

**AUTISTIC SPECTRUM DISORDER INSTRUCTIONAL SUPPORT
PLANNING PROCESS – CATEGORY “G”**

Student’s Name _____ Grade _____
 School _____ DOB _____
 Date _____

DOMAIN	STRENGTHS	NEEDS	A	B	C
			Choose one (N), see note below*		
SOCIAL/INTERACTION					
COMMUNICATION					
BEHAVIOURS/EMOTIONAL FUNCTIONING					
SELF DETERMINATION & INDEPENDENT LIVING					
COGNITION					
OTHER HEALTH FACTORS					
ACADEMICS & FUNCTIONAL ACADEMICS					
*Team Decision: A = mild impairment of functionality; B = moderate impairment of functionality; C = complex and/or intense impairment of functionality					
Goals Developed to Address Needs Identified Above:					
Objectives and Strategies to Address Goals Developed:					
Data Sources to Monitor Outcome/s and Goal Achievement:					
Review Date:					

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SUPPORT PLANNING PROCESS –CATEGORY “G”

DESCRIPTION OF DOMAIN & POSSIBLE SOURCES INFORMATION OF	A	B	C	
<p>SOCIAL INTERVENTION</p> <ul style="list-style-type: none"> -Social/Emotional reciprocity Sympathizes and empathizes with others in an intuitive “give and take” fashion that guides social interaction (e.g., desire to please others, concern about effects of behaviours on others) -Social Awareness –Understands the point of view of others -Social limitation – Copies the actions and attitudes of others -Joint Attention -Symbolic play -Forms relationships with peers -Initiates social interactions and responds -Seeks to share social experiences with others <p>POSSIBLE SOURCES OF INFORMATION</p> <ul style="list-style-type: none"> -File review -ADOS (Autism Diagnostic Observation Scale) Reciprocal Social Interaction Subtest -ADI-R (Autism Diagnostic Interview-Revised) Current Behaviour: Qualitative Abnormalities in Reciprocal Social Interaction -VABS (Vineland Adaptive Behaviour Scales) -SIB-R (Scales of Independent Behaviour-Revised) -Social Interaction and Communication Skills -ASIEP-2-(Autism Screening for Education Planning) -Play Assessment -Other 	<p><i>Student exhibits mild impairments in functioning occasionally and intermittently</i></p> <ul style="list-style-type: none"> Some difficulties with social rules (turn taking, sharing, and/or initiating and maintaining interactions and conversations. Engages others around shared narrow interests but has difficulty engaging interactively. Plays passive role in play, plays beside rather than with) and seems not to notice if others are not interested. Occasional unconventional play with toys (e.g., lining up toys). Some difficulty understanding and using non verbal behaviours (e.g. limited facial expressions and gestures, eye contact) Some shyness and avoidance of relationships, but does interact socially with some peers. Initiates interactions and responds in social interactions, but in an unusual manner (odd language, fixating on limited topics/activities, silly or immature behaviours). Some difficulty imitating others verbally and/or non-verbally. Imitation may be delayed or stereotyped. Some difficulty empathizing and having insight into the feelings of others. Some limited interest in what others find interesting once the task demands are understood. 	<p>The student’s level of functioning</p> <p><i>A history and likelihood of ongoing impairment of functioning, but low intensity and not necessarily in every setting</i></p> <ul style="list-style-type: none"> Ongoing difficulties with social rules (turn taking, sharing, understanding emotions and perspectives of others) and with initiating and maintaining interactions and conversations. Social play frequently rigid, repetitive and routine. Aware of others but usually does not enter into play with others (e.g., watches other children). Frequently uses toys in very unconventional ways (e.g., lines up toys, stacks blocks). Ongoing impairments with non verbal behaviours (e.g. clumsy, inappropriate body language and expressions, difficulty recognizing or responding to others expressions or emotions) may make student appear insensitive. Considerable aloofness, but does engage in some degree of socially interactive activities with some people. Ongoing difficulties with spontaneous verbal and/or non-verbal imitation of behaviours. Imitation may be mechanical. May offend or antagonize others due to social difficulties. Ongoing difficulties understanding other’s thoughts and feelings. Rarely does what others perceive him/her. Social interactions are usually one-sided. <p>Examples of Supports</p> <ul style="list-style-type: none"> Small group instruction or individualized instruction on an ongoing basis throughout the year. Regular cueing, direct instruction and support. Integrated play groups, social stories, visual scripts, regular rehearsal, embedded routines. Additional supervision during many unstructured times, particularly in social situations. 	<p><i>Significant impairment of functioning Occurs across multiple settings</i></p> <ul style="list-style-type: none"> Severe and sustained delays with socially adaptive behaviours and responsiveness, and with social interaction in a variety of environments. Lacks modesty Extremely unusual social play or no pretend play. Does not touch or play with toys. Engages in self stimulatory behaviour not involving toys (e.g., stares at toys). Seriously impaired non-verbal behaviours. Extreme aloofness /severe withdrawal / self isolation, appears to be oblivious or unaware of others. Misses contextual cues and does not adjust social language and behaviour to varying contexts and people so behaviour is frequently inappropriate or embarrassing. Does not engage in socially interactive activities, or form even limited peer friendships. Seldom initiates others (verbally and/or nonverbally) severely limiting functionality. Detached from the feelings of others. Little or no understanding of the mental states (intentions, beliefs, desires) of others. 	<p>Examples of Supports</p> <ul style="list-style-type: none"> Provide direct individualized instruction and intensive practice in most/all social situations. Specify and intensify individualized support required for student to respond or engage. All social situations require mediation.

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<p align="center">COMMUNICATION</p> <p>POSSIBLE SOURCES OF INFORMATION</p> <ul style="list-style-type: none"> -File review -Speech / Language assessments -Adaptive assessments ADOS (Autism Diagnostic Observation Scale); Communication Subtest -ADIR (Autism Diagnostic Interview-Revised Qualitative Abnormalities in Communication) TOPS (Test of Pragmatic Skills) -Bracken Basic Concept Scale -CELF-4 (Clinical Evaluation of Language Fundamental-4th Ed) -Other 	<p><i>Student exhibits mild impairments in functioning occasionally and intermittently</i></p> <ul style="list-style-type: none"> □ Usually communicates experiences, interests, expectations or curiosity with some help □ Language may be appropriate and functional but sometimes unusual or idiosyncratic (e.g. echoing memorized phrases, stilted, pronoun confusion, rote repetition, lengthy monologues, pedantic or formal). □ May be non-verbal but can use a technical communication system and can communicate through simple gestures or mime. □ Some difficulty adjusting language to varying social situations. □ Sometimes misinterprets body language □ Has difficulty with conversations, doesn't follow the flow of a conversation. □ Sometimes appears naive, less sophisticated and literal □ Occasional clumsy body language (e.g., peculiar gaze, staring, inappropriate expressions). □ Mild difficulties understanding and processing verbal information, especially if delivered quickly, in a multi step format, or if subtle or figurative language is involved. □ Sometimes seems disinterested in the other side of a conversation and may not ask or comment on the other's thoughts. 	<p align="center">The student's level of functioning</p> <p><i>A history and likelihood of ongoing impairment of functioning, but low intensity and not necessarily in every setting</i></p> <ul style="list-style-type: none"> □ Sometimes interacts and attempts to communicate with peers but has ongoing difficulties. □ Alternative or systematized methods of communication may be required. □ May use an alternative communication system, but not yet effectively. □ Meaningful speech is often mixed with the echoing of memorized words or the use of stereotypical and repetitive language. Frequently difficult to follow the individual's train of thought in a conversation. □ Ongoing difficulties adjusting language to varying social situations (e.g., often off topic, many misinterpretations and misunderstandings, "out of sync" with peers and adults, often uses inappropriate comments but doesn't understand what s/he did wrong). □ Complexes only simple commands and takes comments very literally (e.g. confused by phrases such as "pull up your socks"). □ Frequently ignores others in conversation. 	<p align="center">Significant impairment of functioning Occurs across multiple settings</p> <ul style="list-style-type: none"> □ Rarely initiates or attempts to communicate with peers or others. □ Absence of spoken language. □ Limited communication. Profound difficulties communicating by speech or other methods and is not assisted by leading questions □ May be non-verbal with no effective communication system in place. □ Frustration, distress, and possible aggression due to profound communication difficulties. □ Concrete visual supports (real objects, photographs) are often essential. □ Absence of most intelligible words or peculiar use of recognizable language (e.g., significant echolalia, stereotypical language). □ Significant impairments adjusting language to varying social situations (e.g., has no sense of what one says to an adult vs a peer vs storekeeper). □ Student may be interpreted by others as being intrusive or harassing since s/he does not "get" the rules and has serious difficulties with boundary issues.
	<p align="center">Examples of Supports</p> <ul style="list-style-type: none"> □ Some case management. □ Small group or individualized instruction on an intermittent basis. □ Some SLP consultation, visual support system and/or individualized instruction. □ Teacher implements specialized supports and strategies in the classroom, may have mediated role playing with peers. 	<p align="center">Examples of Supports</p> <ul style="list-style-type: none"> □ Integrated case management. □ Group support, interventions, individualized instruction on a regular basis. □ Structured facilitated group lessons. □ Use of visual cues and supports. 	<ul style="list-style-type: none"> □ Extensive, intensive integrated case management. □ Detailed and direct intervention plan and support system. □ Specialized and complex communication system required for basic needs, and specialized expense required to maintain this system.

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DESCRIPTION OF DOMAIN & POSSIBLE SOURCES INFORMATION OF	A	B	C
<p align="center">BEHAVIOURS / EMOTIONAL FUNCTION</p> <p>Adapts and adjusts behaviour across environments and contexts in order to meet social and community expectations for behaviours that are desirable, socially acceptable and which support learning.</p> <p>Emotional Functioning (e.g., mood, anxiety, compulsions, thought problems, obsessive behaviours)</p> <p>Motivation</p> <p>POSSIBLE SOURCES OF INFORMATION</p> <p>File review</p> <p>-ADOS (Autism Diagnostic Observation Scale)</p> <p>Stereotyped Behaviours and Restricted Interests</p> <p>-ADI-R (Autism Diagnostic Interview-Revised)</p> <p>Current Behaviour: Restricted, Repetitive and Stereotyped Patterns of Behaviour</p> <p>-VABS (Vineland Adaptive Behaviour Scales)</p> <p>-SIB-R (Scales of Independent Behaviour-Revised:: Maladaptive Behaviour</p> <p>-ACBC (Auchenbauch Child Behaviour Checklist)</p> <p>-BASC-2 (Behaviour Assessment System for Children – 2nd Ed)</p>	<p><i>Student exhibits mild impairments in functioning occasionally and intermittently</i></p> <ul style="list-style-type: none"> □ Some fascination with particular people (e.g. interests/activities and avidly collects information on interest, but not intrusive) □ Develops some elaborate routines/rituals that must be followed. □ Some inflexibility/ rigidity and may resist transitions but usually responds if cued. □ Likes routine and sometimes is mildly distressed by minor changes to the environment (e.g. taking a different route to school), but can be redirected. □ Some interest in objects/parts of objects, but will put them down if requested. □ Occasional stereotyped and/or repetitive body movements (e.g., hand or finger twisting or flapping) or abnormalities of posture (e.g., toe walking). □ May not always respond to usual classroom motivators (e.g., social praise, peer pressure) or deterrents (ignoring inappropriate behaviour). □ Some withdrawal and indifference to others. □ Some lack of subtlety or precision in expression of emotion (e.g. distress or affection out of proportion to the situation). □ Minor levels of anxiety and worry. □ Some difficulty distinguishing between reality and make believe. 	<p align="center">The student's level of functioning</p> <p><i>A history and likelihood of ongoing impairment of functioning, but low intensity and not necessarily in every setting</i></p> <ul style="list-style-type: none"> □ Restricted range of interests/activities which intrudes on classroom functioning □ Strong need to follow routines in precise detail and readily distressed or anxious. □ Frequent difficulties with transitions. □ Marked distress and resistance to trivial environmental changes. □ Preoccupation with parts of objects or repetitive use of objects, and which often causes distress upon separation. □ Often observed stereotypical and/or repetitive body movements or posture abnormalities, but stops if interrupted. □ Motivated by unique, individualized interests. □ Appears indifferent to usual motivators, rewards or deterrents. Low interest in peers. Considerable aloofness. □ Potential to place self and others at risk. □ May appear threatening (non-specific) □ May run / leave assigned area. □ Frequent irritability/modulating expression of emotions (e.g. strong reactions to seeing minor incidents) □ Ongoing anxiety and easily overwhelmed by everyday life demands. □ Frequent difficulty distinguishing between reality and make believe. 	<p align="center">Significant impairment of functioning Occurs across multiple settings</p> <ul style="list-style-type: none"> □ Engagement in restrictive, repetitive behaviours and interests that severely limits any other activities. □ Persistent preoccupations with socially inappropriate topics. □ Ongoing, frequent self stimulatory characteristics, and is very difficult to distract □ Persistent adherence to non-functional routines / rituals and great anxiety and distress if change is necessary. □ Trivial changes to schedules may result in extremely high anxiety. □ Persistent inappropriate interest with the use and exploration of parts of objects or attachments to unusual objects is intrusive and interferes with activities. □ Stereotypic and/or repetitive movements significantly impair functioning. □ Rarely engages in interaction with others. □ Severe tantrums. □ Bolting and/or running frequently attempted. □ Damages property. □ Prolonged periods of severe anxiety. Stress, fatigue and sensory overload cause significant distress, panic attacks” and even aggression.
	<p align="center">Examples of Supports</p> <ul style="list-style-type: none"> □ Structured classroom routines, cues for transitions, re-directions, adaptations and explicit explanations. □ Intermittent consultation and group work from specialized staff. □ Small group, classroom based, peer supported strategies and adaptations. 	<p align="center">Examples of Supports</p> <ul style="list-style-type: none"> □ Consistent classroom routines and highly structured classroom. □ Frequent specialized supports and staff support and redirection required. □ Interventions to distract and interrupt. □ Individualized programming, explicit, direct instruction. 	<p align="center">Highly specialized and structured individualized programming, classroom structures and behaviour intervention.</p> <ul style="list-style-type: none"> □ Constant intensive staff support. □ Visual schedules, individualized routines. □ Unique, highly structured and directed motivators.

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<p align="center">SELF DETERMINATION & INDEPENDENT LIVING</p> <p>Independence to access the larger social community. -Meets and responds to the demands of daily life. -Acts independently, making choices and decisions, free from undue external influence. -Daily Living Skills: Dressing, grooming, safety related behaviours -Self Care: Mobility, Toileting, Feeding, Service dependency Sleep, sexuality. As social environments and expectations become more complicated they encompass things such as ability to use public transport, to shop, to ask for directions. -Self Determination: choice-making, decision-making, problem-solving, goal-setting, task-performance, self-regulation, motivation, Initiation -Generalizes across settings</p> <p>POSSIBLE SOURCES OF INFORMATION -File review -Transition meetings -PATH (Planning Alternative Tomorrows with Hope) -MAPS (McGill Action planning System) -SIB-R (Scales of Independent Behaviour-Revised) Personal Living Skills Subtest; Community Living Skills -VABS (Vineland Adaptive Behaviour Scales) -BRIEF (Behaviour Rating Inventory of Executive Function) TOPS (Test of Problem Solving)</p>	<p><i>Student exhibits mild impairments in functioning occasionally and intermittently</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Has most of the required skill set and follows most routines and transitions. <input type="checkbox"/> Functions independently in the school environment most of the time. <input type="checkbox"/> Some social skills, preoccupations, or disinterest with clothing results in some odd or unique patterns of dressing. <input type="checkbox"/> Some lack of concern for grooming skills. 	<p align="center">The student's level of functioning</p> <p><i>A history and likelihood of ongoing impairment of functioning, but low intensity and not necessarily in every setting</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Follows some routines, makes some transitions, completes some basic self care routines, and/or life skills and/or self direction (eating, toileting, playing). <input type="checkbox"/> Does not yet generalize learned skills. <input type="checkbox"/> Rigid behaviours regarding clothing results in odd or peculiar ways of dressing. <input type="checkbox"/> Frequently disinterested in grooming or hygiene. 	<p><i>Significant impairment of functioning Occurs across multiple settings</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Does not follow routines and/or perform activities or participate in classroom routines. <input type="checkbox"/> Little desire to achieve independence in self care and does not care for self (e.g., toileting, grooming, dressing, feeding). <input type="checkbox"/> Adolescent sexual behaviours may be obsessive and repetitive and significantly interfere with classroom functioning. <input type="checkbox"/> Leisure activities are not learned incidentally. <input type="checkbox"/> Risk to self or others is a persistent concern due to physical aggressiveness / self injurious behaviour. <input type="checkbox"/> No awareness of danger.
	<p>Occasional reminders, cueing, guidance, interventions, and support. Some support or guidance with occupational goals.</p>	<p align="center">Examples of Supports</p> <ul style="list-style-type: none"> <input type="checkbox"/> Regular cueing, redirection, guidance and strategic support for problem solving. <input type="checkbox"/> Frequent supervision and case management. <input type="checkbox"/> Ongoing exploration of community and post secondary resources. <input type="checkbox"/> Direct instruction and strategies. 	<ul style="list-style-type: none"> <input type="checkbox"/> Constant direct supervision, guidance, redirection and supervision on a daily basis. <input type="checkbox"/> Supervision required for safety. <input type="checkbox"/> Extensive planning and support required for transitions and for community programs.

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DESCRIPTION OF DOMAIN & POSSIBLE SOURCES OF INFORMATION OF	A	B	C
<p>Thinks and reasons, profits from experiences, and generalizes learning.</p> <p>Components: Reasoning, abstract and conceptual thinking, concept formation, processing of sensory information and perception of stimulus arousal, orientation, attention, executive functioning, memory, information, processing functions, problem solving</p> <p>POSSIBLE SOURCES OF INFORMATION</p> <p>-File review -WISC-IV (Wechsler Intelligence Scale for Children-4th Ed.) -SB-V (Stanford Binet Scale for Children- 5th Ed) -TONI-11 (Test of Non Verbal Intelligence) -LIPS (Leiter International Performance Scale)</p>	<p><i>Student exhibits mild impairments in functioning occasionally and intermittently</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Occasional preference for sameness and familiarity, sometimes limits curiosity to new learning experiences (e.g., student may be slow to show interest in new activities, may show some resistance to learning anything new or that is not related to interests, and has some trouble learning from mistakes and understanding that rules often change) <input type="checkbox"/> Minor difficulties attending and shifting attention and sometimes distracted by internal or external stimuli but responds if cued. <input type="checkbox"/> Difficulty with multiple cues or information from two sources at the same time. <input type="checkbox"/> Often memorizes rote responses rather than understanding concept. <input type="checkbox"/> Some difficulties with problem solving (planning, organizing, sequencing, generating alternatives). <input type="checkbox"/> Skills/abilities appear fairly evenly developed across assessed areas. <input type="checkbox"/> Can learn information, but may not readily generalize or easily apply the concepts learned. <input type="checkbox"/> Some difficulty understanding mental states (intentions, beliefs, desires) of others that are not concrete and readily observable. 	<p><i>A history and likelihood of ongoing impairment of functioning, but low intensity and not necessarily in every setting</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Ongoing preference for sameness, rigid thinking, rule bound behaviours, and aversion to new objects and experiences has the effect of limiting curiosity and exposure to new learning experiences. <input type="checkbox"/> Ongoing difficulties with attending and shifting attention which affects learning (e.g., attention to insignificant details or limited aspects, or attention too much stimuli). <input type="checkbox"/> Frequent difficulties with flexibility and problem solving in many areas. Often repeats same responses over and over. <input type="checkbox"/> Scattered developmental profile in which some skills/abilities are very delayed, while others are, or very near, age appropriate. <input type="checkbox"/> Tendency to learn and use skills exactly as taught and ongoing difficulties producing novel responses or alternatives. <input type="checkbox"/> Ongoing problems understanding mental states (intentions, beliefs, desires) of others that are not concrete and readily observable. 	<p>Significant impairment of functioning Occurs across multiple settings</p> <ul style="list-style-type: none"> <input type="checkbox"/> Extreme preference for sameness and familiarity significantly impairs new learning (e.g., student may run away from new objects or experiences, or may experience them as threatening). <input type="checkbox"/> Significant and unusual patterns of attention and a tendency to withdraw into a complex, inner world which significantly affects ability to learn. <input type="checkbox"/> Significant discrepancies within and between domains. <input type="checkbox"/> Severely limited problem solving which significantly limits independence. <input type="checkbox"/> Some skills/abilities are extremely poorly developed, while others are age appropriate or well above age expectations. <input type="checkbox"/> Little or no understanding of mental states (intentions, beliefs, desires) of others.
COGNITION	<p style="text-align: center;">The student's level of functioning</p> <p style="text-align: center;">Examples of Supports</p>		
	<ul style="list-style-type: none"> <input type="checkbox"/> Some case management. <input type="checkbox"/> Some adaptations and/or modifications required. 	<ul style="list-style-type: none"> <input type="checkbox"/> Integrated case management. <input type="checkbox"/> Frequent use of adaptations and/or modifications. 	<ul style="list-style-type: none"> <input type="checkbox"/> Extensive, intensive integrated case management. <input type="checkbox"/> Cases full of total curriculum concentrating on life skills. <input type="checkbox"/> Intensive, complex remediation. <input type="checkbox"/> Complex adaptations and/or modifications required.

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<p>OTHER HEALTH FACTORS</p> <p>-Associated health conditions (e.g., Seizure disorder, Tourette's, hearing deficits) -Brain Injury, Tourettes, hearing deficits) -Sensory and arousal modulation - Hypo or hyper sensitivities (hearing, vision, tactile, vestibular and proprioceptive, olfactory and gustatory) -Motor Functions (Gross and Fine motor impairments)</p> <p>POSSIBLE SOURCES OF INFORMATION -File review -Occupational Therapy Consultation / Assessment -Physiotherapy Consultation / Assessment -Psychiatric evaluation -Pediatric evaluation -SIB-R (Scales of Independent Behaviour-Revised) Motor Skills</p>	<p><i>Student exhibits mild impairments in functioning occasionally and intermittently</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Some additional health concerns, which are not manageable. <input type="checkbox"/> Health condition affects classroom functioning occasionally or intensively for short durations of time. <input type="checkbox"/> Some evidence of sensory experiences (e.g., some lack of eye contact, looks “through” others, lack of response to certain sounds or delayed response to sounds). <input type="checkbox"/> Sometimes does not look at materials, or respond to auditory information. <input type="checkbox"/> Some visual preoccupations or fascinations and seeking of unusual and/or intense sensory experiences (e.g., preoccupation with mirror image, lights, smelling, tasting). <input type="checkbox"/> Some hypersensitivity to, and distraction by, certain sounds. <input type="checkbox"/> Some lack of sensitivity to low levels of pain. <input type="checkbox"/> Some adaptations required for fine motor difficulties or resistances to fine motor tasks. <input type="checkbox"/> Some gross motor difficulties (e.g., unusual gait). 	<p><i>A history and likelihood of ongoing impairment of functioning, but low intensity and not necessarily in every setting</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Associated health conditions that produce multiple developmental behavioural and/or learning challenges. <input type="checkbox"/> Frequent unusual responses to sensory stimuli and hypersensitivities to certain sounds that are not distressing to others. <input type="checkbox"/> Regularly seeks unusual and/or intense sensory experiences (e.g., preoccupation with certain visual objects, smelling and/or tasting) and can easily be over-aroused. <input type="checkbox"/> Frequent avoidance of common sensory experiences (e.g., frequently stares into space, looks “through” others) <input type="checkbox"/> Inconsistent response to auditory stimuli). Often does not look at what s/he is working on, often misses auditory information. <input type="checkbox"/> Usually under-responsive to sensory input. <input type="checkbox"/> Often requires assistance with fine motor tasks such as eating, toileting etc.) <input type="checkbox"/> Frequent ongoing motor clumsiness and ongoing difficulty with tasks requiring motor skills. 	<p><i>Significant impairment of functioning Occurs across multiple settings</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Extreme, ongoing, or poorly controlled associated health conditions across multiple settings. <input type="checkbox"/> Seeking of unusual and/or intense sensory experiences are ongoing (e.g., mouthing, licking, rubbing), are for sensory rather than functional purposes, and take up major amounts of time. <input type="checkbox"/> Pervasive avoidance of, or extreme hypersensitivity to, common sensory experiences is ongoing, frequent and severely limits ability to learn and fit in with classroom routines. <input type="checkbox"/> Combination of associated health conditions that produce profound multiple developmental, challenges. <input type="checkbox"/> Significant lack of appropriate response to pain (e.g., ignored or dramatically overreacted to). <input type="checkbox"/> Usually requires hand to hand assistance to perform fine motor tasks. <input type="checkbox"/> Extreme difficulty with motor control, which severely impacts daily activities.
		<p>Examples of Supports</p> <ul style="list-style-type: none"> <input type="checkbox"/> Regular monitoring of health conditions. <input type="checkbox"/> Requires programming adaptations and/or modifications in his/her educational program. <input type="checkbox"/> Frequent consultation and/or group work from specialized support staff. <input type="checkbox"/> Regularly requires environmental supports or modifications. <input type="checkbox"/> Frequent reminders and repetition of auditory information. 	<p>Examples of Supports</p> <ul style="list-style-type: none"> <input type="checkbox"/> Extensive, individualized, attention/intervention and extensive additional supports. <input type="checkbox"/> Extensive adaptations / modifications to the learning environment and highly individualized planning and support. <input type="checkbox"/> May require medical emergency plan and extensive monitoring.

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<p>The academic domain consists of goals to support students in identifying and developing skills, and abilities, particularly in the learning outcomes of the BC curricula.</p> <p>Functional academics Academic skills that apply to real-life problems (e.g., reading/writing, reading survival words, recognizing signs and icons, math/money handling, time telling and management) that are taught in the classroom and reinforced in the community (e.g., money handling at stores and restaurants)</p> <p>POSSIBLE SOURCES OF INFORMATION</p> <ul style="list-style-type: none"> -File review -Criterion referenced and curriculum based assessment. -Academic Assessment <p style="text-align: center;">ACADEMICS/FUNCTIONAL ACADEMICS</p>	<p><i>Student exhibits mild impairments in functioning occasionally and intermittently</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Minor deviations on the performance standards of the curriculum. <input type="checkbox"/> Minor variation in objectives from the regular curriculum. <input type="checkbox"/> Minor adaptations to the curriculum. 	<p>The student's level of functioning</p> <p><i>A history and likelihood of ongoing impairment of functioning, but low intensity and not necessarily in every setting</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Dramatic adaptations to the curriculum. <input type="checkbox"/> The student's academic performance in many areas is significantly lower than would be expected on the basis of his/her learning potential. <input type="checkbox"/> Some areas may be adapted, other areas are modified. 	<p><i>Significant impairment of functioning Occurs across multiple settings</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Dramatically modified curriculum. <input type="checkbox"/> Functional academics (basic life skills).
	<ul style="list-style-type: none"> <input type="checkbox"/> Some case management. <input type="checkbox"/> Accommodations to the learning environment and curriculum. <input type="checkbox"/> Small group instruction and/or individualized instruction intermittently throughout the year. <input type="checkbox"/> Some cueing, direct instruction and support. <input type="checkbox"/> Intermittent consultation and/or specialized support staff. 	<p>Examples of Supports</p> <ul style="list-style-type: none"> <input type="checkbox"/> Frequent cueing, direct instruction and support. <input type="checkbox"/> Frequent redirection, guidance. <input type="checkbox"/> Small group instruction or individualized instruction frequently throughout the year <input type="checkbox"/> Frequent consultation and/or group work from specialized support staff. 	<ul style="list-style-type: none"> <input type="checkbox"/> Intensive support from highly specialized staff. <input type="checkbox"/> Constant support, guidance and educational support. <input type="checkbox"/> Direct instruction and intensive practice. <input type="checkbox"/> Specific, intensive individualized support.

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