

Outline

The Developmental Perspective

Core functional emotional capacities: Case examples
Inherited neurobiology and human experience
Infant/Child seeking security, information, meaning
Role of the parent-child bond
All developmental domains are interdependent
What typical traits are missing in ASD-like behavior?

Assessment and Easy-To-Miss "Red Flags"

Earliest atypical infant behavior
DSM-5[®] criteria
Formal evaluations
Your play/activity with child
Informal and qualitative traits
Parent-Child (P-C) Interaction
Differentiating SID or Expressive-Receptive LD from ASD
Current research findings

Developmental Evaluation

Rate six core functional stages
Regulation and shared attention
Warm engagement
Intention and purposeful, reciprocal interaction
Continuous interaction and problem-solving
Symbolic play and language
Representational thinking
Level of communication and play/activity
Quality of P-C emotional bond
Joint Attention (JA) and Imitation
Atypical Sensory-Motor Systems
Patterns and triggers for ASD-like behavior

INTERVENTION STRATEGIES AND TECHNIQUES

Encourage Shared Play and Pleasure

Establish and hold mutual engagement
Track child's interests at his/her functional level
Follow child's back-and-forth pace
Find Fun!! Go for the "Gleam" and eye contact
Gently join self-absorbing action
Invite/model further exploration

Objectives:

1. Summarize the core functional emotional developmental capacities as they relate to assessment and treatment of autism in clients.
2. Assess for "red flags" and subtle signs of "autistic-like" behaviors seen in young children who are at risk for autism.
3. Use formal/developmental assessment protocols to determine if autism is present.
4. Implement clinical techniques to reduce problematic behaviors inherent to young children with autism.
5. Use affect-based strategies to improve client engagement and reciprocity in clinical treatment.
6. Design an intervention treatment plan customized to meet the developmental needs of each individual child.

Target Audience: Speech-Language Pathologists • Occupational Therapists • Occupational Therapy Assistants • Psychologists • Counselors • Social Workers • Educators • Early Interventionists • Nurses Behavior Specialists • Marriage and Family Therapists • Other helping professionals who work with children birth-5 years

Inject needed "affect"
Reciprocity/communication
Intentionality
Rigidity/transitions

Treat Difficult Behaviors

Dysregulation, security seeking
Meltdowns
Seeking/avoiding
Stimming/self-absorbed
Perseveration
Physical proximity/holding
Eating/sleeping problems

Major Treatment Approaches

Relationship-based, ABA, mixed programs
Application of Developmental (DIR) Model
Dyadic treatment approach

Developmental Treatment Framework

Create a treatment plan in class: Class example
Follow developmental evaluation
Prepare suitable sensory-motor environment
Shoot for child succeeding at his developmental level
Follow and join child's interests

Empower Parents and Families

Help them come to terms with the ASD diagnosis
Strategies for grief, stress, anxiety and depression
Strengthen/coach the parent-child relationship:
Case example
Understand their child's behavior and motives
Team work/referral process
Coordination with school placement

Live Seminar Schedule

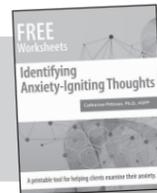
7:30 Registration/Morning Coffee & Tea
8:00 Program begins
11:50-1:00 Lunch (*on your own*)
4:00 Program ends

There will be two 15-min breaks (mid-morning & mid-afternoon).
Actual lunch and break start times are at the discretion of the speaker.
A more detailed schedule is available upon request.

FREE Worksheets

Identifying Anxiety-Igniting Thoughts

By Catherine Pittman, Ph.D. HSPP



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Early Intervention for Autism

A Developmental Approach to Assessment & Treatment



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Buffalo, NY
Monday, February 11, 2019

Rochester, NY
Tuesday, February 12, 2019

Syracuse, NY
Wednesday, February 13, 2019

Early Intervention for Autism

A Developmental Approach to Assessment & Treatment

- How to begin treatment with children as young as 9 months old
- Assessment & observational tools to identify the easy-to-miss signs of autism
- Create treatment plans for each child's unique challenges
- Empower parents with dyadic interventions



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Early detection is critical to effective autism treatment... every moment counts.

But, at what age can you effectively identify autism and begin treatment? Do you know how to start treatment with very young children? Join autism expert, Griffin Doyle, PhD, and get the answers to these questions and more!

Looking through a developmental lens, you will learn new and improved strategies allowing you to effectively close the gap between what you know about autism and how to begin early treatment!

Through case examples, videos and lively class discussion you'll be guided on how you can **identify key markers of autism** and **begin treatment with children as young as 9 months old**. You'll get specific instruction so you can effectively intervene, prevent regression and promote developmental gains in young children – even prior to formal diagnosis.

Attend and learn the necessary skills you need to:

- Ask “What is missing?” - Subtle differences in neurotypical and ASD-like children
- Identify the easy-to-miss ‘red flags’ of ASD in infants, toddlers and young children
- Develop an initial working profile of sensory-motor processing deficiencies
- Customize treatment plans for each child’s unique challenges
- Positively impact clinical outcomes with evidence-based therapeutic strategies to reduce and replace maladaptive behaviors

Don't let a wait and see approach cost kids a better future. Intervene early when brain plasticity is much more pronounced and the impact of intervention is much more comprehensive!

Register today and get the early identification and intervention skills you need to make a life-changing impact on children with autism!

Speaker

Griffin Doyle, Ph.D., is a licensed clinical psychologist with over 43 years of experience practicing psychoanalytic and developmentally-based psychotherapy with children and adults in private practice. Dr. Doyle has over 30 years of experience assessing and treating infants, toddlers and pre-school children “at-risk-for” or diagnosed with Autism Spectrum Disorder (ASD). He primarily works in a parent-mediated, developmentally-oriented treatment model popularly known as DIR/Floortime ©. This is a multi-dimensional framework that weaves together cognitive, social-emotional, relational, and innate constitutional factors as they interact uniquely in each child. Dr. Doyle has worked and collaborated with a variety of specialists and reviewed studies aiming to capture the earliest signs and effective treatments for the youngest portion of the ASD population. He consistently lectures, trains and consults on “red flags”, subtle diagnostic cases, and the variability of symptom formation during early development (0-5 years). Dr. Doyle has found being face-to-face with each unique child and his/her caregiver provides a critical, compelling means to witness the child’s interests, communication style and capacity to engage. He coordinates ASD intervention with a team of occupational therapists, speech therapists, educators and pediatricians for the best possible outcomes. He often serves not only as a team member, but also as a case manager coordinating care to construct, execute, and refine treatment strategies.

Dr. Doyle has served as a core faculty member of various post-graduate training organizations. He is a co-founder, senior faculty, and training coordinator for the Profectum Foundation Training Programs. In this capacity, he teaches, mentors, and designs curriculum for a range of domestic and international professionals wishing to become proficient in practicing a comprehensive, relationship-based approach with pre-school up through college age ASD individuals. Further, Dr. Doyle has advised widely at various public, private, and special educational settings, treatment centers, and a long-term research project promoting and studying development of ASD children. He testifies as an expert witness throughout Washington, DC and West Virginia regarding legal matters regarding treatment, custody, and divorce visitation with HFA children.

Speaker Disclosures:
 Financial: Griffin Doyle is in private practice. He receives a speaking honorarium from PESI, Inc.
 Non-financial: Griffin Doyle is a member of the American Psychological Association; and Maryland Psychological Association.

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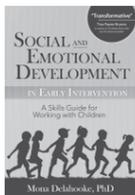


The Key to Autism

An Evidence-based Workbook for Assessing and Treating Children & Adolescents

By **Cara Marker Daily, PhD**

The Key to Autism is an invaluable and comprehensive resource for any professional assessing and treating autism in children and adolescents. Filled with dozens of case examples, exercises to understand how the brain with autism works, the latest tools for screening and assessment, and “how-to” sections for applied behavior analysis (ABA), this workbook is the key to understanding the minds of children and adolescents with autism.



Social and Emotional Development in Early Intervention

By **Mona M. Delahooke, PhD**

A groundbreaking resource for the field of early intervention. Illustrated with worksheets, charts and handouts, this reader-friendly book will provide valuable tools to nurture relationships, measure progress, reduce child stress, address challenging behaviors and promote self-regulation.

Seminar on DVD or CD Package: You can purchase a self-study package on the subject. You will receive a set of CDs or DVDs that include a digital copy of the seminar manual and post-test/evaluation. You and your colleagues can receive CE hours for a nominal fee. To determine if homestudy credits are available for your profession go to www.pesi.com or call 800-844-8260. Check with your licensing board to verify acceptance of self-study credits for license renewal. Order today by using the order form on this brochure or by calling 800-844-8260.

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If your profession is not listed, please contact your licensing board to determine your continuing education requirements and check for reciprocal approval. For other credit inquiries not specified below, or questions on home study credit availability, please contact cepesi@pesi.com or 800-844-8260 before the event.

Materials that are included in this course may include interventions and modalities that are beyond the authorized practice of mental health professionals. As a licensed professional, you are responsible for reviewing the scope of practice, including activities that are defined in law as beyond the boundaries of practice in accordance with and in compliance with your professions standards.

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NEW YORK EDUCATORS: PESI, Inc. is an approved sponsor of CTLE with the New York State Education Department’s (NYSED) Office of Teaching Initiatives. Provider #23567. This activity will qualify for 6.25 Approved Continuing Teacher and Leader Education (CTLE) Hour(s), in the area of Pedagogy. Hours are based on full attendance.

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Nurses in full attendance will earn 6.3 contact hours. PARTIAL CONTACT HOURS WILL BE AWARDED FOR PARTIAL ATTENDANCE.

OCCUPATIONAL THERAPISTS & OCCUPATIONAL THERAPY ASSISTANTS: PESI, Inc. is an AOTA Approved Provider of continuing education. Provider #: 3322. Full attendance at this course qualifies for 6.0 contact hours or 6 CEUs in the Category of Domain of OT and Occupational Therapy Process. Partial credit will be issued for partial attendance. The assignment of AOTA CEUs does not imply endorsement of specific course content, products, or clinical procedures by AOTA. Course Level: Intermediate.

PSYCHOLOGISTS: This activity consists of 6.25 clock hours of continuing education instruction. The following state psychologist boards recognize activities sponsored by PESI, Inc. as an approved ACCME provider: Alaska, Arkansas, California, Colorado, Georgia, Illinois, Indiana, Kentucky, Maryland, Missouri, Nebraska, New Hampshire, New Jersey, New Mexico, Pennsylvania and South Carolina. Certificates of attendance will be issued for you to submit to your state licensing board to recognize for continuing education credit. Full attendance is required; no partial credits will be offered for partial attendance.

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OTHER PROFESSIONS: This activity qualifies for 380 minutes of instructional content as required by many national, state and local licensing boards and professional organizations. Save your course outline and certificate of completion, and contact your own board or organization for specific requirements.

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