

Woodstock Community School District #200
Autism Eligibility Criteria

DSM-5 Criteria

Must meet criteria A, B, C, and D

- A. Persistent deficits in social communication and social interaction across contexts, not accounted for by general developmental delays, and manifest by all 3 of the following:
 - 1. Deficits in social-emotional reciprocity; ranging from abnormal social approach and failure of normal back and forth conversation through reduced sharing of interests, emotions, and affect and response to total lack of initiation of social interaction,
 - 2. Deficits in nonverbal communicative behaviors used for social interaction; ranging from poorly integrated-verbal and nonverbal communication, through abnormalities in eye contact and body-language, or deficits in understanding and use of nonverbal communication, to total lack of facial expression or gestures.
 - 3. Deficits in developing and maintaining relationships, appropriate to developmental level (beyond those with caregivers); ranging from difficulties in sharing imaginative play and in making friends to an apparent absence of interest in people
- B. Restricted, repetitive patterns of behavior, interests, or activities as manifested by at least two of the following:
 - 1. Stereotyped or repetitive speech, motor movements, or use of objects; (such as simple motor stereotypies, echolalia, repetitive use of objects, or idiosyncratic phrases).
 - 2. Excessive adherence to routines, ritualized patterns of verbal or nonverbal behavior, or excessive resistance to change; (such as motoric rituals, insistence on same route or food, repetitive questioning or extreme distress at small changes).
 - 3. Highly restricted, fixated interests that are abnormal in intensity or focus; (such as strong attachment to or preoccupation with unusual objects, excessively circumscribed or perseverative interests).
 - 4. Hyper-or hypo-reactivity to sensory input or unusual interest in sensory aspects of environment; (such as apparent indifference to pain/heat/cold, adverse response to specific sounds or textures, excessive smelling or touching of objects, fascination with lights or spinning objects).
- C. Symptoms must be present in early childhood (but may not become fully manifest until social demands exceed limited capacities)
- D. Symptoms together limit and impair everyday functioning.

State Definition:

Autism is a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three that adversely affects a child's educational performance. (A child who manifests the characteristics of autism after age 3 could be diagnosed as having autism if the other criteria of this Section are satisfied.) Other characteristics often associated with autism are engagement repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. The term does not apply if a child's educational performance is adversely affected primarily because the child has an emotional disturbance.

Eligibility Criteria:

A diagnosis of Autism is arrived at when a child has impairments in each of three areas:

- Deficits in social-emotional reciprocity
- Non-verbal communications
- Deficits in developing, maintaining, and understanding relationships

and in two of the following areas:

- Stereotyped or repetitive motor movements, use of objects, or speech
- Insistence on sameness, inflexible adherence to routines, or ritualized verbal or nonverbal behavior
- Highly restricted, fixated interests that are abnormal in intensity
- Hyper-or hypo reactivity to sensory input or unusual interest in sensory aspects of the environment.

Adverse Effect:

1. Inability to independently demonstrate acquisition of age/grade skills aligned to learning standards in the general classroom
2. Inability to establish or maintain appropriate relationships with peers and /or adults
3. Difficulty meeting the general behavior requirements in adaptive behavior of school settings (e.g. tantrums, change in routine, daily living skills social/emotional regulation)

Eligibility Determination:

Meets diagnostic criteria across settings using a multi-method evidence gathering process and shows one or more documented adverse effects.

ASD Diagnostic Tool – DSM-5

A. Deficits in Social Communication/Interaction (All required)

1. Deficits in Social-emotional reciprocity

- failure to initiate or respond to interactions
 - shows little or no initiation of social interaction
 - reduced or absent imitation of others' behavior
- reduced sharing of interests, emotions, or affect
 - communication used to request or label rather than to comment, share feelings, or converse
 - does not show items or draw others into their activities
- abnormal social approach
 - does not spontaneously greet
 - does not respond to greetings
 - inappropriate approaches
- failure of normal back-and-forth conversation
 - often one-sided, lacking in social reciprocity
- struggles to understand social norms
 - difficulties understanding when and how to join a conversation
 - difficulties understanding what not to say

(for individuals who have learned compensation strategies, they may still struggle in unsupported or novel situations, and experience anxiety over having to consciously calculate what should be socially intuitive)

2. Non-verbal communications

- poorly integrated verbal and nonverbal communication
- abnormalities in eye contact
- abnormalities in body language/facial expressions
- abnormalities in speech intonation (e.g., monotone, inappropriate inflection, atypical prosody)
- deficits in understanding and use of gestures
- total lack of facial expressions and nonverbal communication
- deficits in initiating or responding to joint attention

3. Deficits in developing, maintaining, and understanding relationships

- absence of interest in peers/adults
 - aloof, preferring solitary play/activities
- difficulties engaging in joint interactive play
 - in young children, lack of shared social play and imagination (lack of age-appropriate flexible pretend play)
 - in older children, insistence on playing by very fixed rules
- difficulty establishing/maintaining friendships
 - lacks complete or realistic idea of what friendship entails
 - one-sided friendships or friendships based solely on shared special interests
 - apparent preference for interacting with much younger or older people
- difficulties adjusting behavior to suit various social contexts
 - struggles to understand what behavior is appropriate in different situations (e.g. using casual language in an interview)
 - struggles to understand role in social relationships
 - struggles to understand the different ways that language may be used to communicate (e.g., irony, white lies, sarcasm, non-literal language)

Specify current severity (see Table at bottom of page 2):

- Requiring very substantial support
- Requiring substantial support
- Requiring support

Best Practices for Educational Autism

Assessment

- # History data prior to age 3
- # ADOS 2
- # Checklists i.e. CARS, GARS, etc
- # Classroom observation to specify adverse effect
- # Speech and language assessment (pragmatic communication, flexible patterns, multiple meaning words, intonation etc)
- # OT to assess sensory aspects
- # Social/Emotional (anxiety, depression, ADHD, etc)
- # Executive functioning
- # Other assessments as needed

Interventions

- ❖ Language
- ❖ Social skills
- ❖ Academic pragmatic language/reading comprehension
- ❖ Organizational/learning to learn strategies
- ❖ Explicit/systematic instruction
- ❖ Applied behavioral analysis, visual supports