



Let's start with a joke!

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The PLAY Project's 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."

PLAY Project's 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."



We train pediatric professionals and child development experts to coach parents to help their young children with autism through play!

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- Introduction: The Need for Relationship-Based Models
- PLAY Project Training
- Overview of The PLAY Project
- 7 Circles of The PLAY Project
- Research: Evidence for PLAY

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ASD DSM 5

Challenges in social communication and social interaction:

- •Social emotional reciprocity
 •Back-and-forth
 conversation
- Maintaining relationshipsNon-verbal/gestural communication
- •Imaginative play

Restricted or repetitive patterns of behavior or interests:

- Insistence on sameness
- Fixed interests
- Sensory challenges



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Estimated Autism Prevalence 2023



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Need: Intensive Intervention

National Research Council (2001)

- Begin early: 18 month-5 years
- 15-25 hours/week
- 1:1 or 1:2
- Engaging
- Strategic Direction
- Comprehensive programs address ASD



The Autism Policy Dilemma: Part 1

- More children with ASD need more intervention
- Too many are not getting services and are on waiting lists
- The deficits of ASD are in the realm of social interaction
- Current service arrays not meeting the need

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The Autism Policy Dilemma: Part 2

- Main intervention: ABA (Applied Behavior Analysis) or EIBI (Early Intensive Behavioral Intervention)
- ABA has strong evidence for children with ASD over age 3
 - But it is delivered by professionals
- ABA is hard to administer with fidelity in community settings
- · Policy: Long wait lists, too many underserved

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Parent Implemented vs Behaviorist Models For the Treatment of ASD in Young Children

Key Elements	Parent Implemented Models (e.g. PLAY Project, PACT, ESDM, SCERTS)	(e.g. EIBI, VB, PRT, ABA)
Theoretical Framework	Developmental, Relationship, & Play-based	Behavioral/Operant Conditioning
Primary Focus of Intervention	Social interaction	Language & IQ
Intervention Methods	Child centered Promote social interaction through play	Program centered Teach child skills using rewards/reinforcement
Used as a Primary Intervention	< 3 yr olds	18m-6 yr olds
Programmatic Approach	Trained professionals coach parents	Professionals (BCBA) supervise front line staff
Provider of Services	Parents	Therapists
Annual Implementation Cost	\$5000	\$50,000
Treatment Sessions	4 hours per month of parent training. Parents then provide 10-15 hours per week of intervention with the child	20-40 hours/week provided by therapists who work directly with the child
Length of Intervention	2-3 years	2-5 years
	Objectives achieved.	Objectives achieved.
Assessment of Progress	Focus—Social functioning	Focus—Pre-academics, Language
Evidence	Very Good	Very Good



Building a House





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Climbing the Language Mountain



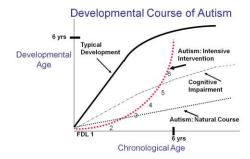
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Parent Implemented Interventions

- Developmental, relationship-based
- · Less costly, easily implemented
- Recognized as evidence based by the National Professional Development Center
- Parents as the child's best play partner
- Uses natural environment of the home
- Gain in hours of intervention by making every interaction count

Developmental Course of Autism



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- · Autism Early Intervention
- Intensive (15 hrs/week)
- · Home-based (usually)
- · Parent implemented
- Developmental & relationship focused
- · Strengths oriented
- Fun & playful
- Collaborative
- Evidence-based







PLAY Consultants Provide the Service

- PLAY Consultants are masters level pediatric professional and child development experts
- Speech/Language Pathologists, Occupational Therapists, Social Workers, Early Intervention Providers, Psychologists, & Physicians
- Hundreds of PLAY Consultants are providing PLAY autism intervention nationally & internationally
 - Dozens of states and several countries*
- PLAY Consultants coach parents to do what the child loves.

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The PLAY Project Motto

"When you do what the child loves, the child will love to be with you."

—Dr. Rick

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PLAY Efficiency

1 PLAY Project Consultant Can Serve 25 Children





What Agencies Use PLAY?*

- Medical rehabilitation (SLP, OT)
 - Often covered by private insurance*
- Early Intervention (Birth to 3 programs)
- · Statewide in Ohio, Michigan, Illinois
 - 70% of Counties adopted PLAY for its Early Intervention (B-3) system
 - 25 School Districts in Michigan
- Behavioral health agencies (private insurance and Medicaid)

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What Does a PLAY Consultant Do?

- Make home visits once a month for a 2-3 hours* or once a week in Early Intervention settings
- Coach the parents and model for the parents
- Videotape parents' play & provide detailed midmonth video review & written feedback
- Encouraged parents to PLAY 2 hours per day in 15-20 minutes sessions & during daily activities
- Follow the 7 Circles of The PLAY Project and do what the child loves. . .

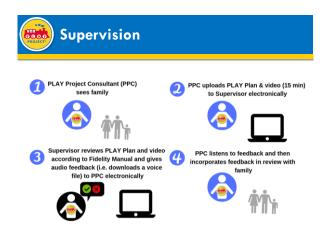
*Clinic & office settings too

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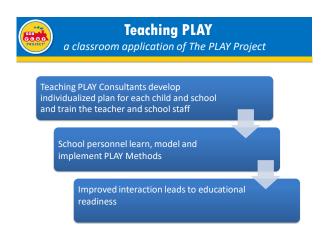


How are PLAY Consultants Trained?















- Introduction to Teaching PLAY (Online)
- Certified TP Professional Training
 - School staff receive training from a Teaching PLAY Consultant
- Certified Teaching PLAY Consultant (TPC)
 - Similar training as a PLAY Project Consultant (PPC)
- Dual Certified Consultant: PPC & TPC
 - Similar training as PPC
- TP Add On Certificate
 - For PPCs only

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PLAY Autism Intervention

- Using the 7 Circles of PLAY as a guide, PLAY Consultant trains and supports parent to effectively engage child
- · 7 Circles is the actual experience of the family
- · Key elements of the program:
 - Parent support and guidance: coaching, modeling, and feedback
 - Video footage: capture parent-child interaction
 - PLAY Plan: provides clear techniques and activities for parents to engage child

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PLAY Autism Intervention is. . .

- · Family and child centered
- Empowering for parents
- · Relationship-based
- · Playful & fun
 - Addresses the core deficit: social impairment

"When you do what the child loves, the child will love to be with you. "—Dr. Rick



Circle 1: PLAY Project Principles

- Fun with people—doing what the child loves
- Put in the time—2 hours per day broken up into 15-20 minute sessions
- Accurately profile the child in terms of their Comfort Zone, Sensory-Motor Profile & Functional Developmental Levels
- Based on the child's profile, play at the right level



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Principles: Fun with People







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Circle 1: PLAY Project Methods

- · Read the child's cues and intent
- 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





Circles of Communication

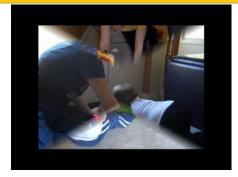
- When we send a message to someone else, we open a circle of communication.
- The person closes the circle when they acknowledge our message as received.
- This is the essence of social interaction.



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Case Study: Julian's 1st Circles



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PLAY Methods: Complex Circles





7 Circles of the PLAY Project



Circle 2: Understanding Each Child's Unique Profile



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Circle 2: Each Child has a Unique Profile

- Comfort Zone (CZ)
- Sensory Motor Profile (SMP)
- Functional Developmental Levels (FDLs)



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Circle 2: Comfort Zone

- What the child does when you let them do whatever they want to
- Repetitive, stereotyped, and dominating interests
- When you see CZ activities the child has 'holes' in FDL 1
- · In their own world, not 'with us'







Case Study: Comfort Zone—Sand



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Circle 2: Comfort Zone

- Doors, drawers
- Lining up
- Flipping pages of books
- Sensory self stimulation (hum, jump, spin. . .)
- Books
- Puzzles
- Letters, numbers, colors
- You tube
- Trains
- Thomas

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O O O O PROJECT

The Rabbit Hole Techniques

- 1.Be with
- 2.Narrate
- 3.Help the child 'do it better'
- 4.Imitate the child
- 5.Use Theme & Variation
- 6.Change the sensory modality





Circle 2: Sensory Motor Profile

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

- Visual Processing
- Tactile
- Auditory
- Oral
- Olfactory
- Motor Planning
- Vestibular
- Proprioceptive



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Case Study: SMP Part 1

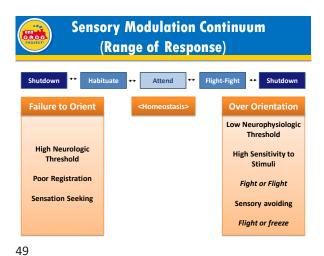


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Case Study: SMP Part 2





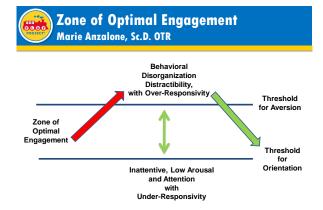
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SMP: Self Regulation

- Self regulation: The ability (or inability!) to stay calm and attentive (i.e. regulated) during social interactions
- · Sensory diet means 'feeding' sensory needs
- · Noisy chaotic environments are overwhelming
- 3 Types of dysregulation—Lucy Miller PhD:
 - Sensory seekers
 - Over-reactive
 - Under-reactive



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Incorporating the child's unique sensory motor preferences into play is the key to moving the child into their "Zone of Optimal Engagement"

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- Self regulation and shared attention (FDL 1)
- Engagement (FDL 2)
- Two-way Communication (FDL 3)
- Complex Two-way Communication (FDL 4)
- Shared Meanings & Symbolic Play (FDL 5)
- Emotional Thinking (FDL 6)



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Circle 3: The PLAY Plan

Individualized Techniques & Activities



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- Techniques and activities answer the question: "What can I do to engage my child?"
- Individualized techniques and activities based on the child's profile.
- Activities answer the question: "What would be fun for Johnny/Susie?"



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Circle 3: Techniques

The Purpose of the Techniques:

- Provide parents and professionals with ideas for engagement
- · Improve initiative & flexibility
- Increase numbers & complexity of circles of communication
- · Improve ability to solve problems
- Promote fun, silly, engaging interactions!





Circle 3: Techniques—BEAR FART!





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Circle 3: Activities

Activities are generated based on the child's profile (FDL, SMP, & CZ). Examples:

- · Rolling child up in a rug
- Swinging in a blanket
- Finger painting with shaving cream, colored glue with sparkles, etc.
- Puzzles
- Pretend: dress up, crashing cars, tea party, dolly sleeping, dinosaurs chasing a man, etc.



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LEVELS 1 & 2 Sensory/Cause and Effect

LEVELS 3 & 4
Sequences/
Simple Pretend

LEVELS 5 & 6 1&2 Theme Pretend

- Gently shaking arms or legs
- · Gently squeezing arms, leg, head.
- Rolling child up in a rug
- Swinging in a blanket
- Chase: "I'm gonna get you"
- Get the bubbles, balloon, etc.Ball play (rolling it back and forth)
- Pretend: dress up, crashing cars, tea party, dolly sleeping, dinosaurs chasing a man, etc.
- Real hide and seek, not just peek a boo.
 Hide a doll and say "Where is the dolly?"
- Hide a doll and say "Where is
 Duck, duck, goose



7 Circles of the PLAY Project



Circle 4:
Family Guidance

Coaching, Modeling, & Feedback



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Circle 4: Family Guidance

- PLAY Consultant
 - Models PLAY Techniques
 - Observes and Coaches PLAY Partners (Parents)
 - Provides written Feedback on PLAY Session





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Case Study: Julian Part 3







Circle 5: Engagement Adult & Child PLAY time



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- Playful & fun: "When you do what the child loves, the child will love to be with you."
- 2 hours per day, broken up into 10-20 minute PLAY sessions
- Daily routines such as meal time, bath time, and bed time should be used for interaction
- · Research says completely doable for families



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7 Circles of the PLAY Project



Circle 6: Review

Video & Written Feedback









- Video Review
 - -Observations and suggestions
- Written summary
 - Keys to the child's case
 - -Child Profile (CZ, SMP, FDL)
 - -Methods
 - -Techniques
 - -Activities



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7 Circles of the PLAY Project



Circle 7: Change & Growth Revise PLAY Plan As child develops



Circle 7: Change and Growth

- · Reassess the child's progress
- Modify the PLAY Plan to best meet the changing needs of the child and family



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Circle 7: PLAY Clinical Goals

- · Joyful relating
- · Simple and complex nonverbal gestures
- Long interactive sequences (e.g. 50+)
- "Circles" of spontaneous verbal communication
- Shared social attention (FDL 1-3)
- Symbolic language related to feelings (FDL 4-6)
- 'With us' continuously, not fragmented/stuck in CZ
- · Socially functional & interested in others



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Case Study: Julian's Turning Point





Case Study: Julian Becomes Symbolic





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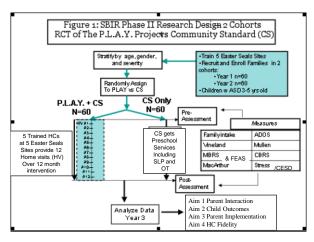
Pre/Post U of M Autism (2007) SBIR Phase 1 Feasibility 2005-7 SBIR Phase 2 RCT 2009-12 JDBP 2014!

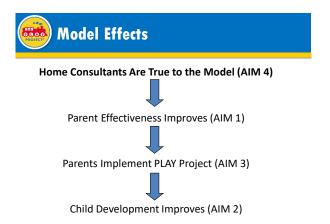
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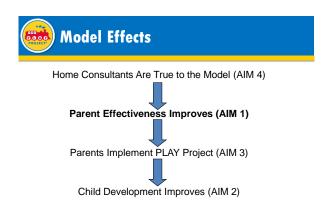


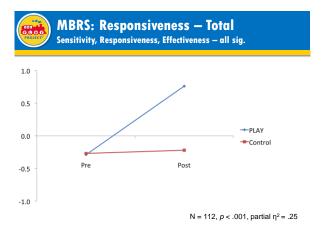
PLAY Project Research

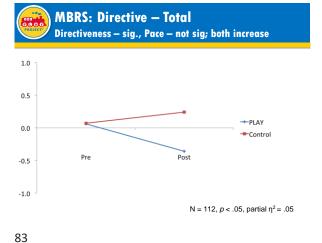
- SBIR NIMH Phase II—Awarded, Sept. 2009
- 3 Year, \$1.85 Million
- · Easter Seals & Michigan State University
- · RCT, multi-site, blinded study
- 5 ES sites, 60 children per year x 2 years = 120.
 Largest study of its kind in US
- Results published in Journal of Developmental and Behavioral Pediatrics
 - J Dev Beh Pediatr. 2014; 35(8): 475-485.

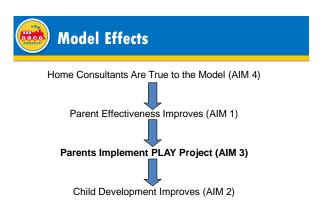




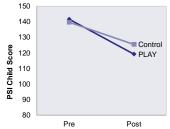








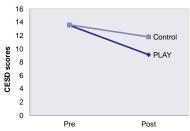




Time x group interaction: p = .15 (ns), partial $\eta^2 = .043$.

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Aim 3 Results: Parent Depression



Time x group interaction: p = .24 (ns), partial $\eta^2 = .028$.

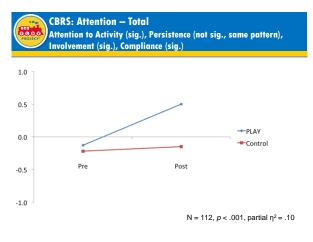
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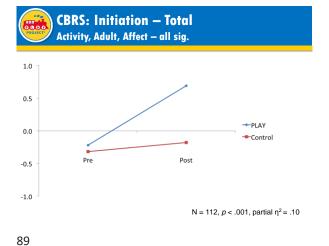


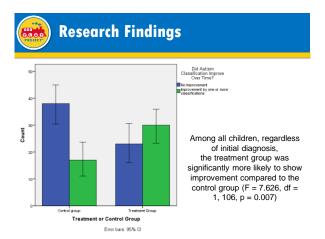
Home Consultants Are True to the Model (AIM 4)



Child Development Improves (AIM 2)









Significant improvements in:

- Caregiver/parent and child interaction
- Social interaction of children with autism
- social-emotional development of children with autism
- First study using parent implemented, developmental, relationship based model to show improvements in autism symptomology
- No increase in stress; reduction in depression

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Research: Implications

- PLAY Project offers a replicable method
- Uses an efficient training and certification model
- · Cost effective to parents and society
- · Can be broadly and quickly disseminated
- · Serves a growing need
- Gets children off of waiting lists and into services

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PROJECT

Ohio PLAY Project Evaluation

- Ohio DODD Grant, August 2015 Family Child Learning Center, Akron Children's Hospital
- PI: Marilyn Espe-Sherwindt and team
- 150 EI Home Consultants trained
- 70% of Counties in Ohio served
- Est. 500 children served per year in Ohio
- Very high satisfaction of HC with training
- Very high satisfaction of parents with PLAY Autism Early Intervention

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O O O O PROJECT

PLAY Project in Ohio



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Thank you!

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