



1

---

---

---

---

---

---

---

---



2

---

---

---

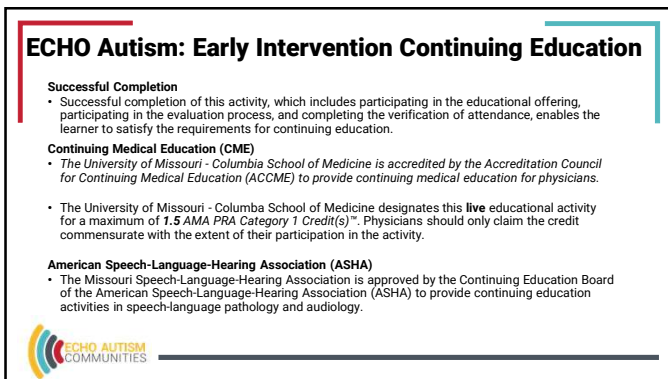
---

---

---

---

---



3

---

---

---

---

---

---

---

---

### ECHO Autism: Early Intervention Speaker Disclosure

LPC, Social Work, Psychology, 50-minute hour CEs

The University of Missouri Continuing Education for Health Professions (CEHP) is part of an accredited university in the state of Missouri. As such, this program meets the requirements for Licensed Professional Counselors, Psychologists, and Social Workers with Missouri licenses. CEHP attests that this program contains 1.5 clock hours of instructional time. Licensed professionals measuring CE credit based on a 50-minute hour may claim up to 1.8 Contact Hours for full attendance at this program.

#### Relevant Financial Relationship Disclosures

Current ACCME (Accreditation Council for Continuing Medical Education) rules state that participants in CE activities should be made aware of any relevant affiliation or financial interest in the previous 24 months that may affect the planning of an educational activity or a speaker's presentation(s). Each planning committee member and speaker has been requested to complete a financial relationship reporting form for the ECHO Autism: Early Intervention Series

Kristin Sohl, MD,FAAP receives support:

•Cognoa Behavior Health – research support

•Quadrant Biosciences – medical science collaborator

All relevant financial relationships for the presenter(s) have been mitigated.

No other speaker or planning committee member has a relevant financial interest



---

---

---

---

---

---

---

---

4

### Learning Objectives

- 1. The learner will describe the 5 components for writing SMART goals.
- 2. The learner will understand the connection between the child's current goals and long-term goals.
- 3. The learner will improve caregiver involvement in goal development.



---

---

---

---

---

---

---

---

5

Specific

What exactly do you want to achieve?

Good goals area clear and defined

Measurable

How will you know when you've achieved it?

You will need to be able to track daily progress

Achievable

How can the goal be accomplished?

List the specific tasks you will need to complete

Relevant

Why is this goal important to you?

Does this goal help add to your plans for the future?

Time-bound

When do you want to achieve this goal?

Set your target date so you can guide your work toward a successful completion



---

---

---

---

---

---

---

---

6

**Specific:**

- The general goal of "improve articulation" can seem overwhelming and unobtainable. The more specific the goal the greater the likelihood that you and your client will feel empowered and capable.
- Who? (child, child w/parent, or child/SLP combo)
- What? (specific goal)
- When? (days/times during week)
- Where? (at SLP's office, in home, classroom, etc.)
- How? (any extra tools/supplies needed)




---

---

---

---

---

---

---

---

7

**Measurable:**

- Can you define the skill that will determine if the child is doing what you want him/her to do?
- Can you measure progress in that skill?
- How will you measure progress?
- When will you consider the goal accomplished?
- If you can answer all these questions move on; if not, go back and adjust the goal to something you know you can see or hear and therefore measure.




---

---

---

---

---

---

---

---

8

**Attainable:**

- Do you think the child can actually accomplish this in a year (or within your goal timeframe)?
- If the answer is yes, move on. If the answer is no, go back and choose something you think the child can accomplish within a reasonable timeframe.




---

---

---

---

---

---

---

---

9

**Realistic:**

- Will the attainment of this goal be functional for the child or will it just be something you can do with the child?
- Will it serve a purpose in the child's life considering the limits and ramifications of the diagnosis and his/her cultural and social needs?
- In the case of an IEP, does this goal serve to move the child along to fulfill the common core standards?
- If the answer is yes, move on if not... yes, you get the picture go back and start again.




---

---

---

---

---

---

---

---

10

**Timely (and tangible):**

- Does the goal contain a time frame or a date for accomplishing the goal?
- And can the goal be attained in that time frame?
- If yes....




---

---

---

---

---

---

---

---

11

**Example of SMART goals:**

- *By the end of the IEP cycle, Johnny will correctly produce the pronouns "he" and "she" when retelling a story that has just been read aloud in the speech therapy room as measured by data collection with at least 80% accuracy independently in 3 consecutive sessions.*
- *By May 2020, Juliet will independently answer "where" questions about a book that has been read aloud in the therapy room with 80% accuracy as measured by data collection in 3 consecutive sessions.*




---

---

---

---

---

---

---

---

12



### How to improve caregiver involvement in goal planning?

- Parents are an invaluable source of information about their child's past experiences and skills in settings other than your classroom.
- Talk with caregivers one-on-one to learn more about their child's goals, strengths, and support needs.
- After each outpatient session, provide parents with a brief overview and a home-exercise activity.
- Before the IEP meeting, you might also consider providing families with a list of questions/items to think about.



16

---

---

---

---

---

---

---

---

<p><b>My child is good at:</b></p>	<p><b>My child struggles with:</b></p>
<p><b>When it comes to my child's education, I am concerned about:</b></p>	<p><b>Parent - Classroom IEP Input</b></p> <p><b>Thank you for taking the time to complete this survey. Your input is important in developing an appropriate &amp; effective IEP for your child.</b></p>
<p><b>I would like to see my child make progress in:</b></p>	<p><b>I have some questions about my child's education, such as:</b></p>
<p><b>This form was completed by:</b></p> <p>Name: _____</p> <p>Relationship: _____</p> <p>Date: _____</p> <p>Date Sent: _____</p> <p>sent by: _____</p>	<p><b>Parent Input Form for an IEP Meeting</b></p> <p>Please take a few minutes to complete this form for your student's upcoming Special Education meeting. The information you provide will assist the special education team in developing an appropriate educational plan for your student. Return this form to _____</p> <ol style="list-style-type: none"> <li>1. Student Strengths - describe your student's social and educational strengths: _____</li> <li>2. Behavioral Performance - describe behavior at home or school and list specific examples of any behaviors that might interfere with academic performance: _____</li> <li>3. Social Interaction - describe your student's interaction with parents, siblings, teachers, and other students, including specific incidents whenever possible: _____</li> <li>4. Please describe your concerns for your student - including future goals: _____</li> <li>5. Please describe areas that you feel your student needs assistance: _____</li> <li>6. Describe any concerns that your student may have about school: _____</li> <li>7. Additional Comments: _____</li> </ol> <p>Signature: _____ Date: _____</p>

17

---

---

---

---

---

---

---

---

### References/Resources:

- <https://www.asha.org/uploadedFiles/Writing-Measurable-Goals-and-Objectives.pdf>
- <https://blog.asha.org/2013/09/10/tricks-to-take-the-pain-out-of-writing-treatment-goals/>
- <https://www.speechbuddy.com/blog/speech-therapist/make-s-m-a-r-t-speech-therapy-goals/>
- <https://www.speechandlanguagekids.com/goal-writing/>
- <https://blog.brookespublishing.com/9-ways-to-boost-family-involvement-in-the-iep-process/>
- <https://www.teacherspayteachers.com>



18

---

---

---

---

---

---

---

---



---

---

---

---

---

---

---