AUTISM PROGRAM QUALITY INDICATORS

A SELF-REVIEW AND QUALITY IMPROVEMENT GUIDE FOR SCHOOLS AND PROGRAMS SERVING STUDENTS WITH AUTISM SPECTRUM DISORDERS

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The University of the State of New York
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FOREWORD

ACKNOWLEDGEMENTS

AUTISM PROGRAM QUALITY INDICATORS (APQI)

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FOREWORD

August 2001

Dear Parents and School Personnel:

Children with autism present unique and challenging needs that require specific focus in their educational programs. Autism is a pervasive developmental disability, and while there are common features of autism, there is also great variability in the disorder. There are different learning techniques and environments that will be more effective for certain children with autism than for others. Therefore, it is essential that school personnel and families work closely together to identify and develop quality programs to address the individual needs of each child.

This publication provides Autism Program Quality Indicators (APQI), intended as a self-review and quality improvement guide for schools and programs serving students with autism spectrum disorders. The APQI were developed by the New York Autism Network at the request of the New York State Education Department. The APQI promote the goal that all students in New York State receive special education that meets high educational standards by providing benchmarks of quality programs that result in successful outcomes for students with autism. The APQI are a compilation of research-based components that have been linked to high quality and effective educational programs for students with autism. The items on the APQI were derived from a variety of sources including a review of the scientific literature, professional experience and input and review by national experts in the field of autism. The APQI were also reviewed by representatives from the regional advisory groups to the New York Autism Network, including parents of students with autism, advocacy groups and school personnel.

I encourage schools to use the APQI to conduct periodic self-reviews of the programs and services provided to children with autism and to address quality improvement as needed. I also encourage parents of children with autism to use the APQI as benchmarks of quality programs for their children. The APQI will help parents to identify those features of educational supports and services that combine to result in effective programs, regardless of specific educational methodologies used.

If you have specific questions regarding the APQI, please direct your inquiries to the Special Education Policy Unit at 518-473-2878. If you would like to receive notification of our publications via e-mail, register at web.nysed.gov/vesid/register.htm. This publication is also available on the web at web.nysed.gov/vesid/sped/Autism/Autism.htm.

Sincerely,

Lawrence C. Gloeckler

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AUTISM PROGRAM QUALITY INDICATORS

The Autism Program Quality Indicators (APQI) are a compilation of the best practices in educating students with autism, which were developed to serve as a means of guiding quality improvement activities for schools and programs serving children with autism in New York State.

Structure and Content of the APQI

The APQI are organized into the following 14 areas with the seven categories in the left-hand column relating to the specific aspects of the educational process for students, and the seven categories in the right-hand column referring more broadly to program characteristics and supports.

- Individual Evaluation
- Development of the Individualized Education Program (IEP)
- Curriculum
- Instructional Activities
- Instructional Methods
- Instructional Environments
- Review and Monitoring of Progress and Outcomes
- Family Involvement and Support
- Inclusion
- Planning the Move from One Setting to Another
- Challenging Behavior
- Community Collaboration
- Personnel
- Program Evaluation

Each of the 14 areas is described by a single summary sentence, followed by more specific "quality indicators." The items contained within the APQI do not reflect specific instructional strategies or theoretical approaches. Instead, they reflect methods that have consistently been found to be effective in improving learning in children with autism. Additionally, where items reflect practices that are broadly appropriate to educating all children (e.g., involving and supporting families in the educational process), the APQI focus on those aspects most important for educating students with autism. (1)

How should the APQI be used?

The APQI were developed to apply to programs that serve children between the ages of 3 and 21, on the full range of the autism spectrum (including Asperger syndrome and Pervasive Developmental Disorder–Not Otherwise Specified {PDD-NOS}) and ability levels, and in all educational settings. Some items may, therefore, not apply to every program. The purpose of the APQI is to provide a tool for schools or programs to self-evaluate educational services as a whole rather than an evaluation of services provided to any specific child. A program would rate itself on the degree to which there is evidence supporting that a particular item or practice is in place. In this way, the APQI may serve as a quality improvement tool in which programs note relative strengths and weaknesses. Given the indicators cover such a wide range of educational practices, it is highly unlikely that any program would have clear evidence of every quality indicator.

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Development of the APQI

The APQI were developed over a one-year period by the New York Autism Network (NYAN) at the request of the Office of Vocational and Educational Services for Individuals with Disabilities (VESID) of the New York State Education Department. NYAN is a consortium of four regional centers with a shared focus of promoting effective educational approaches for students with autism. NYAN is funded by the New York State Education Department.

The items on the APQI were derived from a variety of sources including federal and State law and regulations, scientific evidence, and professional experience. The APQI were developed first by examining the professional literature to identify likely dimensions for the scale. The next step was to identify key quality components specific to autism in each of these areas. A preliminary draft of the APQI was field tested with the NYAN regional advisory groups. Information from the advisory groups was compiled into a working draft of the APQI (dated 11/6/00) that was shared with national experts and VESID representatives for their comments. These comments led to a significant re-focusing of the APQI on making it as autism specific as possible. A number of interim versions were shared with NYAN staff, representatives from programs and advocacy groups, national experts, and VESID staff. The resulting document (6/15/01) has been strengthened considerably by the input of these many people.

Scoring the APQI

The APQI uses a four-point rating system, plus a Not Applicable rating, as follows:

Score	Description
NA	Not applicable. The program is not responsible for this area.
0	There is no evidence of this indicator.
1	There is minimal to no evidence of this indicator, but clear evidence exists that the program is in the process of planning for implementation and/or staff development in this area.

2	There is some evidence of this indicator *or* there is clear evidence of the indicator for only a portion of students with autism.
3	This quality indicator is clearly evident for all students with autism.

These ratings can be applied to each of the items and a summary rating can be given to each area. A summary table at the end of the scale allows programs to identify areas of relative strength and weakness.

AUTISM PROGRAM QUALITY INDICATORS

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NA	Not applicable. The program is not responsible for this area.
0	There is no evidence of this indicator.
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2	There is some evidence of this indicator ***or*** there is clear evidence of the indicator for only a portion of students with autism.
3	This quality indicator is clearly evident for all students with autism.

INDIVIDUAL EVALUATION: Thorough diagnostic, developmental, and educational assessments using a comprehensive, multidisciplinary approach are used to identify students' strengths and needs.		**Score**	**Comments**
1)	Evaluations are conducted by multidisciplinary teams made up of qualified personnel who are familiar with the characteristics and response patterns of students with autism.		
2)	The medical and developmental history review factors specific to autism.		
3)	Evaluations include the examination of the individual skills and strengths of students with autism, as well as their needs.		
4)	Evaluations use a variety of measures and sources of information, including: a) appropriate standardized, developmental, and observational methods, b) autism-specific measures, c) parent and family input, d) review of recent progress and functional level.		
5)	For both verbal and nonverbal students, speech and language evaluations use standardized measures, parental report, observation, and spontaneous language samples to assess: a) receptive language, b) expressive language, c) speech production, d) communicative intent, e) pragmatics.		
6)	Evaluation reports integrate results from all areas in ways that lead directly to programmatic recommendations for instruction.		
7)	Evaluation reports are written in a meaningful, understandable manner.		
8)	Evaluation reports are shared with the student (if appropriate), parents, educators, and other professionals who work collaboratively with the family.		
Summary Rating for Individual Evaluation			

DEVELOPMENT OF THE INDIVIDUALIZED EDUCATION PROGRAM: The Committee on Preschool Special Education (CPSE) and the Committee on Special Education (CSE) use evaluation results, parent and family concerns, and present levels of performance in developing individualized education programs (IEPs) to meet students' needs.		**Score**	**Comments**
1)	The IEP identifies developmental, health, social-emotional, and behavioral needs.	.	.
2)	While the IEP addresses a broad range of developmental and educational needs, it specifically includes the areas of: a) communication, b) social interaction, c) behavior and emotional development, d) play and use of leisure time.	.	.
3)	Goals and objectives: a) relate directly to the student's present level of performance and identified needs, b) reflect parental input and family concerns, c) are observable and measurable, relate to long-term outcomes, d) are selected to achieve long-term outcomes.	.	.
4)	The IEP identifies program modifications, including environmental and instructional adaptations and accommodations, that are needed to support the student.	.	.
5)	"Parent counseling and training" is indicated as a related service as appropriate.	.	.
6)	Augmentative and alternative communication systems are considered for students with limited verbal abilities.	.	.
7)	Opportunities for interaction with nondisabled peers are provided as appropriate.	.	.
Summary Rating for Development of the IEP		.	.

CURRICULUM: The program uses a curriculum that addresses the significant skill deficits of students with autism and relates to the New York State Learning Standards.		**Score**	**Comments**
1)	The curriculum contains a written statement of goals and philosophy from which instructional objectives, methods, and activities proceed.	.	.
2)	The curriculum focuses on maximizing independent functioning in home, school, vocational, and community settings.	.	.
3)	The curriculum is adapted to the different ages, abilities, and learning styles of students with autism.	.	.
4)	The curriculum emphasizes the development of: a) attention to social stimuli, b) imitation skills, c) communication and language, d) social relationships, e) symbolic play, imagination, and creativity, f) self-regulation, g) skills to meet the learning standards, h) vocational skills.	.	.
5)	With respect to communication, the curriculum emphasizes the development of a functional communication system for both verbal and nonverbal students with autism.	.	.
6)	With respect to social relationships, the curriculum emphasizes the development of social interaction skills with adults and peers for a range of occasions and environments.	.	.

7)	The curriculum focuses on the maintenance and generalization of learned skills to more complex environments.	.	.
Summary Rating for Curriculum		.	.

INSTRUCTIONAL ACTIVITIES: The program provides a variety of developmentally and functionally appropriate activities, experiences, and materials that engage students in meaningful learning.		**Score**	**Comments**
1)	Instructional activities: a) enhance response opportunities, b) are appealing and interesting, c) promote active engagement of the student, d) focus on basic skills before more complex skills, e) provide multiple opportunities for practicing skills identified on the IEP, f) are (whenever possible) embedded within ongoing and natural routines of home, school, vocational, and community settings.	.	.
2)	Activities use a variety of instructional formats—one-to-one instruction, small group instruction, student-initiated interactions, teacher-directed interactions, play, peer-mediated instruction—based upon the skill to be taught and the individual needs of the student.	.	.
3)	IEP goals and instructional methods are compatible and complementary when the program uses components of different intervention approaches.	.	.
4)	Instructional activities are adapted to the range of ages, abilities, and learning styles of students with autism.	.	.
5)	Daily instruction is provided to meet the individual communication needs of students with autism.	.	.
Summary Rating for Instructional Activities		.	.

INSTRUCTIONAL METHODS: Teaching methods reflect the unique needs of students with autism and are varied depending on developmental appropriateness and individual strengths and needs.		**Score**	**Comments**
1)	Instructional methods are adapted to the range of ages, abilities, and learning styles of students with autism.	..	.
2)	Instructional methods reflect empirically validated practices or solid evidence that demonstrates effectiveness over time.	.	.
3)	The degree of structure and intensity of teaching are geared to the functional abilities of the student.	.	.
4)	Instructional methods: a) emphasize the use of naturally occurring reinforcers, b) promote high rates of successful performance, c) encourage communication and social interaction, d) encourage the spontaneous use of learned skills in different settings.	..	.
5)	As instruction proceeds, an effort is made to teach students to cope with the distractions and disruptions that are an inevitable part of daily living.	.	.
6)	There is a clear plan showing methods for systematically promoting the maintenance and generalization of learned skills to new and different environments.	.	.

Summary Rating for Instructional Methods	.	.

INSTRUCTIONAL ENVIRONMENTS: Educational environments provide a structure that builds on a student's strengths while minimizing those factors that most interfere with learning.		**Score**	**Comments**
1)	Environments are initially simplified to help students recognize relevant information.	..	.
2)	When needed (particularly for younger students), classrooms have defined areas that provide clear visual boundaries for specific activities.	.	.
3)	Environmental supports (e.g., the use of visual schedules) are available that facilitate the student's ability to: a) predict events and activities, b) anticipate change, c) understand expectations.	.	.
4)	Communication toward and with students: a) is geared to their language abilities, b) is clear and relevant, c) encourages dialogue (when appropriate), rather than being largely directive.	.	.
Summary Rating for Instructional Environments		.	.

REVIEW AND MONITORING OF PROGRESS AND OUTCOMES: The program uses a collaborative, ongoing, systematic process for assessing student progress.		**Score**	**Comments**
1)	The program provides regular and ongoing assessment of each student's progress on his/her specific IEP goals and objectives.	.	.
2)	Student progress is summarized and reviewed by an educational team.	.	.
3)	Students are assessed and the instructional program is refined when: a) target objectives have been achieved, b) progress is not observed after an appropriate trial period, c) target objectives have not been achieved after an appropriate trial period, d) there is an unexpected change in a student's behavior or health status, e) significant changes occur in the home, school, vocational, or community setting.	.	.
4)	The program routinely reports to the CPSE or CSE when there is a need to consider modifications to the IEP.	.	.
Summary Rating for Review and Monitoring of Progress		.	.

FAMILY INVOLVEMENT AND SUPPORT: Parents are recognized and valued as full partners in the development and implementation of their children's IEPs.		**Score**	**Comments**
1)	Parents and family members are supported as active participants in all aspects of their child's ongoing evaluation and education to the extent of their interests, resources, and abilities.	.	.
2)	Parents are informed about the range of educational and service options.	.	.

3)	The program demonstrates an awareness and respect for the culture, language, values, and parenting styles of the families they serve.	.	.
4)	The program makes available "parent counseling and training" services, which: a) provide parents with information about child development, b) assist parents to understand the needs of their child, c) foster coordination of efforts between school and home, d) support the family in behavior management, e) enable parents to acquire skills to support the implementation of their child's IEP.	.	.
5)	Parents are provided with opportunities to meet regularly with other parents and professionals in support groups.	.	.
6)	Parents receive regular communication from the program regarding their child's progress.	.	.
7)	Parents are assisted in accessing services from other agencies (when available and as appropriate) such as respite, in-home behavior support, home health care, transportation, etc.	..	.
Summary Rating for Family Involvement and Support		.	.

INCLUSION: Opportunities for interaction with nondisabled peers are incorporated into the program.		**Score**	**Comments**
1)	The program offers opportunities for interaction with nondisabled peers in both informal and planned interactions.	..	.
2)	In their contact with nondisabled peers, students are provided with instruction and support to maximize successful interactions.	.	.
3)	The program provides nondisabled peers with knowledge and support (e.g., peer training) to facilitate and encourage spontaneous and meaningful interactions.	.	.
4)	Training and ongoing support are provided to the general education teachers and staff.	.	.
Summary Rating for Inclusion		.	.

PLANNING THE MOVE FROM ONE SETTING TO ANOTHER: Parents and professionals work collaboratively in planning transitions from one classroom, program, or service delivery system to another.		**Score**	**Comments**
1)	All aspects of planning include the student (whenever appropriate), parents and other family members, current and receiving professionals, and other relevant individuals.	.	.
2)	Transitional support services are provided by a special education teacher with a background in teaching students with autism.	.	.
3)	Transition planning: a) begins while the student is in the current placement, b) provides the student and family with the opportunity to visit the new setting (i.e., meet teachers, view classrooms).	.	.
4)	Planning integrates considerations of future placements (i.e., skills needed in the next classroom or school setting) with the student's current program.	.	.

5)	Planning includes teacher preparation and other supports to ensure success of the student in the new classroom, school, or work site.	.	.
Summary Rating for Planning the Move from One Setting to Another		.	.

CHALLENGING BEHAVIOR: Positive behavior supports, based on a functional behavioral assessment (FBA), are used to address challenging behavior.		**Score**	**Comments**
1)	The program has a school-wide behavioral system that: a) defines expectations for appropriate behavior in all instructional settings, b) uses proactive approaches to managing behavior, c) has established strategies for crisis intervention, d) provides training for staff in recommended behavioral strategies.	.	.
2)	A FBA is used to direct intervention planning for persistent challenging behaviors.	.	.
3)	Multiple methods (e.g., direct observations, functional analysis, rating scales, and interviews) are used in conducting the FBA.	.	.
4)	The FBA identifies both immediate (e.g., request to perform a task) and more distant (e.g., poor sleeping habits) factors that increase challenging behaviors.	.	.
5)	The FBA identifies one or more functions for the challenging behaviors.	.	.
6)	Environmental accommodations and adaptations are used to prevent or minimize occurrences of the problem behavior.	..	.
7)	Instruction in alternative, appropriate skills (e.g., communication, social, or self-regulatory skills) is routinely incorporated into behavior intervention plans.	.	.
8)	Behavioral interventions are based on positive supports and strategies.	.	.
9)	Behavior intervention plans focus on long-terms outcomes (e.g., making new friends, participating in extracurricular activities).	.	.
Summary Rating for Challenging Behavior		.	.

COMMUNITY COLLABORATION: The program links with community agencies to assist families in accessing supports and services needed by students with autism.		**Score**	**Comments**
1)	The program develops links with different community agencies that provide the comprehensive services often needed by students with autism.		
2)	The program assists parents in defining their child's outside-of-school needs, such as respite, in-home behavior support, home health care, transportation, etc.		
3)	Parents are assisted in accessing services from community agencies.		
Summary Rating for Community Collaboration			

PERSONNEL: Teachers, teacher aides and assistants, related service providers, school psychologists, administrators, and support staff are knowledgeable and skilled related to the education of students with autism.		**Score**	**Comments**
1)	Staff are knowledgeable and skilled in the areas of expertise specific to autism, including: a) characteristics of autism, b) familiarity with assessment methods, c) developing IEPs to meet the unique needs of each student, d) curriculum, environmental adaptations and accommodations, and instructional methods, e) strategies to improve communication and social interaction skills, f) classroom and individual behavior management techniques.	.	.
2)	Staff participate in continuing professional development (e.g., consultation, workshops, conferences) designed to further develop their knowledge and skills.	.	.
3)	Staff are available in a ratio sufficient to provide the support necessary to accomplish IEP goals.	.	.
4)	Teachers and related service providers have access to students' IEPs and are informed of their responsibilities for implementation.	.	.
5)	Paraprofessionals receive specific and direct instruction and supervision regarding their IEP responsibilities to the student.	.	.
6)	Ongoing support and technical assistance are available to resolve concerns related to learning and behavior.	.	.
Summary Rating for Personnel		.	.

PROGRAM EVALUATION: Systematic examination of program implementation and impact is conducted, including the aggregation of individual student outcomes and consumer satisfaction.		**Score**	**Comments**
1)	The program incorporates evaluation systems that assess program-wide effectiveness in the areas of: a) students' progress toward mastery of IEP goals, b) student performance on State and districtwide tests (including, as appropriate, student performance on the State Alternate Assessment) c) students' generalization of skills, d) student progress toward long-term outcomes.	.	.
2)	The program evaluates short-term (e.g., weekly or bi-weekly), intermediate (e.g., quarterly), and long-term (e.g., yearly) changes in student progress.	.	.
3)	Parents regularly receive feedback on their child's progress toward meeting IEP goals and objectives.	.	.
4)	Program evaluation includes measures of consumer satisfaction with services.	.	.
5)	Information obtained from program evaluation is used for program improvement.	.	.
Summary Rating for Program Evaluation		.	.

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.	**Summary Rating**
Individual Evaluation	
Development of the Individualized Education Program	
Curriculum	
Instructional Activities	
Instructional Methods	
Instructional Environments	
Review and Monitoring of Progress and Outcomes	
Family Involvement and Support	
Inclusion	
Community Collaboration	
Planning the Move from One Setting to Another	
Challenging Behavior	
Personnel	
Program Evaluation	

(1) For a list of quality indicators on other topics such as Individual Evaluations, Pre-referral Processes, and Individualized Education Programs (IEP), contact VESID at 518-473-2878.