ASPGERGER'S DISORER ASSESSMENT SCALE (ADAS)

Tamara J. Arthaud, Ph.D. Copyright © 2011

The *Asperger's Disorder Assessment Scale* was designed to provide a measure of those characteristics typically associated with Asperger's Disorder as described by the medical profession and observed by educators, psychologists, and psychiatrists. The *Home Version* allows parents to provide doctors, therapists, and educators with documentation and measurement of the characteristics observed in the home setting. The *School Version* allows educators to document observations of the child in the school environment. Combining both versions provides a broader scope of the child's social, emotional, academic, and communication strengths and weaknesses across different environments. Both scales have been developed to contribute valuable information to the identification process of children and youth with Asperger's Disorder.

The following functions are served by the instrument:

- Measurement of behavior by primary observers in the school or residential environment,
- comparison of an individual student to a national standard for screening purposes,
- identification of Asperger's Disorder characteristics as specified by the American Psychiatric Association,
- pinpointing areas of need for behavioral intervention/improvement; identification of goals, objectives, and interventions for the student's IEP; and program implementation with the use of the companion intervention manual, *Asperger's Disorder Intervention Manual*.

The ADAS School Version was standardized on a total of 3,413 students including identified students. The ADAS Home Version was standardized on a total of 1,998 students. Demographic characteristics of the standardization population approximated the national percentages for gender, residence, race, geographic area, and occupation of parents.

Internal consistency of the **ADAS School** and **Home Versions** fell at or above .86 for each subscale. Test-retest reliability for both versions yielded correlation coefficients ranging from .60 to .90, indicating substantial reliability for each of the 8 subscales. Coefficients for inter-rater reliability for the 8 subscales ranged from .69 to .98 for all age levels. Content validity was established through the initial development process. The school and home versions were compared to the *Childhood Autism Rating Scale (CARS)* and the *Gilliam Autism Rating Scale - Second Edition* (GARS-2) as a measure of concurrent validity. The construct validity of the scale supports strong diagnostic validity. Item performance correlated positively with total score performance, further substantiating the internal cohesiveness of the scale as a measure of adaptive skills.

The **ADAS** uses frequency-referenced quantifiers. Each item on the **ADAS** is rated on a seven point scale from (1) NOT PERSONALLY OBSERVED OR IS DEVELOPMENTALLY INAPPROPRIATE FOR AGE to (7) CONTINU-OUSLY THROUGHOUT THE DAY. Following administration, five types of scores may be obtained: frequency rating for each item (reflecting the degree of success in performing a behavior), subscale raw score (the sum of the frequency ratings for each subscale), subscale standard score (a consistent basis for comparing students), total score quotient, and percentile. Using the subscale standard scores, a profile of the student's level of functioning across the 8 subscales may be constructed.

The **ADAS** takes approximately 20 minutes to complete and can be completed by anyone familiar with the student: the classroom teacher, clinical personnel, other school personnel, or the parent/guardian. The **ADAS** complete kit consists of school and home version rating forms and technical manuals, and the *Asperger's Disorder Intervention Manual*. The intervention manual includes goals, objectives, and intervention strategies for the behaviors on the scale and was designed for the convenient development of the student's IEP.

> H A W T H O R N E Phone: (800) 542-1673 FAX: (800) 442-9509

Intervention Strategies Documentation Form

Date:				
Student name:		F	Birthdate:	Age:
School:	Parents	S:		
Team members:				
I. <u>Student History</u>				
A. Are the parents aware of your concern?	-			
B. Has the student repeated a grade? If s	o, when?			
C. Date and results of any previous individual testing?				
D. Date and results of last hearing screening:				
E. Date and results of last vision screening:				
g				
II. <u>Concerns and Interventions</u>				
Learning or Behavior Concern:		tegles		
Learning or Behavior Concern: Interventions Implemented: Interventions Implemented:	ntion Str mentatio	Intervet tion Date	S/U	Decision
Learning or Dehavior Concerns		1	<u> </u>	

Learning or Behavior Concern:

Interventions Implemented:	Intervention Date	S/U	Decision

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SCHOOL VERSION RATING FORM

Tamara J. Arthaud

COVER SHEET

RATING GUIDELINES

- The student should be rated by professional personnel with primary observational opportunities who work directly with the student during instructional or clinical situations.
- If the rater does not have first-hand knowledge and is unsure how to rate an item, it is appropriate for the rater to consult with other personnel to get information about the student's behavior in order to complete a rating of the student's typical behavior patterns.
- The rater should rely on his/her observation of the student's behavior as it occurs naturally in the educa-tional or clinical environment.
- It is not necessary to complete the rating of a student in one day. Several days may elapse before the rater is able to complete the scale.
- It is recommended that the rater read each quantifier with the item before rating the item. Using item 10 as an example, the rater would first read "Have not personally observed or is developmentally inappropriate for age to be unable to take turns," then "Less than once a month is unable to take turns," then
- "Approximately once a month is unable to take turns," then "Approximately once a week is unable to take turns," then "More than once a week is unable to take turns," then "Daily at various times is unable to take turns," and finally, "Continuously throughout the day is unable to take turns."
- If the rater has not personally observed the student demonstrate the behavior OR if the behavior/skill is developmentally inappropriate for the student's age group (e.g., a five-year-old maintaining a topic of conversation), the rating should be

NOT PERSONALLY OBSERVED OR IS DEVELOPMENTALLY INAPPROPRIATE FOR AGE.

Н

Α

1

• If the rater has observed the student for more than one month and has observed the student demonstrate the behavior one time, the rating should be



If the behavior has been demonstrated several times over more than one month with a frequency average of once a month, the rating should be



• If the behavior has been demonstrated more than once a month, even several times per month, up to an average of one time a week which means no more than four times per month; the rating should be

4 APPROXIMATELY ONCE A WEEK.

 If the behavior has been demonstrated more than one time per week, even several times per week, up to one time per day; the rating should be



 If the behavior has been demonstrated more than one time a day, up to one time per hour; the rating should be



 If the behavior has been demonstrated more than once an hour and included behavior with unlimited frequency which may even defy accurate counting at extremely high rates, the rating should be

7

E

N

CONTINUOUSLY THROUGHOUT THE DAY.

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		R: Rate every i item must be r					
NOT PERSONALLY OBSERVED OR IS DEVELOPMENTALLY INAPPROPRIATE FOR AGE	LESS THAN ONCE A MONTH	CE A ONCE A ONCE A			MORE THAN ONCE A WEEK	DAILY AT VARIOUS TIMES	CONTINUOUSLY THROUGHOUT THE DAY
1	2	3	4		5	6	7
_	Nonverbal Bel	haviors		6 17.	Is unable to	understand other	s' view points
or cann		nto others' eyes act for appropria	te	41	Raw Score		
3 2. Stares "	`through" other	people		5 10	Domonstrate	Sharing	aining tonic
		n emotion throug		<u>5</u> 18.	of conversati	es difficulty maint	aining topic
		flat or inappropr varying situatio		6 19.	of conduct" of	nibit awareness of or does not learn m observing such	appropriate
	s odd facial expr nt reason	essions for no				, "please/thank y	
6 5. Needs t tasks	o be reminded to	o look at objects	or	7 20.	Does not real others	lize how his/her a	ctions affect
6 6. Stares o	off into space			6 21.		municate for the	
someth	ripheral vision w ing or someone (he corner of his/	(i.e., looks at thir	-		atention)	ositive affect (e.g.	
26 Raw Sc	ore		rder A	22 2.	turn taking	participate in conv	rsational
	Peer Relation	nships _:s0	raci	2 23.		e and uses it to ge	
5 8. Plays al similar	ongside others v	with the same or	rSIV		needs of othe	onsive to the com ers	municative
with ot	hers (i.e., paralla	el play)	-	30	Raw Score		
	opie	tsover interactio			-	Emotional Recip	-
	le to take turns (rn to do an activ	(e.g., unable to w ity or task, etc.)	vait	2 24.		to hear others' soo t respond to comm hers)	
3 11. Prefers	to play alone			<i>2</i> 25.		interpret nonver	
	ot initiate play w			_	cues of othe others)	rs (i.e., emotiona	I state of
others t	to play	ı, but does not jo	in	1 26.	him/her (i.e.	of" or distant fron , does not recogni	
play (e. than be	iculty assuming g., always is the ing chased, alwa er," etc.)	"chaser" rather		6 27.		t) e other's emotiona avior (i.e., social i	
	iculty identifying nces of others (e	g personal space		<i>5</i> 28.		<pre>/ producing inforr specific situation</pre>	
people,		to others, bump	S	6 29.	•	omments literally	
space p to effec	tively communic	cating personal hers (e.g., unable cate to others tha er personal space	t Figure 4		instead igno	questions when res others or char on't say, "I don't l	nges the sub-
may hit	or push in an at from getting too	tempt to keep			Has difficulty others' point	y understanding o of view	r accepting

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332.	Does not socially interact/reciprocate with others	1 48.	Demonstrates difficulty with gross motor skills (e.g., difficulty throwing a ball, catch- ing a ball, running, hopping, etc.)
_33	Raw Score	1 49.	Walks with an unusual gait
	Interests		
5 33.	Remains fixated on personal topics of inter- est in conversation with others	7 50.	Demonstrates repetitive patterns of behav- ior (e.g., twirls, rocks body, flaps hands, sways head, etc.)
	Develops predictable routines with toys/ materials	1 51.	Moves body or objects in such a way as to provide visual stimulus (e.g., hand flapping,
<u>/</u> 35.	Uses unusual speech patterns that are overly precise and pedantic (i.e., talks like a "little professor") or speaks in a singsong manner	1 52.	spinning toys/materials, etc.) Is overly sensitive or overly reactive to environmental sounds (e.g., overreacts to vacuum cleaner, blender, bells, buzz of
<i>3</i> 36.	Has language, but perseverates on one topic of interest the majority of time		lights, crinkle of paper, etc.)
6 37.	Engages only in activities which focus on personal topics of interest	<i>2</i> 53.	Is overly responsive to being lightly touched (e.g., overreacts to slight bumps with others, feels pain with normal clothing
1 38.	Demonstrates unusual tone of voice (e.g., monotone, high pitch, etc.)		textures or touching, becomes uncomfort- able and disrobes, etc.)
17	Raw Score	1 54.	Demonstrates self-stimulatory behaviors in order to gain sensory input (e.g., self-
	Routines/Rituals		rocking of body, hand flapping, spinning
1 39.	Tends to be a perfectionist (i.e., wants everything "just so" or in a certain place at all times)	19	self, etc.) Raw Score
1 40	Patterns of interest are unusual in level of	L SCP	Preoccupation
<u> </u>	intensity or focus (e.g., remains engaged in activity well beyond length of time that is typical for others his/her age, etc.)	1 55.	Focuses on details rather than whole objects
5 41.	Has difficulty with changes in routines (i.e., Sional inflexible; does not accept change)	2 56.	Demonstrates persistent preoccupation with parts of objects (e.g., wheels on a car, hose of a vacuum cleaner, string of a toy,
3 42.	Becomes overly anxious or agitated when		etc.)
	items are moved or disturbed, or when rou- tines are changed	1 57.	When engaged in activity, focuses solely on a single object or part(s) of object(s) even
1 43.	with little or no variation (e.g., physically "stims" on hands or objects, holds head at		though a wide variety of objects are avail- able for use (e.g., stares or plays with an object without pausing, etc.)
	unusual angle to view body part or object, stares fixedly at object, etc.)	1 58.	Visual preoccupation with straight lines (e.g., window blinds, framing at the bottom
1 44.	that are normally found in clothing, fabrics,	1 50	of walls/floors, etc.)
1 45.	or food Has a limited diet (e.g., will only eat certain foods or food textures, avoids certain food		Is preoccupied by visual stimuli (e.g., lights, mirrors, shiny objects, spinning objects, letters, numbers, open/closed doors, etc.)
13	textures, etc.)	1 60.	lar activity when auditory distracters are
			present (e.g., can't look at a book when the radio is playing, etc.)
	Motor Mannerisms	1 61	Is unable to focus on a particular activity
5 46.	Reacts inappropriately (e.g., laughter, hand flapping, apparent excitement) to extreme emotions (e.g., screaming, crying, yelling, or having a tantrum, etc.) of others		when specific visual stimulus is present (e.g., becomes agitated when family pet is in the room, focuses on lights or different objects of interest rather than verbaliza-
6 47.	Demonstrates difficulty with fine motor skills (e.g., unable to hold a crayon, pencil, or cut with scissors, etc.)	8	tions of others, etc.) Raw Score

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SCHOOL VERSION RATING FORM

Tamara J. Arthaud

PROFILE SHEET

Name of								SUN	IMARY	OF SC	ORE	S	
student: School:	Mide						Subscales			Raw Score	Sc	ndard core	Standard Score SEM (Appendix C)
Class:	Scien	ice	· · · · · · · · · ·	(Grade: .	7	Social Intera	ction:					
City:	<u>Mide</u>	vale	· · · · · · · · · · ·		State:	<u>P4</u>	Nonverbal	Behaviors		26		5	2.61
Date of r	rating: _	<u>2006</u> (year)	1	<u>/</u>	29	<u> </u>	Peer Relat	ionships		41		4	1.63
			•		(day	·	Sharing			30	j.	3	1.88
Date of b	oirth:	1994 (year)		2 nth)	18 (day		Social/Em	otional Reci	procity	33	(6	1.96
			•	,			Behavior:			10			
Age at ra	ating: _	12		<u>9</u>	<u> </u>		Interests		cc	27		7	2.45
		(years)	•	nths)		s)	Routines/F	Rituals	イン	13	1	0	2.22
Rated by	/ (observe	er's name):	7	<u>M. Jacks</u>	on	[Motor Man	nerisms		19		9	1.65
Dates du	urina whic	ch observati	on of si	udent occ	urred:		Preoccupa	tion	014	8	1	12	1.99
	•	2006						0	TOTAL	SCOR	RE		
		pent with st			sor	ger	Sum of Subscale SS	Quotient (Appendix E		entile ^{ndix B)}	S	otient EM endix C)	Confidence Interval
Per day <u>50 min.</u> Per week <u>250 min.</u>					sio	56	89		3		.05	99 %	
· · · · · · · · · · · · · · · · · · ·			- 0	<u>ern</u> <u>-</u>	TU.			1					
			Pr z	Subsca	ales					1			
		Social Inte	raction			В	ehavior						
Standard Scores	Nonverbal Behaviors	Peer Relationships	Sharing	Social/ Emotional Reciprocity	Interests	Routines/ Rituals	Motor Mannerisms	Pre- occupation	Quotients	Quoti	ient	Percentiles	Percentile Rank
20 19	•	•	•	•				•	150 145			≥99 95	
18 17	•	•	•	•		•	•	•	140 135			90 85	•
16 15	:	•	•	•		•		•	130 125			80 75	
14 13	•	•	•	•		•	•	•	120 115			70 65	•
12 11	•	•	•	•		•	•	Å	110 105			60 55	
10 9	-	-	÷	÷		×		-	105 100 95	+	-	50 45	+
87	•	•	•	•			*	•	90 85	7		45 40 35	
6	•		•	A				•	85 80 75			30 25	
5 4 3	*	*							70 65			25 20 15	7
2 1	•	•	ж •	•		•		•	60 55			10 5	
	•					•	•		55 50	•		5 ≤1	•

Important: Before using this scale, read the section titled Rating Guidelines on page one.

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HOME VERSION RATING FORM

Tamara J. Arthaud

COVER SHEET

RATING GUIDELINES

- The child or youth should be rated by a parent, guardian, houseparent, etc., with primary observational opportunities. This person would usually be someone who lives with the child or youth in his/her home or residential setting.
- If the rater does not have first-hand knowledge and is unsure how to rate an item, it is appropriate for the rater to consult with another person to get information about the child's or youth's behavior in order to complete a rating of the child's or youth's typical behavior patterns.
- The rater should rely on his/her observation of the child's or youth's behavior as it occurs naturally in the home/residential environment.
- It is not necessary to complete the rating of the child or youth in one day. Several days may elapse before the rater is able to complete the scale.
- It is recommended that the rater read each quantifier with the item before rating the item. Using item 10 as an example, the rater would first read "Have not personally observed or is developmentally inappropriate for age to be unable to take turns," then "Less than once a month is unable to take turns," then "Approximately once a month is unable to take turns,"
- "Approximately once a month is unable to take turns," then "Approximately once a week is unable to take turns," then "More than once a week is unable to take turns," then "Daily at various times is unable to take turns," and finally, "Continuously throughout the day is unable to take turns."
- If the rater has not personally observed the child or youth demonstrate the behavior OR if the behavior/ skill is developmentally inappropriate for the child's or youth's age group (e.g., a five-year-old maintaining a topic of conversation), the rating should be

NOT PERSONALLY OBSERVED OR IS DEVELOPMENTALLY INAPPROPRIATE FOR AGE.

1

 If the rater has observed the child or youth for more than one month and has observed the child or youth demonstrate the behavior one time, the rating should be



 If the behavior has been demonstrated several times over more than one month with a frequency average of once a month, the rating should be



• If the behavior has been demonstrated more than once a month, even several times per month, up to an average of one time a week which means no more than four times per month; the rating should be

4 APPROXIMATELY ONCE A WEEK.

 If the behavior has been demonstrated more than one time per week, even several times per week, up to one time per day; the rating should be



• If the behavior has been demonstrated more than one time a day, up to one time per hour; the rating should be



 If the behavior has been demonstrated more than once an hour and included behavior with unlimited frequency which may even defy accurate counting at extremely high rates, the rating should be

7

CONTINUOUSLY THROUGHOUT THE DAY.

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	TO RATE Ever	R: Rate every i y item must be r	tem using ated. Do	the qua	ntifiers (1-7) e any boxes b	provided. blank.	
NOT PERSONALLY OBSERVED OR IS DEVELOPMENTALLY INAPPROPRIATE FOR AGE	LESS THAN ONCE A MONTH	APPROXIMATELY ONCE A MONTH	APPROXIM/ ONCE / WEEK	4	MORE THAN ONCE A WEEK	DAILY AT VARIOUS TIMES	CONTINUOUSLY THROUGHOUT THE DAY
1	2	3	4		5	6	7
	Nonverbal Bel	haviors		1 17.	Is unable to	understand other	s' view points
or cann	looking directly i ot hold eye cont t of time	nto others' eyes act for appropria	te	15	Raw Score		
	"through" other	people			_	Sharing	
3. Does no	ot show change i	n emotion throug	ah	/ 18.	Demonstrate of conversati	es difficulty maint	aining topic
facial e ate faci etc.)	xpressions (e.g., al expressions in	flat or inappropri varying situatio	i-	<i>2</i> 19.	of conduct" of behavior from	ibit awareness o or does not learn n observing such	appropriate behaviors
	s odd facial expr nt reason	essions for no			(e.g., saying, taking, shari	"please/thank y ng, etc.)	ou," turn
2 5. Needs t tasks	to be reminded to	o look at objects	or	3 20.	Does not real others	lize how his/her a	ctions affect
2 6. Stares	off into space			1 21.		municate for the	
someth		(i.e. leeks at this	ıgs		of sharing po autontion)	sitive affect (e.g.	, joint
13 Raw Sc	he corner of his/ ore	ner eyes)	rder A	3 22.	Is unable to j taking	participate in conv	versational
		ships _:c0	rder	223.		and uses it to ge	
2 8. Plays a	longside others v	nships with the same or hyplays or intera	rsion		needs of othe	onsive to the com ers	municative
similar with ot	objects, but rare hers (i.e., parall	lý plaýs or ir terá el play)	icts	11	Raw Score		
9. Prefers with pe	inanimete objec ople	ts over interactio	on	_	-	Emotional Recip	-
	le to take turns rn to do an activ	(e.g., unable to w ity or task, etc.)	vait	<i>2</i> 24.		to hear others' so t respond to comi ners)	
11. Prefers	to play alone			3 25.		interpret nonvei	bal facial
	ot initiate play w		_		cues of othe others)	rs (i.e., emotiona	al state of
others t	to play	j, but does not jo	in	3 26.		of" or distant from , does not recogni	
play (e. than be	ficulty assuming .g., always is the sing chased, alwa er," etc.)	"chaser" rather		<i>2</i> 27.		t) other's emotiona avior (i.e., social	
	ficulty identifying nces of others (e	g personal space .g., climbs on		<i>2</i> 28.		<pre> / producing inform specific situation </pre>	
	stands too close ers, etc.)	e to others, bump	S	<i>2</i> 29.	Interprets co	omments literally	
space p to effect	tively communic	cating personal hers (e.g., unable cate to others that er personal space	it	2 30.	instead igno	questions when res others or char on't say, "I don't l	nges the sub-
may hit	or push in an at from getting too	tempt to keep	-	<i>2</i> 31.	Has difficulty others' point	v understanding o of view	or accepting

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1 32.	Does not socially interact/reciprocate with others	<i>2</i> 48.	Demonstrates difficulty with gross motor skills (e.g., difficulty throwing a ball, catch- ing a ball, running, hopping, etc.)
	Raw Score	1 49.	Walks with an unusual gait
	Interests		
1 33.	Remains fixated on personal topics of inter- est in conversation with others	2 50.	Demonstrates repetitive patterns of behav- ior (e.g., twirls, rocks body, flaps hands, sways head, etc.)
	Develops predictable routines with toys/ materials	1 51.	provide visual stimulus (e.g., hand flapping,
	Uses unusual speech patterns that are overly precise and pedantic (i.e., talks like a "little professor") or speaks in a singsong manner	1 52.	spinning toys/materials, etc.) Is overly sensitive or overly reactive to environmental sounds (e.g., overreacts to vacuum cleaner, blender, bells, buzz of
2 36.	Has language, but perseverates on one topic of interest the majority of time		lights, crinkle of paper, etc.)
2 37.	Engages only in activities which focus on personal topics of interest	2 53.	Is overly responsive to being lightly touched (e.g., overreacts to slight bumps with others, feels pain with normal clothing
<i>2</i> 38.	Demonstrates unusual tone of voice (e.g., monotone, high pitch, etc.)		textures or touching, becomes uncomfort- able and disrobes, etc.)
10	Raw Score	<u>3</u> 54.	Demonstrates self-stimulatory behaviors in order to gain sensory input (e.g., self-
	Routines/Rituals		rocking of body, hand flapping, spinning
<i>2</i> 39.	Tends to be a perfectionist (i.e., wants everything "just so" or in a certain place at all times)	165	self, etc.) Raw Score
		PP.	Preoccupation
3 40.	Patterns of interest are unusual in level of the intensity or focus (e.g., remains engaged in activity well beyond length of time that is typical for others his/her age, etc.)	2 35.	Focuses on details rather than whole objects
341.	Has difficulty with changes in routines (i.e., inflexible; does not accept change)	3 56.	with parts of objects (e.g., wheels on a car, hose of a vacuum cleaner, string of a toy,
1 42.	Becomes overly anxious or agitated when items are moved or disturbed, or when rou- tines are changed	<i>3</i> 57.	etc.) When engaged in activity, focuses solely on a single object or part(s) of object(s) even
<i>2</i> 43.	Bodily postures are "odd" or extreme with little or no variation (e.g., physically "stims" on hands or objects, holds head at	_	though a wide variety of object(s) even able for use (e.g., stares or plays with an object without pausing, etc.)
_	unusual angle to view body part or object, stares fixedly at object, etc.)	<i>2</i> 58.	Visual preoccupation with straight lines (e.g., window blinds, framing at the bottom
<i>1</i> 44.	Has difficulty tolerating different textures that are normally found in clothing, fabrics, or food	1 59.	of walls/floors, etc.) Is preoccupied by visual stimuli (e.g., lights, mirrors, shiny objects, spinning objects,
1 45.	Has a limited diet (e.g., will only eat certain foods or food textures, avoids certain food		letters, numbers, open/closed doors, etc.)
13	textures, etc.) Raw Score	2 60.	Is unable to visually focus on a particu- lar activity when auditory distracters are present (e.g., can't look at a book when the
	Motor Mannerisms		radio is playing, etc.)
<i>3</i> 46.	Reacts inappropriately (e.g., laughter, hand flapping, apparent excitement) to extreme emotions (e.g., screaming, crying, yelling, or having a tantrum, etc.) of others	1 61.	Is unable to focus on a particular activity when specific visual stimulus is present (e.g., becomes agitated when family pet is in the room, focuses on lights or different
1 47.	Demonstrates difficulty with fine motor skills (e.g., unable to hold a crayon, pencil, or cut with scissors, etc.)	14	objects of interest rather than verbaliza- tions of others, etc.) Raw Score

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HOME VERSION RATING FORM

Tamara J. Arthaud

PROFILE SHEET

		SUMMARY OF SCORES					
Name: <u>Andrew Thomas</u>	_ Gender: <u>_</u>	Subscales		Raw Score	Standard Score (Appendix A)	Standard Score SEM (Appendix C)	
School: <u>Midvale Elementary</u>	Grade:	Social Interaction:					
		Nonverbal Beha	viors	13	10	2.61	
City: <u>Midvale</u>	State: <u><i>P</i></u>	Peer Relationshi	ips	15	11	2.12	
		Sharing		11	10	2.61	
		Social/Emotiona	I Reciprocity	19	9	2.27	
Date of rating: <u>2007</u> <u>1</u> (year) <u>(month)</u>	<u>23</u> (day)	Behavior:		1.0			
	(day)	Interests	Ċ	24	11	2.58	
Date of birth: <u>1998</u> <u>9</u> (year) (month)	- <u>7</u> (day)	Routines/Rituals		13	10	2.79	
		Motor Manneris	ne	16	10	2.19	
Age at rating: <u>8</u> <u>4</u> (months)	<u>16</u> (days)	Preocoupation	COL	14	9	2.50	
		133	TOTA		RE		
Rated by: <i>M. Gackson</i> Relationship to child: <i>mother</i>	Disorder Versio	Sum of Subscale SS Qu (App		ercentile Appendix B)	Quotient SEM (Appendix C)	Confidence Interval	
Notationship to child. <u>mounet</u>	Visio	80	96	41	4.75	99 %	
erger	Versi	<u> </u>	•				

	Suscales											
		Social Inte	ractio			Be	ehavior					
Standard Scores	Nonverbal Behaviors	Peer Relationships	Sharing	Social/ Emotional Reciprocity	Interests	Routines/ Rituals	Motor Mannerisms	Pre- occupation	Quotients	Quotient	Percentiles	Percentile Rank
20 19 18 17 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1	* • • • •	•••••••••••••••••••••••••••••••••••••••	· · · · · · · · · · · · · · · · · · ·		•••••••••••••••••••••••••••••••••••••••	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	•••••••••••••••••••••••••••••••••••••••	150 145 140 135 120 115 110 105 100 95 90 85 80 75 70 60 55	·····	≥99 95 90 85 80 75 70 65 60 55 60 55 50 45 40 35 20 15 20 15 5	· · · · · · · · · · · · · · · · · · ·
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II. Goals, Objectives, and Interventions

1 Avoids looking directly into others' eyes or cannot hold eye contact for appropriate amount of time

Goals:

- 1. The student will improve his/her ability to look directly into others' eyes.
- 2. The student will improve his/her ability to hold eye contact for an appropriate amount of time.

Objectives:

- 1. The student will be able to make direct eye contact _____% of the time.
- 2. The student will maintain eye contact, when information is being communicated, ____% of the time.
- 3. The student will make eye contact with a peer when interacting on _____ out of _____ trials.
- 4. The student will make eye contact with a teacher when interacting on _____ out of _____ trials.

Interventions:

1. Focus on remediating one concern at a time. If focusing on eye contact, avoid working on other areas such as asking for conversation, expecting social interaction, etc.

2. Attempt to provide only one set ory input at a time. Allow the studen, to look elsewhere, and then ask questions regarding the lesson to determine if he/she is hist ining. The student may be attending even if he/she is not looking at you.

3. Remove other distracters (e.g., visual, auditory, taste, smell and movement).

4. Use a verbal cue (e.g., "I need your eyes.").

5. Consult with other professionals regarding additional visual difficulties (e.g., Irlen Syndrome, need for glasses with polarized lenses, etc.).

6. Practice making eye contact without the need for performing other tasks, such as listening or interacting.

7. Explain the importance of eye contact in social interaction when appropriate. Include how it makes people feel when eye contact is not given.

8. Get down to eye level with the student.

Stay in the student's line of vision.

It Use exaggerated facial expressions (e.g., vide eyes, big smile, etc.) when successful eye contact is achieved, followed by a verbal cue "Hello," "Thank you," or "Good eyes."

11. Establish rules for listening (e.g., looking at the person who is talking, responding verbally when the other person is done, repeating what is said, asking questions when the message is not understood, etc.). These rules should be followed by everyone in the classroom.

12. Have the student practice appropriate eye contact with the teacher(s).

13. Evaluate the visual and auditory stimuli in the classroom. Determine the amount of stimuli the student can tolerate. Remove the extraneous stimuli from the environment.

14. Ask the student to be the leader of a small group activity if he/she possesses mastery of skills or an interest in that area.

15. Teach and practice effective communication skills. These skills include listening, maintaining eye contact, and positive body language.