## Philadelphia Infant Toddler Early Intervention – ASD (Autism Spectrum Disorder) Coordinator Practice Guidelines\*

ASD Coordinators ensure that the primary feature of ASD services in Philadelphia, coordination of ASD related services, strategies and team members is accomplished, regardless of whether the professional team members are from the same or different agencies.

## Designation of ASD Coordinator on IFSP

- IFSPs that include ASD Service (Z10 Codes) designate an ASD Coordinator on the IFSP, by name and by title: <u>ASD Coordinator</u>, in the services comment section of the IFSP.
- The IFSP team designates the ASD Coordinator at the post-DBA meeting.
- ASD Coordinator can be from any discipline if they have the expertise and capability to perform ASD Coordinator responsibilities.
- If the ASD Coordinator is an IFSP team member who also provides ongoing direct services, that team member will be specified as the ASD Coordinator in the services comment section of the IFSP.
- If the ASD Coordinator is not providing ongoing intervention, the ASD Coordinator will be designated as a second level discipline on the IFSP, e.g., Special Instructor (SI) II, Occupational Therapist (OT) II, or other discipline as appropriate, e.g., Psychologist.

## ASD Coordinator and Service Coordinator Responsibilities

- Service Coordinator (SC) is responsible for scheduling and facilitating meetings, including the quarterly and annual reviews.
- SC can request the assistance of the ASD Coordinator to reach people on the team in order to schedule meetings and otherwise communicate with the professional IFSP team members.
- ASD Coordinator can suggest resources to fulfill the IFSP needs to the SC Coordinator, but ASD Coordinator is not responsible for referrals or to secure resources.
- After consistent and documented attempts to address implementation concerns with a team member, the ASD Coordinator will alert the SC when team members are not implementing recommended strategies and interventions. The SC will facilitate a discussion among the team, which includes the family as a member, to address implementation concerns.
- The ASD Coordinator will communicate with the assigned SC as needed.

**ASD Coordinator Responsibilities** Note: The intensity and frequency of the following responsibilities and resulting activities may vary based on the child, family, team, team members and the service provider configuration, e.g., all IFSP team members from same ASD agency; IFSP team members from multiple ASD agencies; some IFSP team members not from an ASD agency. Team members that are not from an ASD agency will be expected to work in consultation with the ASD Coordinator and may require more education and oversight to assess their level of understanding and implementation of recommended strategies and interventions.

- Ensure interventions and strategies are coordinated *across all service providers* (and agencies).
- Ensure that interventions and strategies are consistent with the Principles of Service Delivery in the Philadelphia Infant Toddler EI Position Statement on Provision of Services to Children with ASD and Those At Risk for ASD (2007). Interventions must reflect early childhood development, be embedded in the family's routines and activities and be consistent with how the child and family live in their community.
- In general, conduct at least one on site visit per quarter to verify that interventions are coordinated and strategies are implemented as planned. The team can determine that the ASD Coordinator visits more or less than once per quarter. These visits can occur at the Quarterly and Annual Reviews.
- Regularly (at least quarterly) communicate with the family and the professionals on the IFSP team about the family's priorities, outcomes and interventions. ASD Coordinator documents their planned schedule and method of communication in writing and *documents each on site visit and communication* on a Session Note, File Note or other system of documentation.
- Verify that interventions and strategies are supported by empirical evidence, and are consistent with the priorities and needs of the child and family to accomplish the IFSP outcomes, as per the Outcome Strategies developed as a result of the Developmental Behavior Assessment (DBA).
- Assess the need for and suggest new or updated strategies.
- Ensure that type and frequency of data collection are consistent with the priorities and needs of the child and family, address IFSP outcomes and is frequently shared with the child's caregivers.
- Review child progress on a regular basis, not less than once per quarter. Document review in Session Note or File Note.
- Verify that the data and progress monitoring information are reviewed and summarized in preparation for and during the Quarterly and Annual Reviews.
- Provide feedback to IFSP team members about child's progress and the need to maintain or change interventions. *Document feedback* in Session Note or File Note.
- If implementation concerns have not been addressed through direct communication with the IFSP team member and the SC's facilitated discussion (see ASD Coordinator and Service Coordinator Responsibilities above) the ASD Coordinator will email the program supervisor for the team member's agency and copy the Service Coordinator and the County Program Analyst [for the ASD coordinator] to discuss these concerns.
- Have contact information for each professional team member and their supervisor.

\*These guidelines <u>do not</u> supersede the child's determination by the multidisciplinary team (based on assessment and observation) and the individualized needs of the child. The intent of these guidelines is to provide information and guidance to the Individualized Family Service Plan (IFSP) team members.