

PLAY PROJECT IMPLEMENTATION QUESTIONNAIRE

CASE SUBMISSION PRACTICE

PLAY Project Consultant:

Organization Name:

STEPS:

4. Use the password PlayOn! to gain access to the secure area		
5. Click the Case Submission Form		
6. Within the Case Submission Form, choose your course facilitator as your supervisor7. Select "test case" as your case number8. Click Submit!		Date:
How many children with autism are you currently serving? What is your goal?		
How will you ensure that you have at least 5 children with autism (or other appropriate profiles for		
PLAY) over the 18 months of supervision?		
What setting do you plan to deliver PLAY? (home, clinic, classroom/school, TelePLAY, hybrid)		
How frequent will your visits be?		
*If a school setting, how do you plan to engage parents?		

Who in your organization or community can provide you with reflective supervision and/or support as you implement PLAY?		
List current or potential referral sources. How will you reach out to these sources to let them know about PLAY?		
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about PLAY?		
What materials do you plan to use to communicate with your community, referral sources, and clients?		
What questions or concerns do you have before you begin providing PLAY?		
What would you like more information about?		
What are you most looking forward to implementing PLAY?		
What are you most looking forward to implementing rear :		