

WV Project SCOPE ECHO on NAS

BREAKOUT ROOM FACILITATORS SESSION 9



Project SCOPE



Case Study

Background: Child attends a day treatment program that utilizes a preschool curriculum. He struggles with transitions and participating in class activities as he is often dysregulated. He runs around, wanders and often needs 1:1 support to keep him in one area. When he is unable to get his way, he becomes so frustrated that he starts to hit, kick and scream. Child struggles with engaging with peers due to this as well. Child's speech is age appropriate and he currently doesn't need speech services. He is currently on a 5-year-old education level and he is only 3! Child is very emotional and needs ongoing assurance and hugs or some type of physical touch and has diagnosis of Trauma and Stressor related disorder. The goal for this case is for the child to be able to transition appropriately and use his words to vocalize wants and needs.



Community Discussion Questions

1. How to better support him in the classroom?
2. What new interventions can we try?
3. Would referring for a psychological be appropriate?



Summary of Action Items

General Considerations

- A. Parent Child Interaction Therapy (PCIT)
- B. Consider expecting/supporting solo and parallel play, with the goal to teach and model interactive
- C. Have his preferred adult available in close proximity throughout his day for ease of co-regulation
- D. Try using a timer to refocus
- E. Consider offering him choices whenever possible to give him a bit of control over his environment.
- F. Manage expectations- What are the expectations for child? Help facilitate expectations to make it less frustrating for the child and adult
- G. Use music/calming music with transitions
- H. Give child responsibility- he can turn on music or hand out plates/cups
- I. Time out until child can self-regulate
 - a. Not an immediate solution



Summary of Action Items

Sensory Considerations

- A. Sensory strategies to help ground him- weighted lap pads, weighted stuffed animals, squeezing balls, heavy backpack, etc.
- B. Try yoga with the child – low intensity body movement that can be controlled

Psycho/Social/Emotional Considerations

- A. Help with labeling his emotions, look for motivators or rewards, use books or social stories to model sharing and positive interactions, as well as helping him to express when he is angry or frustrated, incorporate songs to cue transitions, visual strategies, visual timers
- B. Psychological evaluation recommended. This can help to provide clarity on his overall development.
- C. Attend to social emotional developmental level (2-year-old?) vs. precocious intellectual level
- D. Use strength of engagement seeking to help co-regulate through transitions, classroom activities



Discussion Questions

1. What resources can be implemented at school and/or home to help this child achieve grade level academic mastery? (Tahnee or Susan)

- Evaluation of hearing and speech production
- Need an IEP
- Screen for development-are other developmental milestones being met?
- How is the child's overall growth/health?
- Medical Hx-any frequent ear infections, only child?

2. Identify why this child is struggling with peer interactions. What supports and strategies can be used to support social emotional development? (Aisha)

- Social groups/counseling at school, to help make child more comfortable to learn
- Big brother/sister programs at school
- Discussion about what is going on at home- does child have difficulty with peer interactions because of the difficulties at home- how is child's relational health with family
- Healthy Grandfamilies to help support parents
- Support grandparents and child-providing social stories in online/print format and video modeling to help target areas of development
- IEP in area of social skills to determine any other developmental disabilities that might be present or past trauma
- Referral for OT and Speech therapy
- Teaching how to understand bodily cues, IE elevated heart rate and respiration, and teaching coping skills
- Emotional literacy- knowing his feelings and why peers might be feeling the way they are
- Children's books about feelings

3. What speech and language difficulties can you identify within this child's classroom interactions? How can we intervene? (Maggie)

- Intervention needs to come from evaluation. Once difficulties are identified then interventions can be done
- Peer support can help learn peer interactions
- Specialized reading programs that focus on helping to build vocabulary
- Start off reading at lower levels and build up
- Need for augmentative communication help to help others understand



Additional Discussion Questions as Needed

4. How can we achieve buy-in from the family (grandparents, dad, and mom) to support the academic and language needs of this child? (Cassie)
5. What are the long-term implications of this child continuing on without academic intervention? (Mary Beth)



What new interventions can we try?

Issues with Biological parents, trouble with communication
Create safe space, positive learning environment, teacher will need to be leader for peers in how to interact. See if find a peer who is good at interaction with him. Finding commonalities
Use social stories for peer interaction
Through assessment, work on IEP if needed (may be speech related)
Needs friends and supports and successful interactions
History- lack of peer relationship (mostly with adults?)
Enroll in sport/pool. Target activities that don't need communication, learn through play, may need to teach how to interact/play. May need to work with his peers on being understanding of a child that is not 'neurotypical'
Use games (computers) to build competency.
Work with family to promote positive interactions. Support grandparents (grandfamilies programs)- what skills do they have or lack? Teach them about the 'why' he is this way without blaming, talking about early years/development

