Variation

Definition: Theme and variation involve multiple ways of doing the same activity.

<u>Purpose</u>: To create lots of ideas for parents for when play becomes repetitive.

Examples: What are 5 ways to play with something simple like a door?

- Play peek-a-boo on the other side of the door: 'Hello. Bye-bye."
- Open and close the door with a song (To 'London Bridge': "Now I'm going to close the door, close the door, close the door. . .").
- Put your hand in the door and close it (gently) and say "ouch!"

Techniques with Examples -Continued



PLAY Techniques with Examples for Functional Developmental Levels 1-4

Shared Attention/Engagement & Two-Way Communication

Salient Language

<u>Definition</u>: Purposeful language that stands out to the child.

<u>Purpose</u>: To help the child understand key words by connecting words to objects, actions, and people. Examples:

- Label each activity: "spin" for a spinning game or "open/close" for a peek-a-boo door game, etc.
- Use sequences of language: "1-2-3," and "ready, set, GO..."
- Once familiar, wait to see if the child will finish the sequence "1-2...."

Playful Obstruction

<u>Definition</u>: When the caregiver playfully does not do what the child wants or makes the child work for something they do want.

<u>Purpose</u>: To make interactions last longer and get more back-and-forth reciprocal exchange (i.e. circles) and to have fun i.e. it should be playful not frustrating.

Examples:

- Get in their way so they must move you.
- Play dumb when they want something and make them open another circle (back and forth interaction).
- Close the door when they want it open.

PLAY Techniques with Examples for Functional Developmental Levels 4-6

Shared Meanings & Emotional Thinking

Imitative Pretend Play

<u>Definition:</u> Simple pretend where the child imitates what the caregiver models.

<u>Purpose</u>: To promote early symbolic imagination and imitation and complete the bridge to higher pretend and functional development at FDL 4.

Examples:

- Use slapstick with dolls.
- Build simple repetitive sequences the child can follow:
 - "Hi, I'm a car. Here I go," then zoom the car around on the floor and in the air.
- Point to animal pictures, name the animals, then make the animal sounds.

Pretend Play: Everything Come Alive (FDL 4)

<u>Definition</u>: A form of pretend where objects are treated as alive.

<u>Purpose</u>: To promote pretend play and develop imagination skills.

Examples:

- Use silly voices when playing with objects to give them personalities.
- Salt shakers can say, "Here I come. Shake me!!"
- Make any object "come alive."

Techniques with Examples -Continued



PLAY Techniques with Examples for Functional Developmental Levels 4-6 Shared Meanings & Emotional Thinking

Pretend Play: One Thematic (FDL 5)

<u>Definition</u>: Pretend play that involves one idea (not yet a story with two ideas) and represents true pretend play compared to the imitative pretend play of a younger child (see 'Simple Pretend Play' above).

<u>Purpose</u>: To promote imagination and social capacities for playful interaction with peers and adults. Paves the way to more complex two thematic pretend play.

Examples:

- Feed a big-mouth puppet different kind of plastic foods.
 - Note: Even though you feed several foods, it's still just one theme: feed the puppet.
- Use a doctor kit to give a shot, listen to the heart with a pretend stethoscope, etc.
 - Note: The child is *not* pretending to be a doctor.
- Sword fight.

Mirroring-Reflecting/Labeling: Feelings

<u>Definition</u>: When the adult *mirrors and reflects* the child's feelings using a statement not a question.

<u>Purpose</u>: To help the child label and understand their own and others' feelings.

Examples:

Note: This technique requires being alert to feelings the child exhibits usually through their *gestures* throughout the day.

- A mirror would not ask "Are you mad?" but only states what exists: "You're mad!"
- Mirror and reflect the feeling using words that express the feeling for the child and match the intensity with your voice.
- Try to imagine what the child would say if they could tell you how they feel.
 - "You don't like that food. You're all done!"

Techniques with Examples -Continued



PLAY Techniques with Examples for Functional Developmental Levels 4-6 Shared Meanings & Emotional Thinking

Speaking 'to' and Speaking 'for' the Child

<u>Definition</u>: When the adult speaks TO the child they should talk in completely normal tones, syntax, and rhythms (not baby talk or dumbed-down language). When the adults speak FOR the child they should simplify their language and model language that the child would use.

<u>Purpose</u>: To enhance language skills. When speaking to the child you are modeling normal language; when you are speaking for the child you are helping them expand their language skills. Examples:

- When the child says, "Up!" you could say "Up, Daddy."
- When the child says, "Go out!" you say (speaking FOR): "Go outside, Momma," followed by (speaking TO): "Let's go outside and have some fun."
- Note: Children develop language based on the SVO syntactic construction—Subject Verb Object. When you are helping them build sentence structure it can be either Subject Verb: "Bobby go"; it could be Verb Object: "Go (to) car?" or it could be Subject Object: "Bobby car."

Modeling Empathy

<u>Definition</u>: Recognizing others' feelings and appropriately responding to them with empathy. <u>Purpose</u>: To promote important social skills, involving the child's ability to care for others. This also tunes children with autism into an important realm of social content.

Examples:

- First, model empathy for the child: "You're mad about that!" or "Boy, that was fun!"
- Mirror/Reflect/Label other's feelings.
 - "Your sister is sad. What should we do to make her feel better? You took your toy back from her and she has nothing to do."
- Draw feelings faces.

Activities by Level



Level 1: Self-Regulation & Shared Attention (calm and alert and ready for the possibility of engagement)

<u>Goal</u>: To help the child sustain attention and regulation (create an optimal environment while eliminating distractions)

*some activities may be appropriate for more than one level

Activities:

Sensory motor play

- Roll exercise ball on body
- Tickle the child's arms, back, belly, etc.
- · Massage with or without lotion
- · Gently squeeze fingers/toes, head
- Sing
- Gently shake arm/leg/hands/feet
- Make sounds
- · Dance while holding the child
- Make faces to capture the child's attention

Level 2: Engagement & Relating

<u>Goal:</u> To engage with the child and maintain continuous engagement Activities:

- · Swing child in blanket by arms and legs
- Wrestle gently
- Horsy back rides
- · Flying the child up in the air
- · Holding the child upside down for a brief period
- Introduce simple 1-2 step sequences and opposites: turn a flashlight on and off, turn water on and off, hello/goodbye games, open and dramatically close a book, etc.

Activities by Level Continued



Level 3: Two-Way Intentional Communication

<u>Goal:</u> To open and close circles with the child and to challenge the child to initiate Activities:

- Blow bubbles and wait for the child to ask for more
- Wait for the child on the other side, etc.
- Balloon play (i.e. hitting a balloon back and forth or blowing one up and letting it fly around the room, etc.)
- · Play simple chase games
- Ready-set-go or 1-2-3 games
- Jack-in-the-Box
- Play with toys that wind up and go, such as cars, airplanes, helicopters, etc.
- Label body parts and wait for the child's direction ("What's next?")
- Fly like an airplane and crash into a couch
- Play peek-a-boo around a blanket or behind a door
- Flip the child over on a bed, crawl through a tunnel

Level 4: Purposeful Problem-Solving Communication

<u>Goal</u>: To engage in long, back and forth interactions that includes meaningful communication, problem solving, simple pretend play and sequences Activities:

- Ask the child to point to various body parts on his/her body and on play partner's body
- Play simple hide-and-seek behind a blanket or furniture
- Look at books, talk about pictures on the page
- Introduce animal/car sounds
- Do puzzles and play with shapes and colors that have meaning to the child keep it playful!
- "Ring Around the Rosy," "Head-Shoulders-Knees-Toes," "Humpty-Dumpty," "London Bridges," etc.
- Play opposite games with some simple pretend (e.g. lights on/off, cars in/out of garage)
- Give the child simple problems to solve (e.g. the car is stuck, the horsey has a boo-boo, the baby is hungry, etc.)
- Simple puppet play (i.e. making puppets open their mouths and say, "Ahh" or "Hi!")

Activities by Level Continued



Level 5: Creating & Elaborating Ideas

<u>Goal</u>: To encourage a better understanding of one's emotions and to increase pretend play, symbolic thinking, conversational and negotiation skills

Activities:

- Races with simple rules
- Have a tea party
- Play catch
- Play doctor
- · Set the table with pretend food
- Hide-and-seek
- Wash a pretend animal
- · Sword fight
- Change a doll's diaper and put it to bed
- Make a puppet burp
- Pretend to fall and say "ow!"

Level 6: Building Bridges & Ideas (Logical Thinking)

<u>Goal</u>: To support the child in understanding complex emotions: concepts of time, fairness, and abstraction. To support the child in engaging peers and adults in complex pretend scenarios while appropriately responding to the feelings and ideas of all involved. To help the child make associations between ideas.

Activities:

- Role play with puppets/stuffed animals
- Simon Says
- · Go on a pretend picnic, adventure, treasure hunt, scavenger hunt
- Play tag
- Musical chairs
- · Complete complex obstacle courses
- · Duck-duck goose
- Read and analyze stories/books
- Play house
- Talk about likes and dislikes







S T A T I O N 6:

Research & Evidence



Research Timeline



- No Intensive Services in Michigan for Autism
- •Kids in Pennsylvania less than 6 years old could get 30-40 hours a week of therapy paid by the state
- Over 10 years, saw the impact of intensive intervention on young children with ASD
- Introduced PLAY Project as a cost-effective intensive approach to autism intervention

2000



- •Pilot study of 75 children before / after intervention
- •Published in journal "Autism"
- •Results showed parents could learn the methods & children improved

2000 2004



Research Timeline-Continued



 Applied for an National Institute of Health study for The PLAY Project

2000 2004 2005



- •Rigorous research on The PLAY Project model
- •3 year / 2 million dollar grant
- Collaboration with Easter Seals & Michigan State University
- •Randomized controlled trial / multi-site
- •60 children per year / over 2 years
- Largest study ever done in the U.S. on a therapeutic program

2000 2004

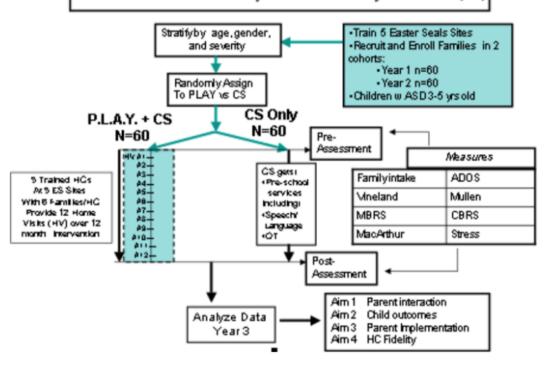
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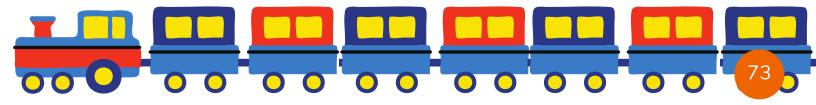


Research Design



Figure 1: SBIR Phase II Research Design 2 Cohorts RCT of The P.L.A.Y. Projects Community Standard (CS)







The PLAY Project Model Effects- Notes



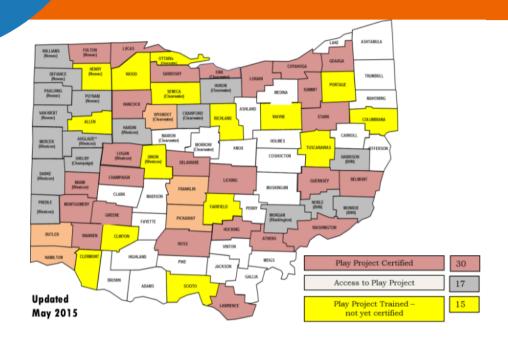


Research Implications & PLAY Project Implementation- Notes



The PLAY Project Implementation & Evaluation





Ohio DODD Grant, August 2015

Confirmed the training of 150 PLAY Project Consultants

Est. 500+ children served per year in Ohio

High satisfaction rate with PLAY Project Consultants

Very high satisfaction rate for parents in PLAY Intervention

Research on The PLAY Project



Solomon R, Necheles J, Ferch C, Bruckman D, (2007) Pilot study of a parent training program for young children with autism: The PLAY Project Home Consultation program. *Autism* Vol 11(3) 205-224. https://www.ncbi.nlm.nih.gov/pubmed/17478575

Solomon R, Van Egeren L, Mahoney G, Quon-Huber M, Zimmerman P. (2014) PLAY Project Home Consultation Intervention Program for Young Children with Autism Spectrum Disorders: A Randomized Controlled Trial. *J Dev Beh Pediatr*, 35(8): 475-485. http://journals.lww.com/jrnldbp/Fulltext/2014/10000/PLAY_Project_Home_Consultation_Intervention.1.aspx

Espy-Scherwindt M, Gothard D, Buletko B, et al (2015). *Evaluation of the Ohio PLAY Project,* Ohio Department of Developmental Disabilities CSP904215. https://www.playproject.org/assets/PLAY-Evaluation-Final-Report.pdf

Solomon, R. The PLAY Project Autism Intervention Model, *Encyclopedia of Autism Spectrum Disorders* 2nd Edition. Fred Volkmar, Editor. Springer International Publishing ISBN 978-3-319-91284-4, 2020

PLAY Project Fact Sheet



S T A T I O N 7:

Summary & Conclusion



Prevalence of Autism

*as of 2023



1 in 36 CHILDREN

According to the CDC, the rate of ASD in children aged 8 years old is 1 in 36.





Parent Implemented Models & Public Policy



- PIM Recognized as evidence based by the NCAEP (Steinbrenner et al, 2020)
- Empowers parents to address social challenges
- Provides intensive intervention by making every interaction count
- 10x less costly than therapist delivered services
- Can be broadly implemented and disseminated to address the problem of waitlists
- Implications for public policy are evident, important, and urgent

For more information, contact info@playproject,org

Follow us on social media! @playprojectasd











ENGINEHOUSE 2:

Intensive Workshop Introduction



Glossary



Affect – The feeling life of the child; what the child likes, wants or intends.

Auditory Processing – the way a child processes information that is heard; the process of decoding sounds and the meaning of words is often difficult for children with ASD i.e. they have trouble making sense of what they hear or need more time to process auditory information. Visual approaches like *PECs* are often good alternatives for children with auditory processing problems.

Circles of Communication – The back and forth process of communication. Opening a circle means *initiating* an interaction. Closing a circle means *responding* to a social overture (see reciprocal interaction). The 'ping-pong' of relationship.

Comfort Zone – The neuro-psychological sense of comfort that a child with autism has when they are doing what they want and like to do, especially when they are repeating activities. The comfort zone is based on the child's abnormal neurologic system that makes the child want to keep the world the same.

Content vs. Interactional Process - The content of an interaction is the "what" of the interaction; the process of the interaction is the "how". For example, imagine a child and parent playing catch. The content would be 'A game of catch'; the process would be 'tossing the ball back and forth'.

Contingent Interaction – When my interaction depends on your interaction, it is considered *contingent*. See *circles of communication*.

Cues –A cue is an observed behavior of the child that tells you whether the child is enjoying an interaction, feeling neutral about the interaction, or not enjoying the interaction.

DIR – Developmental, individual differences, and relationship-based approach developed by the child psychiatrist, Stanley Greenspan MD and pediatric psychologist Serena Weider PhD. The PLAY Project is based on the theoretical foundation of the DIR model.

Fragile X A genetic condition which affects the X-chromosome and leads to various developmental problems like intellectual disabilities and cognitive impairment.

Fragmenting—When the child breaks off interaction and does not respond contingently. Functional

Developmental Level (FDL) –The stages of development according to the *DIR* theory of Stanley Greenspan. There are nine functional developmental levels of which the first six are fully described in the PLAY Project courses.

Hypersensitivity – being overactive or oversensitive to the environment.

Hyposensitivity – being underactive or undersensitive to the environment.

Glossary-Continued



Intent – What the child wants to do as judged by the caregiver by reading the child's nonverbal (gestural) as well as verbal *cues*

Lead—The direction the child wants to go. Similar to *intent*. By following the child's 'lead', the adult engages the child in pleasurable back and forth interactions which enhance the child's *developmental functional level*.

Motor Planning – Motor means movement using muscles. Motor planning is the ability of the child to move from one activity to another or to sequence a given motor activity. Children with autism frequently have trouble with motor planning.

Parent Implemented Models—Evidence-based intervention programs that empower parents to help their child with autism. The PLAY Project is a parent implemented model that uses a developmental and relationship-based approach (PIM DRB)

PLAY Methods – There are 5 PLAY Methods: 1.) Read the child's cues to understand their intent. 2.) Slow the pace of play, observing and waiting for the child's idea. 3.) Follow the child's lead, responding to what the child wants. 4.) Open and close circles of communication (back and forth interaction) 5.) Build on the child's interests.

PLAY Principles – There are 4 PLAY Principles: 1.) Fun with people. 2.) Put in the time—2 hours per day broken up into 15-20 minute sessions. 3.) Accurately profile the child in terms of their Comfort Zone, Sensory Motor Profile & Functional Developmental Levels. 4.) Based on the child's profile, play at the right level.

The PLAY Project – An organization that trains pediatric professionals and child development experts to coach parents to help their young children with autism through play.

The PLAY Project Mission—To support families in having a joyous and playful relationship with their children with autism spectrum disorders so each child can reach his or her full potential.

The PLAY Project Vision—To train a global network of pediatric professionals and child development experts to provide The PLAY Project's autism intervention program to serve as many families as needed.

Proprioception – Feedback from the joint structures of the body to the brain and vice versa.

Psychological Induction—A feeling or set of feelings evoked or induced in professionals that originate in the family.

Reciprocal Interaction – Interaction that depends on the behavior on the other person. Mutual interactional processes depend on one another so that when you do something the child reacts or vice versa.

Scripting—When the child memorizes lines from a movie, video, books, or other media and then quotes the lines out loud. Scripting is a form of Comfort Zone activity that takes the child out of social contact and interaction. They are 'in their own head scripting'.

Glossary-Continued



Sensory Motor Play – The use of play that involves the senses or movement. Examples include a rough and tumble play, spinning, rocking, jumping, turning on and off lights, etc.

Sensory Motor Profile (SMP)—The unique way that a child experiences the world through the various sensory modalities and movement. Some sensory modalities are preferred and sought; some are disliked and avoided. There are nine primary modalities: proprioception (the experience of joints in motion i.e. jumping, shaking of arms/leg, etc.), spatial (the child's experience of closeness and distance), tactile (light touch/tickles and deep pressure/squeezing-pushing), vestibular (turning in space/spinning), visual, auditory (hearing/music), oral (tasting and eating), motor planning (coordination of small and large muscles and the ability to do what you intend to do), and olfactory (smell). In addition the SMP includes the way the child reacts to the world. Over-reactive children are highly sensitive to the environment and can easily be overloaded when there is too much sensory or emotional input; under-reactive children tend to be self absorbed and unresponsive to input and/or overtures; and some children have a mixed reactive profile over-reacting sometimes and being self absorbed sometimes

Sensory Integration (SI) –. The process of using sensory experiences to help children understand their world. SI therapy is usually provided by occupational therapists and involves specific therapeutic techniques.

7 Circles of The PLAY Project—Defines the clinical approach of The PLAY Project in 7 Circles. Circle 1: Principles and Methods: Families learn the foundations of PLAY. Circle 2: Child Profile: Each child is individually profiled in terms of A). What they love to do (Comfort Zone Activities), B). Their sensory profile and C). Functional developmental levels. Circle 3: Techniques and Activities: Individualized suggestions give parents clear ideas of how to implement PLAY. Circle 4: Family Guidance: PLAY Consultants come to the home to coach, model, and give structured feedback based on the video analysis and visit. Circle 5: Engagement: Between visits, parents engage their child and put in the time. Circle 6: Visit Review: Between visits, the consultants send a visit review that includes written and video feedback so parents can refine their approach. Circle 7: Change and Growth: The program is adjusted as the child moves up functional developmental levels.

Vestibular – having to do with the neuro feedback to establish one's place in space

Zone of Potential Development – a term developed by Vgotsky characterizing the outer limits of the child's development. When the parents expect more than the child can understand they are in the child's zone of potential development when they need to be in the child's zone of proximal development.

Zone of Proximal Development – a term developed by Vgotsky characterized by interest, excitement and engagement typical of interactions occurring within the child's understanding. This zone is where the child learns best. They are neither bored because the interactions are too simple or repetitive nor are they confused because the interactions are too advanced (see *Zone of Potential Development*).

The 6 Functional Developmental Levels (FDLs)



FDL 1 - Self-Regulation & Shared Attention

Description: This level is characterized by the child's ability to enter and sustain a state of shared attention <u>with another person</u>, while remaining focused, organized, and calm. These skills are first learned between birth and 3 months.

Signs of difficulty within this level may include: fleeting attention/distractibility; difficulty with self-regulation (i.e. difficulty or inability to remain calm and content); frequent periods of inattention, distress, irritability, or lethargy (i.e. low level of arousal); presence of the child's comfort zone (CZ) such as: lining up objects, flipping through books, or other repetitive and isolating behaviors.

- 1. Child will sustain shared attention with a special adult in sensorimotor interactive play using the child's preferred and pleasurable sensory and motor modalities, such as movement, looking, touching, or listening.
 - 2. Child will regulate his sensory system in order to sustain shared attention with support.
- **3.**Child will regulate his sensory system in order to sustain shared attention independently.
- 4.Child will increase shared attention by increasing interactive circles of gestural communication, resulting in a continuous flow of interactions between child and adult rather than trying to focus on a particular object or toy.
- **5.**Child will sustain shared attention with a peer in interaction.
- 6. Child will sustain shared attention in a group.
- 7. Child will sustain shared attention independently across contexts



FDL 2 - Engagement and Relating

Description: This level is characterized by the child's ability to form relationships and attachment and to engage another person with warmth and pleasure. Engagement is sometimes referred to as intimacy or the ability to bond with and relate to others. This skill is first learned between 2 and 7 months.

Signs of difficulty within this level may include: difficulty with relationships and attachment, avoidance of people, decreased desire or ability to engage with people, decreased response to adult attention or affection, distrust, and/or apathy.

- **1.**The child will form relationships with special adults through pleasurable and enjoyable interactions.
- **2.**The child will sustain engagement in reciprocal social interactions with special adults that bring pleasure and joy.
- **3.**The child will sustain engagement in reciprocal social interactions when annoyed and protesting.
- **4.**The child will increase sustained engagement by increasing the circles of communication.
- **5.**The child will increase sustained engagement through a wider range of emotions, such as jealousy or fear.
- **6.**The child will sustain engagement with a peer with adult mediation.
- 7. The child will sustain engagement with a peer "expert player".
- 8. The child will sustain engagement within group interaction



FDL 3 - Intentionality and Two-Way Communication

Description: This level is characterized by the child's ability to participate in back and forth affective signaling and communication to convey intentions, interests and needs. These skills are first learned between 3 and 10 months.

Signs of difficulty within this level may include: difficulty with initiation and ideation, difficulty opening and closing 2-10+ circles; decreased response to a parent or caregivers overture; decreased ability to use gestures or body language to communicate (i.e. reaching, pointing, vocalizing, etc.); decreased interest in cause and effect; decreased ability or desire to interact.

- **1.**The child will interact in a back-and-forth rhythm in animated exchanges using facial expressions, sounds, and other gestures.
- **2.**The child will initiate purposeful interactions around desires (open circles) and will close circles following adult's response to her initiative.
- **3.**The child will increase number of purposeful interactions around desires for sensorimotor activities, to go somewhere, to obtain objects, or in response to adult
- strategies to expand the number of circles; for example, when the adult poses obstacles, plays "dumb," or creates extra steps to reach desired goal.
- **4.**The child will increase number of purposeful interactions using imitation.
- **5.**The child will increase number of purposeful interactions using simple gestures, such as reaching, taking, pulling, or pointing.
- **6.**The child will increase number of purposeful interactions across widening range of emotions, such as dependency, assertiveness, and jealousy.
- **7.**The child will increase purposeful interactions in various processing areas, including visual-spatial, motor planning, perceptual motor, auditory processing, and language.
- 8. The child will sustain purposeful interactions with a peer with adult mediation.
- 9.The child will sustain purposeful interactions with a peer "expert player."
- 10. The child will initiate purposeful interaction with a peer spontaneously.
- 11. The child will sustain purposeful interactions within group interactions



FDL 4 - Social Problem-Solving, Mood Regulation, & Formation of Sense of Self

Description: This level is characterized by the child's ability to use complex circles of communication by stringing together a series of gestures, actions and words into an elaborate problem-solving sequence of interactions which helps child develop a sense of self. These skills are first learned between 9 and 18 months.

Signs of difficulty within this level may include: difficulty or inability to open and close up to 20 circles of communication in a row (i.e. interactions may be brief and ideas are disconnected); decreased interest in simple cause and effect or pretend play ideas; decreased receptive and expressive communication; difficulty with motor planning, sequencing, or engaging in activities that involve 3 or more steps; difficulty following spontaneous 1-step commands; decreased problem solving skills and/or persistence.

- **1.**The child will express communicative intent through gestures or words to get what he wants.
- 2. The child will sequence (motor plan) in order to execute an idea, such as a desire for a cookie, to pull a chair over to a cabinet, climb up, open cabinet, open container, get cookies and smile at mom.
- 3.The child will sequence (motor plan) in order to execute a desire; for example, in order to play with Dad, who is reading the paper on the couch, the child will climb up, bounce on Dad, and pull him onto the floor to play.



FDL 5 - Creating Symbols and Using Words and Ideas

Description: This level is characterized by the child's ability to create ideas (symbols) observed in pretend play and words (phrases and sentences) to convey some emotional intention These skills begin between 24 and 30 months.

Signs of difficulty within this level may include: scripted, rehearsed, or otherwise unmeaningful expressive language; disinterest in or difficulty engaging in pretend play (i.e. tea parties or monster attacks); difficulty recognizing and expressing emotions; decreased negotiation skills; lack of humor; difficulty engaging in elaborate ideas that involve multiple steps; frequent use of actions rather than words (i.e. the child hits instead of saying: *don't do that!*).

- **1.**The child will initiate the use of realistic ideas in interactive imaginative play, such as by hugging the dolls.
- 2. The child will initiate the use of ideas using realistic verbal interactions.
- **3.**The child will express ideas derived from her affect or intent, such as saying "Play outside!" when she wants to go outside.
- 4. The child will express ideas derived from her affect by combining words and reality-based actions, such as sequence of pretending to be hurt and going to the doctor to get better.
- 5. The child will engage in conversations to express ideas.
- **6.**The child will elaborate on ideas through increasing verbal and symbolic play sequences, such as getting hurt in a crash, going to the doctor, being examined, and going home.
- 7. The child will create imaginary (not reality-based) ideas using magical thinking/powers.
- **8.**The child will assume different roles and act as the character in role-play.
- 9. The child will predict how others will feel or act in certain situations.
- **10.**The child will respond to other's feelings appropriately.
- **11.**The child will demonstrate confidence to resolve conflicts that come up in social situations, such as waiting, trading toys, taking turns, playing together, asserting self to retrieve his toy, joining in, or defending others.
- 12. The child will assume multiple roles and use figures to represent characters.
- 13. The child will expand ideas to include a wide range of themes and feelings.



FDL 6 - Emotional Thinking, Logic, and a Sense of Reality

Description: This level is characterized by the child's ability to build logical bridges or make connections between different emotional ideas. Reflection and the ability to understand another person's perspective also begin to emerge during this level. You may also notice children creating their own games, rules, and possibly toys. These skills begin between 36 and 48 months.

Signs of difficulty within this level may include: difficulty or inability to answer open-ended what questions, why questions or questions about time (i.e. when); difficulty recalling past events or understanding/anticipating what will happen in the future; lack of empathy; difficulty with peer relationships; decreased negotiation skills; decreased ability to explain reasons for actions, feelings, etc.

- 1. The child will close all symbolic circles in both pretend play and reality-based dialogues.
- 2. The child will respond to "Wh" questions, including who, what, where, when, and why.
- **3.**The child will debate, negotiate, and make choices when deciding what to play, what to do, where to go, and who goes first.
- **4.**The child will connect ideas in logical ways that make sense (not fragment, change topic, or become tangential).
- 5. The child will integrate concepts of time in ideas.
- **6.**The child will integrate concepts of space in ideas.
- 7. The child will integrate concepts of quantity in ideas and problem solving.
- 8. The child will explain reasons for feelings and actions.
- 9. The child will compare and contrast ideas, preferences, and other people's views.
- 10. The child will give opinions, selecting appropriate dimensions for views.
- 11. The child will create dramas with a beginning, middle, and end.
- **12.**The child will identify motives of other people or characters' actions and understand different points of view and feelings.
- 13. The child will predict feelings and actions of other characters.
- 14. The child will recognize complex intents, such as deception, sarcasm, and conflict.
- **15.**The child will reflect on feelings in both pretend dramas and conversations taking place in reality.



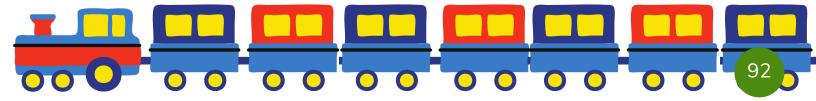
FDL 6 - Emotional Thinking, Logic, and a Sense of Reality

- **16.**The child will expand play to full range of emotional themes, including conflict, aggression, and morality.
- **17.**The child will reach higher levels of abstraction and will be able to see details as well as the big picture (trees and the forest).
- **18.**The child will recognize strengths and weaknesses in self and others.
- 19. The child will expand play to full range of emotional themes, including conflict, aggression, and morality.
- 20. The child will reach higher levels of abstraction and will be able to see details as well as the big picture (trees and the forest).
- **21.**The child will recognize strengths and weaknesses in self and others.

Overall Goal



To accurately profile a child in terms of their Comfort Zone (CZ), Sensory Motor Profile (SMP), & Functional Developmental Levels (FDL) to help the child move up in their functional development.

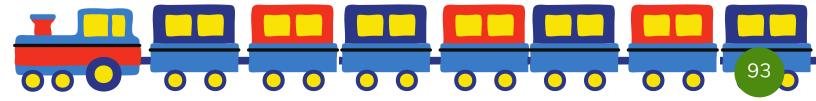


Intensive Case Study Workshop Learning Objectives





- Analyze case studies and be able to profile the child accurately.
- Describe the importance of the 'interactional process' in play.
- Identify where the child's 'affect' is to know the just right level of play.
- Describe the common barriers to playing effectively.
- Use play principles, methods, techniques, and activities to help the child move up in their FDL.





Overall Goal & Learning Objective Notes-





Case Study Destinations





Destination 1: Video Case Studies: FDLs 1-3

- Station 1: The Twins
- Station 2: Tuan
- Station 3: Boy on the Swing
- Station 4: Test Case: Tyler
- Station 5: Breslin



Destination 2: The Jamie Videos

- Station 1: Jamie Video Case Studies—FDL 4-6
- Station 2: Test Case: Bryce



Destination 3: Children Who are Higher Functioning

- Station 1: Kissing Brontosaurus
- Station 2: The Loose Caboose
- Station 3: Going to McDonalds
- Station 4: Dr. Granger
- Station 5: Shawn



Impact of Autism on The Family System

How to help parents be successful in engaging with their hard to engage children





DESTINATION 1:

Video Case Studies: FDLs 1-3



Case Study 1: Twins Jacob & Sammy





Learning Objectives

- List key characteristics for FDL 1-3
 - Describe one Comfort Zone activity for each of the boys.
- In the second video (After the PLAY Project Intervention), List the ways that mom and dad follow the boys' lead
- Compare
 - Jacob and Sammy's regulatory profiles
 - Jacob and Sammy's FDL profile
- Define the terms:
 - 'Holes/weaknesses'
 - 'Solid/strong'
 - > 'Capacities'
- Define the 'Interactional process' and be able to count 'circles of communication' Including 'opening' and 'closing' circles of communication.
- What does it mean to 'sweat'? Define the 'sweat/wait' ratio.
- Describe how would you help a child move from a FDL profile of 1-2 to FDL of 3



Learning Objectives Notes





Visit 1 Jacob & Mom-Notes



The Interactional Process





- Interaction is typically an unconscious process
- Consists of sharing attention and being engaged
- Involves back and forth 'Circles of Communication' (COCs)
- Two-way communication
- Opening a COC means initiating
- Closing a COC means responding contingently
- Good interactions are 'balanced' with equal amounts of opening and closing COCs
- A continuous set of back and forth circles of communication is called an 'encounter'
- Human interactions usually have so many COCs we can't count them

Why Do Parents Play Too High?





- They play at the age level of their child
- They are ambitious to help their child make progress
- Natural to teach with a focus on language and academics





Take Home Message-Notes



Zone of Proximal/Potential Development







Child Profile-Jacob

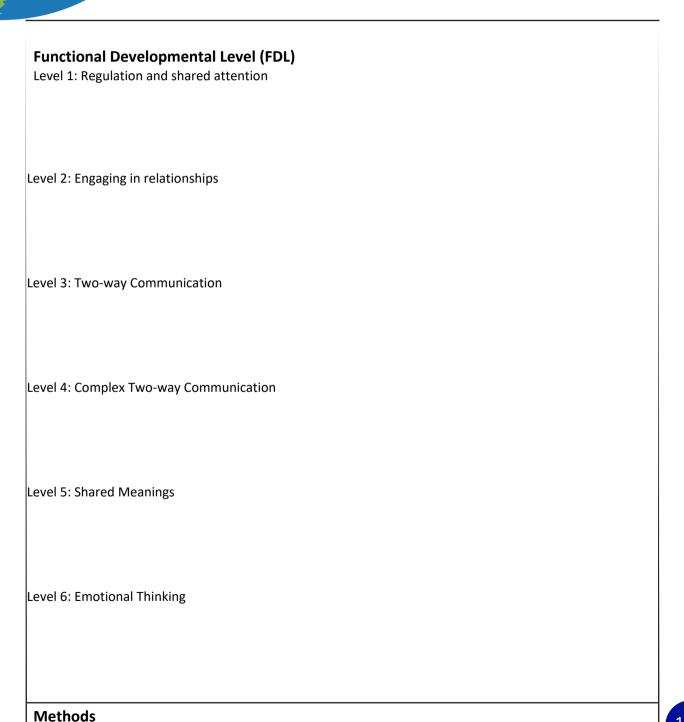


Co	omfort Zones (CZ)		
Sensory Motor Profile (SMP)			
1.	Visual Processing:		
2. N	lotor Planning:		
3.	Tactile Input:		
4.	Oral:		
5. O	lfactory:		
6.	Auditory:		
7.	Reactivity:		
8.	Vestibular/Proprioceptive:		
9.	Other:		

Child Profile- Jacob Continued

1. Read the child's cues and intent





Child Profile- Jacob Continued

Slow the pace of play, observing and waiting for the child's idea



Follow the child's lead, responding to what the child wants
Open and close circles of communication (back and forth interactions)
Build on the child's interests

Techniques

Activities



Visit 1 | Sammy & Dad-Notes



Child Profile-Sammy

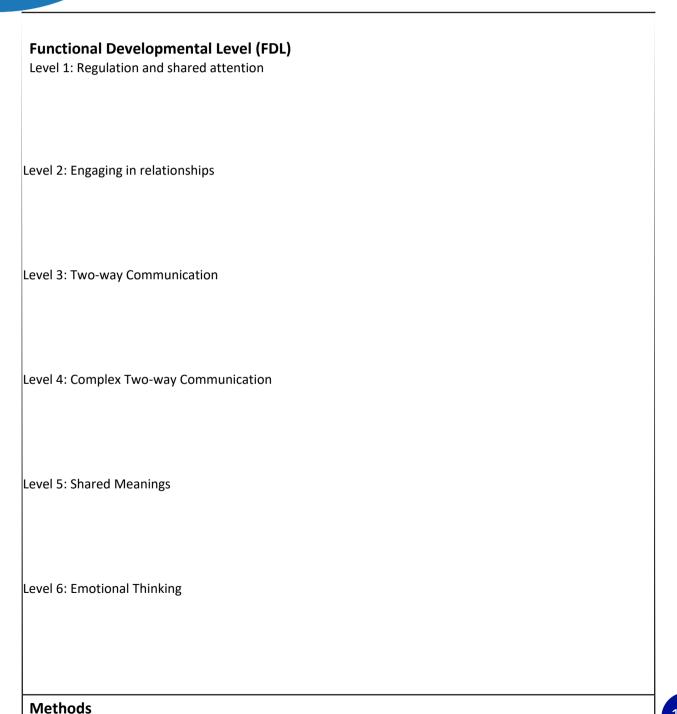


Co	mfort Zones (CZ)
Sen	sory Motor Profile (SMP)
1.	Visual Processing:
2. M	lotor Planning:
3.	Tactile Input:
4.	Oral:
5. O	lfactory:
6.	Auditory:
7.	Reactivity:
8.	Vestibular/Proprioceptive:
9.	Other:

Child Profile- Sammy Continued

1. Read the child's cues and intent





Child Profile- Sammy Continued



Slow the pace of play, observing and waiting for the child's idea Follow the child's lead, responding to what the child wants Open and close circles of communication (back and forth interactions) Build on the child's interests **Techniques Activities**

PLAY Methods



Station 1, Visit 2: Methods





PLAY Methods

- Read the child's cues to understand their intent.
- 2. Slow the pace of play, observe and wait for the child's cues.
- 3. Follow the child's lead, respond to what the child wants.
- 4. Open and close circles of communication (back and forth interaction).
- 5. Build on the child's interests.





The Twins Analysis-Notes





Make Every Interaction A Good Interaction-Notes



Twins | Take Home Lessons





- Even twins have different profiles
- Jacob is functioning lower because he is harder to engage
- Sammy is higher functioning because it is easier to engage him (FDL2) and he opens and closes more circles at (FDL3)
- · Sammy has capacities at FDL 4
 - He imitated
 - He problem solved
 - He followed a gestural command
- · PLAY Methods worked!
- Both boys still have 'holes' in the lower 3 levels
- Good example of COCs

Milestones/Age/FDL Chart



Milestones	Typical Age	FDL
Easily engaged	2-4 months	2
Initiates often	6-9 months	3
Understands routines	9-12 months	3
lmitates adults	9-12 months	3
First words	10-12 months	3
Follows 1-step commands	15-18 months	4
2 word sentences	2 years old	5
3+ words sentences	3 years old	6



Case Study 2: Tuan





Learning Objectives

- Describe how you would help a child with ASD who is 'top heavy'.
- Describe the importance of 'head down' posture.
- Define what it means to 'back-fill' the FDLs and describe how this helps to make the child more 'solid'.





Visit 1 | Tuan & Mom -Notes

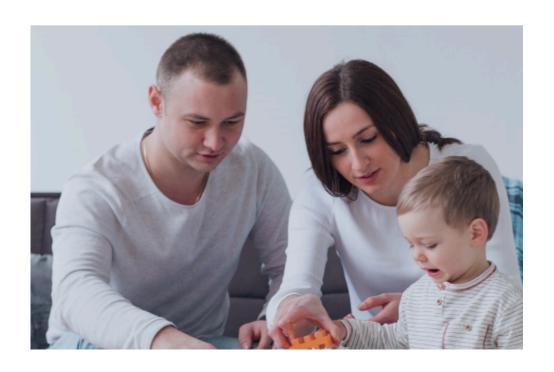


Tuan | Take Home Lessons





- Just because a child has language, doesn't mean that they are high functioning.
- Functional development is social development.



Child Profile-Tuan

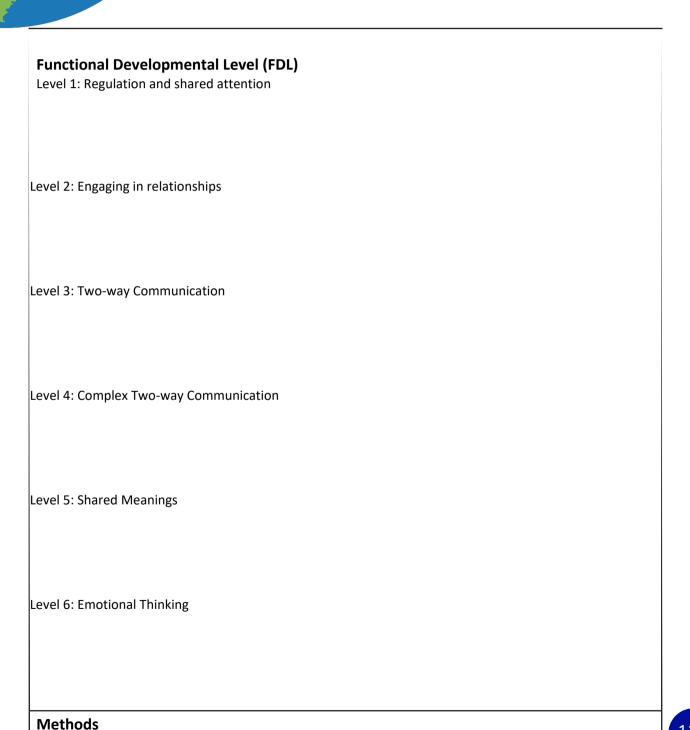


Co	omfort Zones (CZ)
Ser	nsory Motor Profile (SMP)
1.	Visual Processing:
2. N	Notor Planning:
3.	Tactile Input:
4.	Oral:
5. C	Difactory:
6.	Auditory:
7.	Reactivity:
8.	Vestibular/Proprioceptive:
9.	Other:
1	

Child Profile- Tuan Continued

1. Read the child's cues and intent





Child Profile- Tuan Continued



Slow the pace of play, observing and waiting for the child's idea Follow the child's lead, responding to what the child wants Open and close circles of communication (back and forth interactions) Build on the child's interests **Techniques Activities**



Tuan 1 Year Later Video -Notes





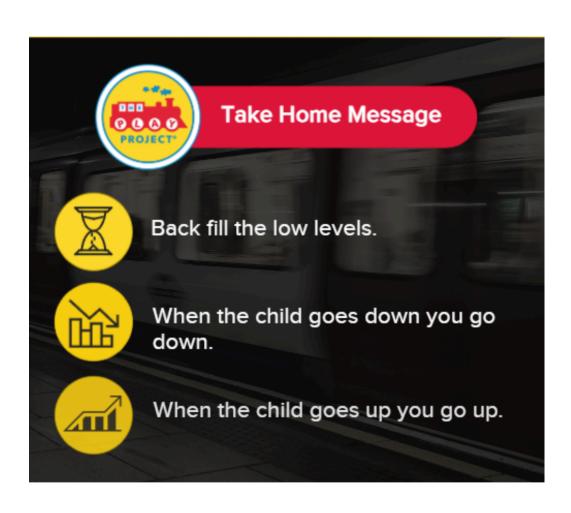
Tuan Another Year Later -Notes



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			12	23		
_	 -				7.	 _

Take Home Message

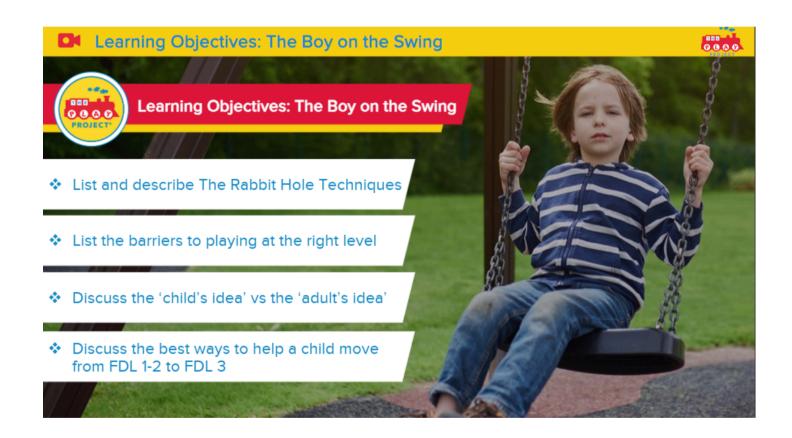






Case Study 3: Braden







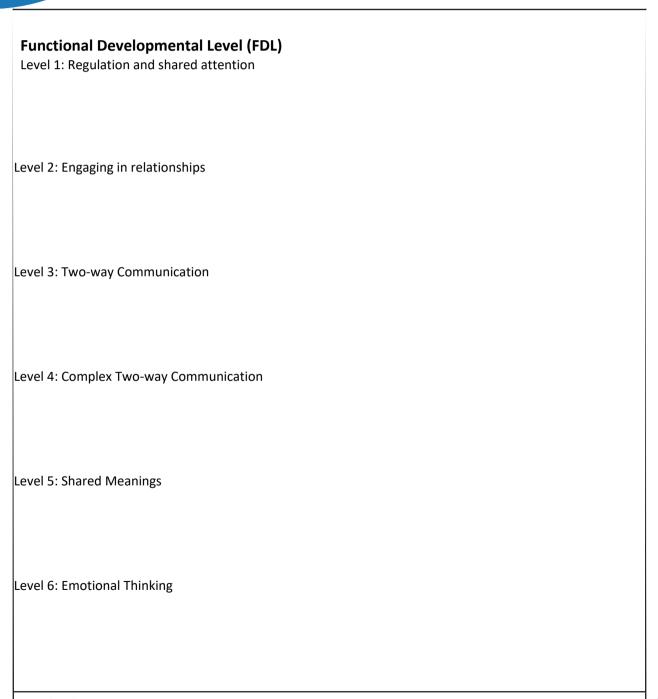
Child Profile-Braden



Co	omfort Zones (CZ)
Ser	nsory Motor Profile (SMP)
1.	Visual Processing:
2. N	Notor Planning:
3.	Tactile Input:
4.	Oral:
5. C	Difactory:
6.	Auditory:
7.	Reactivity:
8.	Vestibular/Proprioceptive:
9.	Other:

Child Profile- Braden Continued





Methods

1. Read the child's cues and intent

Child Profile- Braden Continued



Slow the pace of play, observing and waiting for the child's idea Follow the child's lead, responding to what the child wants Open and close circles of communication (back and forth interactions) Build on the child's interests **Techniques Activities**



Braden & Mom -Notes



Barriers to PLAYing at the Right Level



- 1) Meet the child where they are at
- 2 PLAYing too high
- 3 Whose idea is it



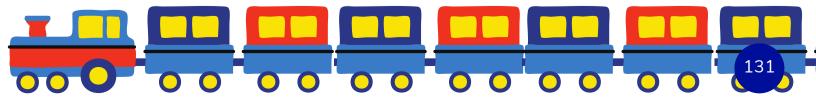
Placing Limits on Repetitive Behaviors





Limit TV, video. YouTube, tablets, and phones

Limit screens to 1-2 hours per day





Braden & OT- Notes



Rabit Hole Techniques







Keys to the Case/Take Home Lesson





Take Home Lesson

- Use the Rabbit Hole Techniques to join the child in their Comfort Zone.
- Ask yourself: "Where is his/her attention? What is his/her intention?"
- Sweat more and wait less i.e. work hard on getting engagement.
- But be careful to know: Whose idea are we following? The adult's or child's?
- Insert yourself into the play so the child is having fun with you.
 - Wait for eye contact or social referencing
 - Be silly
 - Be dramatic
 - Be surprising
 - Remember: Fun with people—the first principle

Case Study 4: Test Case-Tyler





Analyzing Videos

- · Immediate clinical impressions
- · Systematic analysis of child's profile
 - > CZ
 - ➤ SMP
 - FDL: How solid is this child at each FDL?
- · Parent/caregiver/adult interactional process
 - Principles
 - Methods
 - Techniques
 - Activities
- Determine the keys to the case





Tyler & Joanna/ Immediate Impressions - Notes



Child Profile-Tyler



Со	mfort Zones (CZ)
Sen	sory Motor Profile (SMP)
1.	Visual Processing:
2. N	lotor Planning:
3.	Tactile Input:
4.	Oral:
5. O	lfactory:
6.	Auditory:
7.	Reactivity:
8.	Vestibular/Proprioceptive:
9.	Other:

Child Profile- Tyler Continued





1. Read the child's cues and intent

Child Profile- Tyler Continued



Slow the pace of play, observing and waiting for the child's idea Follow the child's lead, responding to what the child wants Open and close circles of communication (back and forth interactions) Build on the child's interests **Techniques Activities**



Tyler's Systematic Analysis- Notes



 Methods:
 Techniques:
 Activities:
 FDL:



Creating a Monster - Notes



Case Study 5: Breslin





Learning Objectives

- 1 List at least 5 characteristics of FDL 3
- What are the 3 ways that caregivers can respond when a child 'fragments'?
- How can a caregiver help a child improve in their FDL 3 abilities?





Breslin & Mom/ Other Observations- Notes



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Child Profile-Breslin

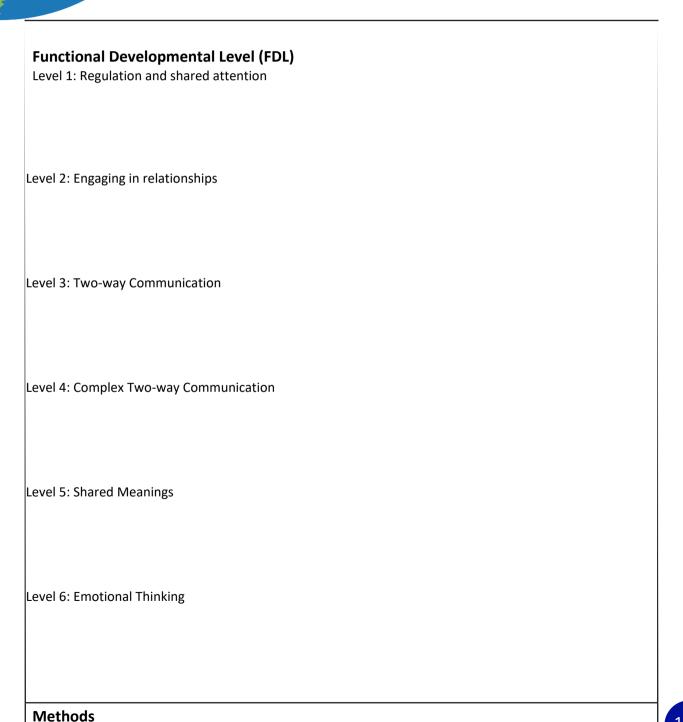


Co	omfort Zones (CZ)
Ser	nsory Motor Profile (SMP)
	Visual Processing:
2. N	Notor Planning:
3.	Tactile Input:
4.	Oral:
5. C	Difactory:
6.	Auditory:
7.	Reactivity:
8.	Vestibular/Proprioceptive:
9.	Other:

Child Profile- Breslin Continued

1. Read the child's cues and intent





Child Profile- Breslin Continued



Slow the pace of play, observing and waiting for the child's idea Follow the child's lead, responding to what the child wants Open and close circles of communication (back and forth interactions) Build on the child's interests **Techniques Activities**



Fragmenting- Notes



FDL 1-3 Summary









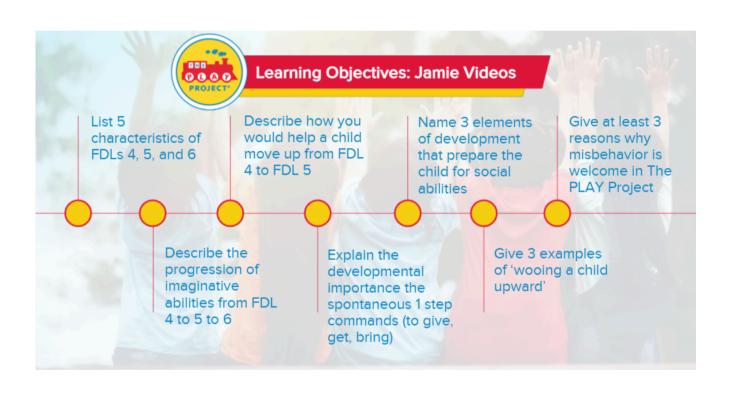
DESTINATION 2:

Video Case Studies: FDLs 4-6



Station 1: Jamie Videos









Jamie Videos Introduction- Notes



Child Profile-Jamie



Co	Comfort Zones (CZ)				
Sei	Sensory Motor Profile (SMP)				
1.	Visual Processing:				
2. N	Motor Planning:				
3.	Tactile Input:				
4.	Oral:				
5. Olfactory:					
6.	Auditory:				
7.	Reactivity:				
8.	Vestibular/Proprioceptive:				
9.	Other:				
1					

Child Profile- Jamie Continued





Methods

1. Read the child's cues and intent

Child Profile- Jamie Continued



Slow the pace of play, observing and waiting for the child's idea Follow the child's lead, responding to what the child wants Open and close circles of communication (back and forth interactions) Build on the child's interests **Techniques Activities**

FDL Thumbnails





FDL 1: Self-Regulation & Shared Attention

*begins at birth to 3 months

- Can remain calm and regulated enough to share attention with people
- · Can sustain brief episodes of interaction
- · Regulation derailed by Comfort Zone activities
 - Stimming, scripting, lining up, etc. remove attention
- When you see CZ, child has holes in FDL 1
- Use 'The Rabbit Hole Techniques' to join the child at FDL 1



FDL 2: Engagement & Relating

*begins between 2 and 7 months

- More sustained attention = engagement
- You call to them and they look—Circles begin!!
- · Peek a boo is the classic FDL 2 game
- · Key Question: How easy is it to engage the child?
- This is the 'sweat' level. The parent/professional has to do the work (i.e. sweat) to keep the child engaged
- · Hard to follow child's lead, but you can!
- · Watch out for visual activities
- · Use Rabbit Hole Techniques



FDL 3: Intentionality & 2-Way Communication

*begins between 3 and 10 months

- Opening and closing of 6-10 circles
- · Key activities: Simple cause and effect games
- · Key Question: Is the child initiating?
- We want to 'create a monster' (i.e. child won't leave you alone!)
- This is the 'wait' level. The parent/professional has to wait to see if the child will initiate (i.e. open circles)
- Beginning of understanding routines
- · Beginning of first single words



FDL 4:

Social Problem-Solving & Mood Regulation

*begins between 9 and 18 months

- Opening and closing of 10-30 circles
- Solid 4 =Totally 'with us'. Continuous flow of interaction
- · Gestural communication along with words. Imitation
- 50+ words
- Follows spontaneous 1 step commands: Go, get, give to. . .
- Feelings more and more organized
- Problem solver! Has his/her own ideas
- 'Little stories': 'Gets' meaningful sequences
- Simple pretend: Phone to ear. Bottle to baby's mouth



FDL 5:

Creating Symbols & Using Words & Ideas

*begins between 24 to 30 months

- · Classic two year old communication
- · 1-2 word phrases
- · What, Where, Who, Actions, Yes/No
 - · Not open ended 'What', Why, or When or Pronouns
- · One thematic pretend play with adults
- · Follows 1-2 step commands.
- · Greetings emerging
- Compliance
 - It is not following their lead to follow their lead



FDL 6:

Emotional Thinking, Logic, & Sense of Reality

*begins between 36 to 48 months

- · Talking in sentences
- · 'Why'. Can recall the immediate past
- · Builds bridges between ideas
 - · Identifies own and others' feelings
 - Recognizes relationship between feeling, behavior and consequences
- Two thematic play
- · Carries on simple conversations
- · Peer play established
- Misbehavior as developmental accomplishment



Jamie & Dad FDL 4 - Notes





The Importance of Gestures- Notes



FDL 4 Milestones





Jamie and FDL 4

- Continuous flow of interaction
- Love of fun sequences
- Gestural communication
- Growing numbers of words

Beyond routines to One-Step Commands

- · Give ('Give me that train.')
- · Get ('Get the ball.')
- Bring ('Bring this to daddy.')
- Go get ('Go get the bubbles.')

Routines

- Get your shoes
- Happens every day
- Time for a bath
- Let's go eat
- Let's go outside

- Continuous flow of interaction
- Love of fun sequences
- Gestural communication
- Growing numbers of words
- Beyond routines to one-step commands
- Problem solving
- Imitative pretend play
- Organized emotions



FDL 4 Milestones- Notes





Jamie & Mom FDL 4

- Notes





Video Analysis- Notes



Take Home Message









Jamie & Dad FDL 5

- Notes



FDL Milestones



Milestone	Typical Age	FDL
2-word sentences	2	5
3+ word sentences	3	6





Video Analysis - Notes





Helping Children Move Up- Notes



PLAY Techniques



PLAY Techniques: FDLs 1-4

PLAY Techniques: FDLs 4-6

- 1. Being With/Going for Affect
- 2. Sensory-motor Play
- 3. Taffy Pulling
- 4. Theme & Variation
- 5. Salient Language
- 6. Playful Obstruction

- 1. Imitative Pretend Play
- 2. Pretend Play: Everything Come Alive
- 3. Pretend Play: One Thematic
- 4. Mirroring-Reflecting/Labeling: Feelings
- 5. Speaking 'to' and Speaking 'for' the Child
- 6. Modeling Empathy





Imagination-Notes





The Stages of Imaginative PLAY- Notes



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Jamie & Mom FDL 5- Notes





Analysis- Notes





Jamie & Dad FDL 6- Notes



Elements of Social Ability







Promoting Emotional Intelligence









Cognition & Emotion - Notes



Cognition Milestones

The dryer spins around and

takes the water out





To make cookies, first you

the oven

put in the sugar, and butter, and flour and eggs, then you mix them up and put them in



Jamie & Mom Amusemen Park FDL 6- Notes



Station 2: Test Case-Bryce



Analyzing Videos

- 1. Immediate clinical impressions
- Systematic analysis of child's profile
 - a. Comfort Zone
 - b. Sensory Motor Profile
 - c. Functional Developmental Levels
 - How solid is this child?
 - Some, half, most, or all of an FDL
- 3. Parent/caregiver/adult interactional process
 - a. Principles
 - b. Methods
 - Are they 'Thinking circles'
 - c. Techniques
 - d. Activities
- Determine the main suggestions you would give to the family
 - a. Keys to the case
- Help the child become more 'solid' in the lower FDLs and/or
- 6. Move up in the higher FDLs

Child Profile-Bryce

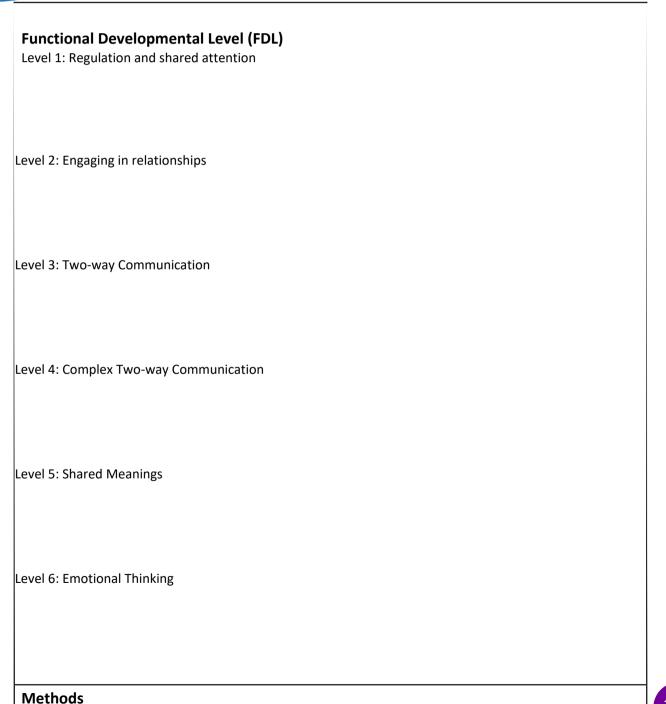


Comfort Zones (CZ)		
Sor	acory Motor Profile (SMP)	
Sei	nsory Motor Profile (SMP)	
1.	Visual Processing:	
2. N	Notor Planning:	
3.	Tactile Input:	
4.	Oral:	
5. Olfactory:		
6.	Auditory:	
7.	Reactivity:	
8.	Vestibular/Proprioceptive:	
9.	Other:	
1		

Child Profile- Bryce Continued

1. Read the child's cues and intent





Child Profile- Bryce Continued



Slow the pace of play, observing and waiting for the child's idea
Follow the child's lead, responding to what the child wants
Open and close circles of communication (back and forth interactions)
Build on the child's interests

iques

Build on the child's interests
Techniques
Activities

Common Difficulties in Analyzing Cases





1

Don't settle too quickly on one FDL. Each child has a range of functional abilities.

2

Use your knowledge of FDLs to establish how solid the child is and what their capacities are at each level. Don't miss the higher FDLs.

3

Just because the child has 'capacities' doesn't mean he/she is 'solid' at the higher levels. Notice the 'holes' too.

Common Difficulties in Analyzing Cases- Continued





4

The child's FDL profile doesn't fall off abruptly. See example of a profile below (not Bryce).

Example

	Example of a Profile							
FDL	Main Characteristic	How Solid						
1	Shared attention	Half						
2	Engagement	Most		*	*	:		
3	Simple 2 Way	Half					_	
4	Complex 2 Way	Some						
5	Shared Meanings	Not yet	FDL	1	2	3	4	
6	Emotional Thinking	Not yet		1/2	Most	1/2	Some	

5

Ask yourself, "Where is the fun?" This will lead you to the keys to the case for making suggestions for families.



Bryce's Case Analysis 1st Impressions of Mom -Notes





Bryce's Profile- Notes





Bryce's Case Analysis 1st Impressions of Dad -Notes





Family Implications - Notes



 	 	 _
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		_
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Bryce's Case Analysis 1st Impressions of PLAY Project Consultant-Notes





Bryce's Test Case Profile - Notes





Bryce's Keys to the Case - Notes





DESTINATION 3:

Higher FDLs 4-6



FDL Thumbnails





FDL 1: Self-Regulation & Shared Attention

*begins at birth to 3 months

- Can remain calm and regulated enough to share attention with people
- · Can sustain brief episodes of interaction
- · Regulation derailed by Comfort Zone activities
 - Stimming, scripting, lining up, etc. remove attention
- · When you see CZ, child has holes in FDL 1
- Use 'The Rabbit Hole Techniques' to join the child at FDL 1



FDL 2: Engagement & Relating

*begins between 2 and 7 months

- · More sustained attention = engagement
- · You call to them and they look—Circles begin!!
- · Peek a boo is the classic FDL 2 game
- · Key Question: How easy is it to engage the child?
- This is the 'sweat' level. The parent/professional has to do the work (i.e. sweat) to keep the child engaged
- · Hard to follow child's lead, but you can!
- · Watch out for visual activities
- · Use Rabbit Hole Techniques



FDL 3:

Intentionality & 2-Way Communication

*begins between 3 and 10 months

- · Opening and closing of 6-10 circles
- · Key activities: Simple cause and effect games
- · Key Question: Is the child initiating?
- We want to 'create a monster' (i.e. child won't leave you alone!)
- This is the 'wait' level. The parent/professional has to wait to see if the child will initiate (i.e. open circles)
- · Beginning of understanding routines
- · Beginning of first single words



FDL 4:

Social Problem-Solving & Mood Regulation

*begins between 9 and 18 months

- · Opening and closing of 10-30 circles
- Solid 4 =Totally 'with us'. Continuous flow of interaction
- Gestural communication along with words. Imitation
- 50+ words
- Follows spontaneous 1 step commands: Go, get, give to. . .
- · Feelings more and more organized
- · Problem solver! Has his/her own ideas
- · 'Little stories': 'Gets' meaningful sequences
- · Simple pretend: Phone to ear. Bottle to baby's mouth



FDL 5:

Creating Symbols & Using Words & Ideas

*begins between 24 to 30 months

- Classic two year old communication
- 1-2 word phrases
- · What, Where, Who, Actions, Yes/No
 - · Not open ended 'What', Why, or When or Pronouns
- · One thematic pretend play with adults
- · Follows 1-2 step commands.
- · Greetings emerging
- Compliance
 - It is not following their lead to follow their lead



FDL 6:

Emotional Thinking, Logic, & Sense of Reality

*begins between 36 to 48 months

- · Talking in sentences
- · 'Why'. Can recall the immediate past
- · Builds bridges between ideas
 - · Identifies own and others' feelings
 - Recognizes relationship between feeling, behavior and consequences
- · Two thematic play
- · Carries on simple conversations
- Peer play established
- · Misbehavior as developmental accomplishment

FDL Descriptions



FDL 1 - Self-Regulation & Shared Attention

Description: This level is characterized by the child's ability to enter and sustain a state of shared attention <u>with another person</u>, while remaining focused, organized, and calm. These skills are first learned between birth and 3 months.

Signs of difficulty within this level may include: fleeting attention/distractibility; difficulty with self-regulation (i.e. difficulty or inability to remain calm and content); frequent periods of inattention, distress, irritability, or lethargy (i.e. low level of arousal); presence of the child's comfort zone (CZ) such as: lining up objects, flipping through books, or other repetitive and isolating behaviors.

- 1. Child will sustain shared attention with a special adult in sensorimotor interactive play using the child's preferred and pleasurable sensory and motor modalities, such as movement, looking, touching, or listening.
 - 2. Child will regulate his sensory system in order to sustain shared attention with support.
- **3.**Child will regulate his sensory system in order to sustain shared attention independently.
- 4.Child will increase shared attention by increasing interactive circles of gestural communication, resulting in a continuous flow of interactions between child and adult rather than trying to focus on a particular object or toy.
- **5.**Child will sustain shared attention with a peer in interaction.
- 6. Child will sustain shared attention in a group.
- 7. Child will sustain shared attention independently across contexts



FDL 2 - Engagement and Relating

Description: This level is characterized by the child's ability to form relationships and attachment and to engage another person with warmth and pleasure. Engagement is sometimes referred to as intimacy or the ability to bond with and relate to others. This skill is first learned between 2 and 7 months.

Signs of difficulty within this level may include: difficulty with relationships and attachment, avoidance of people, decreased desire or ability to engage with people, decreased response to adult attention or affection, distrust, and/or apathy.

- **1.**The child will form relationships with special adults through pleasurable and enjoyable interactions.
- **2.**The child will sustain engagement in reciprocal social interactions with special adults that bring pleasure and joy.
- **3.**The child will sustain engagement in reciprocal social interactions when annoyed and protesting.
- **4.**The child will increase sustained engagement by increasing the circles of communication.
- **5.**The child will increase sustained engagement through a wider range of emotions, such as jealousy or fear.
- **6.**The child will sustain engagement with a peer with adult mediation.
- 7. The child will sustain engagement with a peer "expert player".
- 8. The child will sustain engagement within group interaction



FDL 3 - Intentionality and Two-Way Communication

Description: This level is characterized by the child's ability to participate in back and forth affective signaling and communication to convey intentions, interests and needs. These skills are first learned between 3 and 10 months.

Signs of difficulty within this level may include: difficulty with initiation and ideation, difficulty opening and closing 2-10+ circles; decreased response to a parent or caregivers overture; decreased ability to use gestures or body language to communicate (i.e. reaching, pointing, vocalizing, etc.); decreased interest in cause and effect; decreased ability or desire to interact.

- **1.**The child will interact in a back-and-forth rhythm in animated exchanges using facial expressions, sounds, and other gestures.
- **2.**The child will initiate purposeful interactions around desires (open circles) and will close circles following adult's response to her initiative.
- **3.**The child will increase number of purposeful interactions around desires for sensorimotor activities, to go somewhere, to obtain objects, or in response to adult
- strategies to expand the number of circles; for example, when the adult poses obstacles, plays "dumb," or creates extra steps to reach desired goal.
- **4.**The child will increase number of purposeful interactions using imitation.
- **5.**The child will increase number of purposeful interactions using simple gestures, such as reaching, taking, pulling, or pointing.
- **6.**The child will increase number of purposeful interactions across widening range of emotions, such as dependency, assertiveness, and jealousy.
- **7.**The child will increase purposeful interactions in various processing areas, including visual-spatial, motor planning, perceptual motor, auditory processing, and language.
- 8. The child will sustain purposeful interactions with a peer with adult mediation.
- 9.The child will sustain purposeful interactions with a peer "expert player."
- 10. The child will initiate purposeful interaction with a peer spontaneously.
- 11. The child will sustain purposeful interactions within group interactions



FDL 4 - Social Problem-Solving, Mood Regulation, & Formation of Sense of Self

Description: This level is characterized by the child's ability to use complex circles of communication by stringing together a series of gestures, actions and words into an elaborate problem-solving sequence of interactions which helps child develop a sense of self. These skills are first learned between 9 and 18 months.

Signs of difficulty within this level may include: difficulty or inability to open and close up to 20 circles of communication in a row (i.e. interactions may be brief and ideas are disconnected); decreased interest in simple cause and effect or pretend play ideas; decreased receptive and expressive communication; difficulty with motor planning, sequencing, or engaging in activities that involve 3 or more steps; difficulty following spontaneous 1-step commands; decreased problem solving skills and/or persistence.

- **1.**The child will express communicative intent through gestures or words to get what he wants.
- 2. The child will sequence (motor plan) in order to execute an idea, such as a desire for a cookie, to pull a chair over to a cabinet, climb up, open cabinet, open container, get cookies and smile at mom.
- 3. The child will sequence (motor plan) in order to execute a desire; for example, in order to play with Dad, who is reading the paper on the couch, the child will climb up, bounce on Dad, and pull him onto the floor to play.



FDL 5 - Creating Symbols and Using Words and Ideas

Description: This level is characterized by the child's ability to create ideas (symbols) observed in pretend play and words (phrases and sentences) to convey some emotional intention These skills begin between 24 and 30 months.

Signs of difficulty within this level may include: scripted, rehearsed, or otherwise unmeaningful expressive language; disinterest in or difficulty engaging in pretend play (i.e. tea parties or monster attacks); difficulty recognizing and expressing emotions; decreased negotiation skills; lack of humor; difficulty engaging in elaborate ideas that involve multiple steps; frequent use of actions rather than words (i.e. the child hits instead of saying: *don't do that!*).

- **1.**The child will initiate the use of realistic ideas in interactive imaginative play, such as by hugging the dolls.
- **2.**The child will initiate the use of ideas using realistic verbal interactions.
- **3.**The child will express ideas derived from her affect or intent, such as saying "Play outside!" when she wants to go outside.
- 4. The child will express ideas derived from her affect by combining words and reality-based actions, such as sequence of pretending to be hurt and going to the doctor to get better.
- **5.**The child will engage in conversations to express ideas.
- **6.**The child will elaborate on ideas through increasing verbal and symbolic play sequences, such as getting hurt in a crash, going to the doctor, being examined, and going home.
- 7. The child will create imaginary (not reality-based) ideas using magical thinking/powers.
- **8.**The child will assume different roles and act as the character in role-play.
- 9. The child will predict how others will feel or act in certain situations.
- **10.**The child will respond to other's feelings appropriately.
- **11.**The child will demonstrate confidence to resolve conflicts that come up in social situations, such as waiting, trading toys, taking turns, playing together, asserting self to retrieve his toy, joining in, or defending others.
- 12. The child will assume multiple roles and use figures to represent characters.
- 13. The child will expand ideas to include a wide range of themes and feelings.



FDL 6 - Emotional Thinking, Logic, and a Sense of Reality

Description: This level is characterized by the child's ability to build logical bridges or make connections between different emotional ideas. Reflection and the ability to understand another person's perspective also begin to emerge during this level. You may also notice children creating their own games, rules, and possibly toys. These skills begin between 36 and 48 months.

Signs of difficulty within this level may include: difficulty or inability to answer open-ended what questions, why questions or questions about time (i.e. when); difficulty recalling past events or understanding/anticipating what will happen in the future; lack of empathy; difficulty with peer relationships; decreased negotiation skills; decreased ability to explain reasons for actions, feelings, etc.

- 1. The child will close all symbolic circles in both pretend play and reality-based dialogues.
- 2. The child will respond to "Wh" questions, including who, what, where, when, and why.
- **3.**The child will debate, negotiate, and make choices when deciding what to play, what to do, where to go, and who goes first.
- **4.**The child will connect ideas in logical ways that make sense (not fragment, change topic, or become tangential).
- 5. The child will integrate concepts of time in ideas.
- **6.**The child will integrate concepts of space in ideas.
- 7. The child will integrate concepts of quantity in ideas and problem solving.
- 8. The child will explain reasons for feelings and actions.
- 9. The child will compare and contrast ideas, preferences, and other people's views.
- 10. The child will give opinions, selecting appropriate dimensions for views.
- 11. The child will create dramas with a beginning, middle, and end.
- **12.**The child will identify motives of other people or characters' actions and understand different points of view and feelings.
- **13.**The child will predict feelings and actions of other characters.
- 14. The child will recognize complex intents, such as deception, sarcasm, and conflict.
- **15.**The child will reflect on feelings in both pretend dramas and conversations taking place in reality.



FDL 6 - Emotional Thinking, Logic, and a Sense of Reality

- **16.**The child will expand play to full range of emotional themes, including conflict, aggression, and morality.
- **17.**The child will reach higher levels of abstraction and will be able to see details as well as the big picture (trees and the forest).
- **18.**The child will recognize strengths and weaknesses in self and others.
- 19. The child will expand play to full range of emotional themes, including conflict, aggression, and morality.
- 20. The child will reach higher levels of abstraction and will be able to see details as well as the big picture (trees and the forest).
- **21.**The child will recognize strengths and weaknesses in self and others.

The Higher FDLs | Moving from FDL 5 to Early FDL 6





- Children at FDL 5 really like 1 Thematic Play
 - Pretend vs Real
 - Exploring feelings
 - Generalizing to daily life
- We expand the FDL 5 play to reach up to FDL 6
 - Add some plot elements
 - o Going somewhere on the bus
 - Swords that hurt or being a bad guy
 - Getting a shot to feel better
 - Not just eating the food but liking the food
 - We build a story plot
 - We model reactions
 - We joke
 - We challenge them to experience new emotions
 - We mirror back the emotions

"Do not ruin the fun with strategies, techniques, or activities!"



The Kissing Brontosaurus



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The Loose Caboose







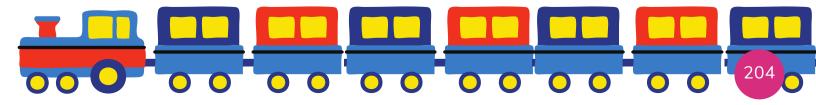
McDonald's- Notes



Key Elements of FDL 6









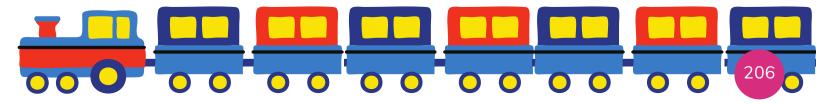
Dr. Granger- Notes



Multi-causal Thinking









Conclusion- Notes



THE P.L.A.Y. PROJECT



YOUFINISHED TRACK 11

IF YOU ARE STOPPING HERE-PLEASE TAKE OUR POSTTEST & SATISFACTION SURVEY IN ORDER TO DOWNLOAD
YOUR CERTIFICATE! IF YOU WOULD LIKE TO LEARN
ABOUT CERTIFICATION, PLEASE MOVE ON TO TRACK 2!



TRACK 2:

For Professionals seeking to become certified PLAY Project Consultants





Course Outline





Track 2 Details:

Track 2 is for professionals seeking to become PLAY Project Consultants and is 1 hour total.

- Track 2: Enginehouse 3: Certification Orientation
- Track 2: Enginehouse 4: Roles of The PLAY Project Consultant
- Track 2: Enginehouse 5: Working with families who need special supports.

Enginehouses 3-5:



Enginehouse 3

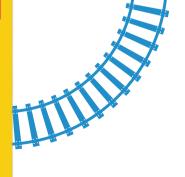
PLAY Project Certification Orientation

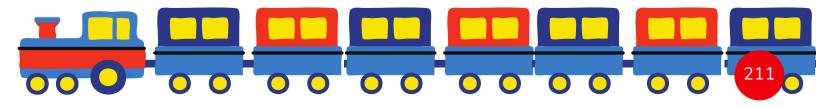
Enginehouse 4

Roles of The PLAY Project Consultant

Enginehouse 5

Families Who are Challenging to Work With





Enginehouse 3: Certification Orientation





The PLAY Project's Certification Program fully prepares pediatric professionals to provide our developmental, relationship-based model with high fidelity to families of young children with autism and other developmental delays. The PLAY Project Consultant Certification Training is fun, effective, and, above all, practical to implement.

PLAY Project Consultants typically have a master's level degree (or equivalent experience) in a field related to child development including:

- Early intervention providers
- Speech and language pathologists
- Occupational therapists
- Social workers
- Psychologists
- Special educators
 - Teaching PLAY Certification

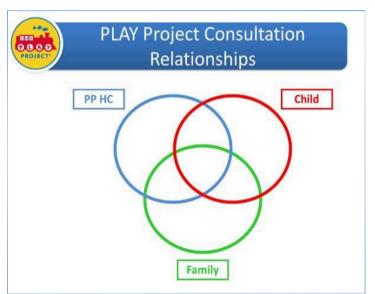


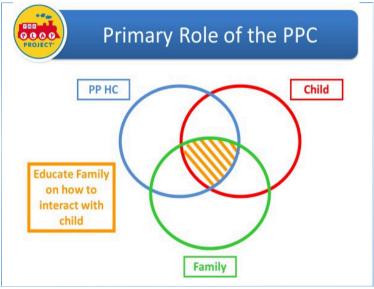
Orientation on PLAY Project Certification- Notes

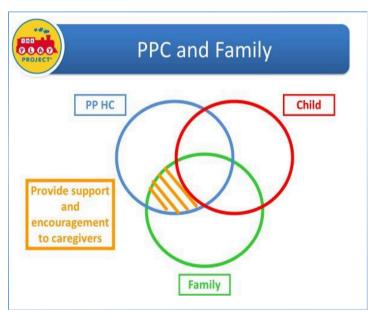


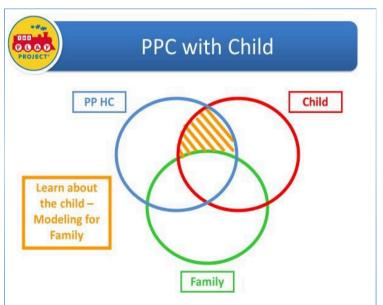
Enginehouse 4: Roles of a PLAY Project Consultant











Coaching Tips-When the Parents are not Playing at the Right Level



Catch parents being successful and compliment them especially when they wait, get circles, create engagement, and having fun. Show them on the video!

oRemember the feedback sandwich: one positive comment, one constructive comment and one positive comment.

Don't be afraid to be gently directive.

o"OK, Mrs. Smith, let's go for a few more 'circles'."

o"Let's wait and see what HE wants to do."

o"Let's try some theme and variation by figuring out five things we can do here."

Model and rehearse. Show the parents what to do by doing it (on video too).

Then ask them to do what you did (reassuring them that it's ok to make mistakes and that this work is not as easy as it looks!).

'Go theoretical'—share what YOU are thinking in terms of PLAY Plan strategies,

methods, and techniques and the model. Educate!

o"In our model we don't drill for results. Circle 1 Methods say that we have to follow the child."

o"I'm just waiting here, being with, Jacob to see what his idea is. Then I'm going to use the Rabbit Hole Techniques to get him engaged."

Direct the parents to 'the child's **attention** and the child's **intention**.

Distinguish between the parents' ideas and the child's ideas.

o"It's ok to have your own ideas I just want you to be aware of whose idea it is."

o"Singing a song was YOUR idea. Let's wait and see if Jacob comes up with his own idea. There, did you see that? He threw himself on the couch. THAT was his idea. Let's go with that and give him some deep pressure."

Use the video during a visit to show them what they did well (or could have done differently!) and give them feedback.

oDistinguish between (the interactional) **process** versus than the **content** (of what is happening).

Coaching Tips-When the Parents are not Playing at the Right Level



Define the terms of The PLAY Project clearly.

oMake sure parents know what the FDLs are and how to work with each level.

Quiz them in a fun way. "Do you know your levels yet?" oDefine 'circles', 'intention', 'cues', 'following the child's lead.'

oDefine: Zone of proximal development i.e. playing too high, too low, or just right.

oUse the glossary.

oMake sure parents know what 'technique' you're referring to.

Ask for feedback when you feel like things aren't going well.

oUse the satisfaction survey.

oReport on your feelings: "Can we talk about how The PLAY Project is going? I'm feeling a little worried about how we're doing together."

Blame yourself ("It's me; not you"). Never blame the parent. There's always a reason for their behavior.

o"I'm not sure I'm making myself clear."

o"I feel like I'm not helping you very much here."

o"What can I do to make this better for you?"

Join their wishes. "I know that you want Johnny to talk and I do too but if you play too high and don't fill in these lower levels, he won't make progress as fast as he can."

Invoke trust and openness by being open to feedback.

o"We've been working together now for 4-5 months. Please tell me what you need from me. I'm here for you."

o**Poll the parents** about their feelings: "How are you holding up?" and/or about their life events, family: "You have so much going on!"

Just be honest (with a smile). Once you've established trust you can be bluntly honest with a little sense of humor: "You were off there, Mom! Way too high!"



Roles of the PLAY Project Certification in the Family System- Notes



Roles of The PPC in The Family System





Coaching

- Teaching families the basics of The PLAY Project's 7 Circles of PLAY
- Guiding the families to be effective in their play during a visit
- Coaching from behind the camera
- Coaching in front of the camera when modeling
- Coaching anytime the parents are PLAYing during the visit



Modeling

- The PLAY Project Consultant PLAYing with the child
- Demonstrating principles, methods, techniques, and activities
- On camera and off
- Model while coaching
 - Sharing your thinking



Family Support

- Parallel process: We do with the family what we want the family to do with the child
 - We read the family's cues
 - Follow the family's lead, and
 - Engage them in long interactions
- We never blame!



Roles of the PPC | Coaching - Notes





Roles of the PPC | Modeling- Notes



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Roles of the PPC | Family Support- Notes



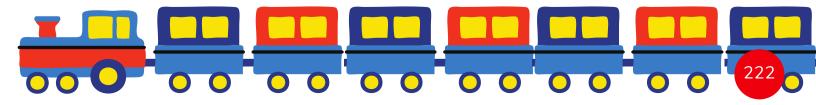
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Enginehouse 5: Working with Families Who are Challenging





The Teletubbies Theory: metaphor for what happens to PPCs when they have <u>gut-level</u> reactions & feelings about families





Working with Families Who are Challenging- Notes



Psychological Induction



Working with Families Who Are Challenging—Induction



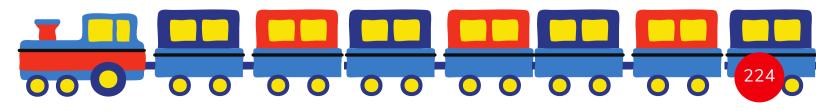
Psychological
Induction: A feeling or
set of feelings that
families evoke or
induce in professionals
that originate in the
family.



Transference:
Individual redirects
emotions and feelings,
often unconsciously,
from one person to
another.



Countertransference:
 Conscious or
 unconscious
emotional reaction of
the therapist to the
patient which may
interfere with
treatment.





Working with Families Who are Challenging | Feelings- Notes



