

He has made progress on both of the goals even though they cannot be considered to be mastered completely. Jack is able to initiate a conversation appropriately most of the time. He will occasionally use volume as a means of initiating or maintaining a conversation if he has a particular point to get across to others. He is able to use eye contact fairly well, and most often can wait for a turn, unless he is very vested in the conversation and then he will tend to talk over others. He can take turns when he wants to, is able to use appropriate speech and will often maintain the topic if it is of his interest. There are aspects of conversation which still need to be worked on individually rather than as part of a larger goal. The most important aspect, which will allow him to be involved in conversations with peers, would be initiating and maintaining a conversation that is not of his particular interest. Currently he is able to do this with 40% accuracy. This will relate to his ability to be interested in others and their interests.

His second goal centered on his ability to use comprehension strategies in order to answer comprehension questions. His ability to summarize is fairly good. He has difficulty drawing conclusions, making predictions and identifying cause and effect with consistency. He will benefit from focusing on increasing his ability to make a prediction about what might happen in a situation because it will take into account the ability to draw a conclusion and identify the cause and/or effect in a situation. Currently he is able to make correct predictions 50% of the time.

Jack will also benefit by increasing his ability to understand figurative language such as analogies, idioms, and clichés. Currently he is able to explain the non-literal meaning of these forms of figurative language with 50% accuracy. It is the recommendation that he receive speech services for 90 minutes per week for the next year.

OCCUPATIONAL THERAPY

Eval. Sample.

Present Level of Performance:

Currently, Jack is a very pleasant boy who works well during therapy sessions. Jack is right hand dominant and uses a tripod grasp on his pencil. He demonstrates fair to good in-hand manipulation skills. Jack is able to translate an object from his palm to his fingertips however he has difficulty using finger rotation to flip his pencil to erase. Jack's distal motor control and dexterity are delayed. He has difficulty with pencil control with unfamiliar strokes. He keeps his hand and wrist stabilized on the table when writing and demonstrates dynamic wrist and finger movements. Jack's control of the pencil varies. At times, he uses very unrefined pencil strokes to form letters and other times he demonstrates good control. This greatly impacts Jack's overall legibility. Jack writes primarily using print. During writing, Jack's pencil pressure on the paper varies. When using firm pencil pressure, Jack has difficulty erasing efficiently which impacts legibility. He requires cues for expectations for adequate spatial organization, specifically letter size, age appropriate spacing and use of the left margin. Jack is able to identify and correct mistakes given only 2-3 cues. Generally, Jack demonstrates large letter size with letter's r and w. "Tall" letters are often the same size as the short letters. Jack's use of spacing also varies. He will use inefficient spacing then excessive spacing all within the same sentence or paragraph. When given the verbal expectation for using the margin, Jack demonstrates increased success. When not monitored or working independently within his classroom, his accuracy declines significantly. Jack was introduced to cursive in third grade and has also had practice within his classroom in fourth grade for the first quarter however he does not spontaneously write using cursive. He is not able to sign his name with proper formation. Jack needs to monitor his quality of written work with more independence. At times, Jack requires sensory activities to attend appropriately during therapy sessions and within the classroom. Jack has been participating in sensory activities over the last several years with an inconsistent response. What strategies work for Jack one day, may not work for him the next. A list of sensory strategies will be provided to the classroom staff to assist with monitoring Jack's sensory needs.

FROM MET REPORT PAGE

OT ELIGIBILITY

At this time, no additional motor skills data is necessary to determine continued eligibility. Jack continues to qualify for educationally-based occupational therapy services. Services should consist of consultation with the classroom staff as well as direct services.

CONSIDERATION OF DISADVANTAGING CONDITIONS

A requirement of evaluations according to Arizona State Rules and Regulations is that the Multidisciplinary Team considers the impact of any racial, and/or cultural considerations or educational disadvantage upon the need for special education. The racial/ethnic background of the child is Caucasian, the primary language used in the home is English, and the primary language of the child is English. Racial/ethnic background was ruled out as a factor in determining the need for special education. No information was provided that would suggest educational, economic, or cultural disadvantage, which are ruled out as main factors at this time. The student has been attending school on a regular basis. Further, there is no indication that there has been a lack of instruction in reading, math, or written language.

CONSIDERATION OF THE NEED FOR ADDITIONAL DATA

Recently Jack was taken off his ADHD medication, during that time both his parents and school staff noted very significant changes in his behavior. While his hyperactivity and distractibility increased, his mood, social responsiveness and spontaneous language were remarkably improved. Jack typically mumbles, is easily irritated, demonstrates flat affect, and responds to linguistic interactions with minimal language. While not medicated, Jack appeared significantly happier, not demonstrating the irritability that was common to his emotional affect. He not only was more engaged and socially responsive; he far more frequently initiated verbal interactions with staff and students. Jack's parent shared with our team the request they had made of **Melmed** Center personnel to re-administer the ADOS and revisit the Autism Spectrum Disorder diagnosis that was made while Jack was medicated. Center personnel felt his behavior would impede assessment. The Multidisciplinary Evaluation Team reviewed his significant behavior change, the current **Melmed** Center Evaluation and determined that there was a need to collect additional data while Jack was not taking medication, to determine if his current autism diagnoses from the **Melmed** Center remains consistent when Jack's affect is impacted by ADHD medications.

The IEP Team met and reviewed the existing data including current changes in behavior, evaluations, parent input, classroom-based assessments, observations, and teacher input. The following questions were addressed:

1. Does the student continue to meet the definition of a student with a disability?

Additional data is warranted to determine if Jack warrants additional eligibility as a child with an Autism Spectrum Disorder.

2. What are the student's present levels of performance and educational needs?

The team concurred no additional data is needed to determine current levels of achievement, receptive and expressive language functioning.

3. Does the student continue to need special education services?

The team concurred that additional data is not needed to substantiate a continuing need for special education services.

OCCUPATIONAL THERAPY DISCHARGE SUMMARY

NAME: Jack Schell
DOB: 1/16/03
DOR: 7/26/15
OT: Melissa Hardy OTR/L

SCHOOL: Mohave
GRADE: 7th
TEACHER: Ms. Murphy

Jack is right hand dominant and uses a tripod grasp on his pencil. He uses a bilateral approach and keeps his hand and wrist stabilized on the table when writing. He uses dynamic wrist and finger movements. Jack's control of the pencil varies. He will often rush through a writing task without regard for spatial organization, especially letter size. When asked to slow down the speed of his writing, he is able to demonstrate more age appropriate writing. He becomes very frustrated with writing tasks and is easily overwhelmed. Jack responds positively to adapted paper which makes his writing smaller and more legible. This accommodation is made throughout his day within the regular education classroom. The amount of written work has also been reduced within the classroom setting however even during short, fill in the blank type worksheets, his spatial organization is inconsistent. This greatly impacts Jack's overall legibility. He is very proud of himself when he receives praise for appropriate writing however he seems to lack the internal motivation to try his best each time. It is apparent that Jack's difficulty with legible writing is not solely a behavioral or motivational component. Jack is able to erase efficiently if he takes his time. His spacing between words has improved greatly and he is using age appropriate uniform spacing for most writing tasks. He is consistently using the left margin without cues. Jack has a cursive signature which is consistent. Jack is able to use an onscreen keyboard with mouse and word prediction and type from a draft 27 words, (4 sentences) in 5 to 5 1/2 minutes. He seems to really enjoy using the computer rather than writing. Jack has used sensory strategies in the past but they do not seem to work for very long. He has access to the sensory room and with fidgets and other equipment within the classroom. Most of Jack's issues appear to be more behavioral and avoidance of task behaviors. He is still easily distracted within the classroom and talks to himself a lot or makes noises however they appear to be less this year. He is remaining in his seat more during class with less getting up and walking around.

ELIGIBILITY/RECOMMENDATIONS

At this time the team agrees that Jack no longer requires the support service of OT within his educational setting, no further evaluations are required. He is being staffed out of OT.