Toddler Treatments at CARD
CARD Lunch and Learn
10/13/21
Teresa Anderson, Christine Hess, Jennifer Sharpless, Karen Wells

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How many toddler treatment programs are at CARD?

CARD Toddler Treatments: Naturalistic Developmental Behavioral Interventions (NDBI)

- Evidence-Based: Combine ABA principles of learning with developmental science
- Delivered in naturalistic and interactive social contexts (e.g., play, daily routines)
- Use child-directed teaching strategies such as child-preferred toys and activities
- Involve caregivers/family members in intervention
- Less highly-structured than traditional ABA interventions
- Use Antecedent Behavior Consequence (ABC) sequences with natural, contingent reinforcers
- Emphasis on increasing child's motivation to participate
- Emphasis on increasing generalizability of skills
- Strengths-based approach: Understand and honor child’s perspective, interests, skills

(Schreibman, Dawson, Stahmer, Landa et al., 2015)
Infant Achievements Program

Christine Hess, PhD
Licensed Psychologist
Hess@kennedykrieger.org

IA Randomized Clinical Trial Results

- Infants (8-12 month olds) & caregiver were randomized into:
  - IA coaching intervention
  - Parent Education only

- Caregivers in IA coaching intervention learned to implement engagement strategies with higher fidelity than caregivers in Parent Education group over the 8-10 week program (2 sessions weekly; 16 sessions total)

- Greater gains for infants in IA intervention than infants in Parent Education for:
  - Coordinated joint engagement in caregiver-child play interactions
  - Initiation of joint attention

(Landa et al., 2021; manuscript in preparation)

Infant Achievements Clinical Service

- For 8-14 month olds*

- Goals
  - Increase child's social connection & engagement with caregiver
  - Increase child's frequency and diversity of social communication behaviors
Infant Achievements Program Description

- 8 week intervention: 1-2 sessions each week
  - Family Preference of intensity that works for them
  - Delivery: Telehealth or Hybrid
- Interactive Caregiver-Child Play
- Incorporates Facilitating Attuned Interactions (FAN) model to foster parent-child connection/attunement
- Caregiver Coaching Model
  - Modeling and Verbal Instruction for Caregiver
  - Caregiver Practice
  - Immediate Feedback from Coach, and Caregiver Reflections
  - Collaborative Planning (Goals, Homework)

Examples of Topics and Strategies

- Choosing Developmentally Appropriate Toys
  - Limiting screen time and sound/light-up toys
  - Using toys with multiple actions that allow back-and-forth play (e.g., ball, blocks)
  - Emphasis on using child’s interests for activities and play routines

- Following Child’s Lead in Play
  - Understanding child’s perspective & increasing child’s motivation to engage
  - Imitating child’s actions and sounds; less caregiver modeling initially

- Creating Opportunities for Child to Participate & Communicate
  - Expectant pause/wait during play routines
  - Cues and prompts, communicative temptations

Referrals to Infant Achievements in EPIC

Who to Refer:
- 8-14 month olds* with social communication delays and/or social interaction delays

How to Refer:
- Department: GSP-CARD Mental Health
- Specialty: Behavioral Health or Psychology
- Provider: Christine Reiner Hess
- Comment/Notes: Infant Achievements

Referral questions, contact me: hess@kennedykrieger.org
Infant Public Health Initiative – Currently Recruiting

- Baltimore families of color
- 8-14 months of age
- 12-week Infant Achievements coaching intervention
- Parent focus groups

Goals:
- Improve developmental outcomes
- Enhance parent/child interactions
- Acceptability, feasibility, adoptability for this EDI initiative

Contact: Dr. Ebony Holliday
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Achievements for Little Learners

Jennifer Sharpless, MS, CCC-SLP
Speech-Language Pathologist
Sharpless@kennedykrieger.org

ALL Randomized Clinical Trial

- Children were randomized into ALL intervention (direct intervention, parent coaching, and a parent education class) or parent education class only
- Children in the ALL intervention made better gains than children whose parents received education only
- Highlights the need for direct parent coaching for meaningful change

(Landa and Sharpless 2018)
Achievements for Little Learners

- Play (with and without toys)
- Music
- Book Share
- Snack
- Sensory
- Chores, caregiving routines, daily living routines
- Transition periods

ALL Ingredients

- Child learns in natural contexts and child-preferred routines
- Promote predictability to scaffold the child’s ability to actively engage
- Utilize ABC sequences with natural, contingent reinforcers
- Tempt child to communicate (pausing, environmental arrangement)
- Promote imitation
- Prompting and prompt fading
- Encourage spontaneity of skills and promote generalization
- Coaching parents encourages carryover at home, thereby increasing treatment intensity

Coaching Parents: Be specific

- How to engage your child and keep them engaged
- How to create meaningful routines
- How to use the family’s routines and materials
- How to target their child’s specific needs
  - Language
  - Social
  - Play
Coaching parents: Be redundant
• Give redundant exposure to the intervention strategies
  • In a variety of activities
  • With a variety of toys and objects
• Practice, practice, practice
• Ensure understanding
• Then…

Achievements for Little Learners Information
• Twice per week for 6 months
  • One session the parents are in a parent training class while the kids are in group
  • One session per week the parents are in the group with their child
• For children ages 14-24 months
• A caregiver must attend each session
• Make referrals to the Achievements Program
• Currently on hold due to the pandemic

Jump Start and Jump Start Dyads
Karen Wells, MS, CCC-SLP
Speech-Language Pathologist
wellsk@kennedykrieger.org
Jump Start

The Jump Start Program is a parent-mediated intervention where a trained speech-language pathologist teaches parents and caregivers to support their child’s communication, social interaction, and play development within their daily activities at home and in the community. The treatment strategies are derived from evidence-based treatment practices including Naturalistic Developmental Behavior Interventions. In this program, the clinician explains and models an intervention strategy and then coaches the parent through the intervention with their child. The clinician provides supportive feedback and helps the parent plan their ongoing home practice.

Why Give Toddlers a Jump Start?

- Cascading effect on development
  - Improving engagement between parent/child predicts Joint Attention skills 1 year later and subsequently adolescent language (Siller and Sigman 2002, 2008)
  - After parents were trained in 12 one–hour sessions of parent-mediated intervention when their child was between the ages of 6 and 15 months of age, their children had better outcomes in language and NV cognitive skills at age 36 months than peers who did not participate.
  - Children whose parents received coaching had significantly better social and receptive language gains than children whose parents did a monthly education class (Wetherby and colleagues 2014)

History of Toddler Services at CARD

- The first toddler team at CARD was in 2005.
- Jump Start was created by Jenny Sharpless in 2007 to address the need for toddlers to receive speech and language treatment shortly after an ASD diagnosis.
- Scheduled at check out
- It started out as 6 sessions, and increased to 12
- As we increased our toddler teams, the demand for Jump Start increased
Jump Start Dyads

• Currently families are waiting for the Jump Start Program for at least 4 months
• The SLP department at CARD seeks to whittle down the wait time
• Dyads and shorter sessions are currently being trialed
• TREE Skills based on NDBI principles has been developed to simplify parent strategies used to target language development with a strong focus on social engagement as the foundation for language learning
• TREE Skills can grow with the child and be used overtime as the child makes progress

Jump Start Dyads – TREE Skills

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<td>Individual</td>
<td>30 minutes</td>
</tr>
<tr>
<td>Optional 9-12</td>
<td>Individual</td>
<td>30 minutes</td>
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Jump Start Referrals

- Referrals for Jump Start and Jump Start Dyads can be made for children 12 months through 30 months.
- Individual Jump Start sessions are currently offered onsite or via telehealth. Dyad sessions are currently offered via telehealth.
- Ambulatory referral to speech therapy
- GSP, ODN, BWY, CARD, SPEECH
- Treatment
- Treat for Jump Start

Referral Questions, contact: sharpless@kennedykrieger.org or wellsik@kennedykrieger.org

What type of professionals lead the "Play With Me" program?

Teresa Anderson, OTR/L
Occupational Therapist
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Play With Me Program Description
• Short term caregiver coaching facilitated by an occupational therapist
• 6 individual therapy sessions lasting 1 hour 1x/week
• Caregiver participation incorporated into session through discussion, demonstration, hands on practice, handouts, strategies, & activities
• Administered in clinic &/or via telehealth
• Content topics
  • Child centered approach & play skills
  • Gross motor, fine motor, & self-care skills
  • Sensory regulation & sensory strategies

Play With Me Eligibility Criteria
• A comprehensive Occupational Therapy evaluation indicating OT service are recommended (with a specific referral to Play With Me)
• Younger than 36 months
• Limited purposeful play skills
• Delayed motor performance (gross motor, fine motor, &/or self-care)
• Inhibiting sensory behaviors
• Caregiver eager to learn strategies to encourage the child’s development through play

What are the goals of Play With Me?
• Increase tolerance & functional participation when novel tasks are offered during play activities
• Increase repertoire &/or self-initiation of functional play activities
• Improve gross motor skills, fine motor skills, self-care skills, &/or sensory regulation
• Increase competence & confidence in implementing skill developing strategies through play
Tip #1: Play is a child’s occupation!

- Accept the child’s repertoire of play
- Play should be fun & stress-free for the child & the caregiver
- Play should be about options & opportunities (not forced, required, or demanded)
- Present play options that are in alignment with the child’s interest
- Provide multiple trials for the child to engage in new play options

Tip #2: Be creative!

- Follow the child’s lead and attempt to add creative components to play
- Think outside the box
- Don’t limit the child to play the “right” way
- Offer a variety of play options
- Include movement (gross motor skills), use of the hands (fine motor skills) and multisensory experiences (sensory input) into play

Possible Play With Me Outcomes

- Parents report …
  - Decreased level of anxiety & frustration when interacting with their child
  - Increased positive interactions with their child
  - Increased understanding of how to encourage skill development through play
  - Increased understanding of motor development & the sensory systems
  - Increased confidence and competence when implementing strategies/activities
- Children have demonstrated …
  - Increased tolerance of adult interactions during play activities
  - Increased flexibility when presented with novel tasks
  - Increased self-initiation of tasks previously presented by an adult
  - Decreased tantrums/distress during functional play activities
  - Improved gross motor skills, fine motor skills, self-care skills, &/or sensory regulation
Referral Information

To request an occupational therapy evaluation please call
443-923-9400

For more information about Play With Me please contact
Andersont@KennedyKrieger.org

What is a word or phrase that is a characteristic of a NDBI?

References

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