

**SPED 515**  
**Artifact Rubric for Assessment Project**

Name: Jessica Null

Date: 12/08/10

Informal Assessment (2)	20 points	<u>Comments:</u>
<ul style="list-style-type: none"> <li>● Describe 2 informal assessments ✓</li> <li>● Discuss the strengths and weaknesses of each ✓</li> </ul>	score: <u>20</u>	
<b>Formal Assessment (2)</b> <ul style="list-style-type: none"> <li>● norm referenced ✓</li> <li>● curriculum referenced ✓</li> <li>● Publication Information ✓</li> <li>○ Purpose of Instrument ✓</li> <li>○ Psychometric Properties ✓</li> <li>○ Administration of Instrument ✓</li> <li>○ Strengths and limitations ✓</li> </ul>	30 points <i>Carolina, Wisconsin</i> score: <u>30</u>	<i>The RBT is an excellent routine based tool and one of the newest in the field!</i>
<b>Case Study Information</b> <ul style="list-style-type: none"> <li>● age, gender, family history ✓</li> <li>● significant medical information ✓</li> <li>● referral concerns ✓</li> <li>● assessments administered with outcomes report ✓</li> <li>● summary of your impressions ✓</li> </ul>	20 points score: <u>20</u>	<i>Complete social history - nice!</i>
<b>Technical Skills</b> <ul style="list-style-type: none"> <li>● Includes all of the above elements ✓</li> <li>● Well Written (Well Organized, Written with Clarity and Efficiency, Professional in Presentation) ✓</li> <li>● Submitted on time, typed, people first language, error free (grammar &amp; spelling) ✓</li> <li>● References and Internet Resources (Websites) in APA format ✓</li> </ul>	20 points score: <u>20</u>	<i>Good professional document</i>
<b>Oral Presentation</b> <ul style="list-style-type: none"> <li>● Professionalism (Grammar, People First Language, professional terms)</li> <li>● Organized and Concise (Stays on topic, Pace is appropriate)</li> <li>● Visual Aids</li> <li>● Engages the audience</li> </ul>	10 points score: <u>8</u>	<i>Very professional presentation. Feel better! ☺</i>
<b>Total Artifact Points</b>	100 points score: <u>98/A</u>	

Jessica Null  
SPED 515  
May Insley  
8 December 2010

### **Assessment Battery and Case Study Project**

#### **Family History**

Harry is a 20 month old male toddler who was born vaginally in February 2009. He was carried full term without complications. His mother did not smoke, drink, or consume drugs during her pregnancy. She sought pre-natal care early and attended all of her scheduled appointments, ate right, and took pre-natal vitamins as directed by her physician. Harry was born to a dual parent household consisting of his mother, Danni, and father, Tim. Tim has other children from previous relationships. His son Alex from his first marriage lived with he and his wife in their three bedroom home. The family did however face many risk factors associated with later difficulty. For example, both parents were unemployed at the time birth and thus household income came from Danni's unemployment and Tim would pick up odd jobs helping friends with construction work. The parents did not have health insurance until public health insurance was provided when they discovered Danni was pregnant. Neither parent had any formal schooling following high school and thus another risk factor, low maternal education. Additionally, Tim had four other children from previous relationships which placed stress on the entire family. Due to these risk factors, they were referred for home services. Harry's development was monitored by trained professionals for one year post-birth. Danni was also given nursing assistance and a mentor mom during this time. When Harry was eight months old, his parents began divorce proceedings and his mother retained custody. She moved back into her childhood home with her mother, brother, and now Harry as well. This has provided a strong

support structure for both Harry and Danni. Despite the risk factors, Harry has been developmentally on track and has shown no delay over the past 20 months.

### **Assessments Administered**

#### **Informal Assessments: Routines Based Interview**

##### **Description**

The Routines Based Interview (RBI) was developed by Robin McWilliams as an assessment technique more than an assessment tool. The general technique for administration is in the form of a conversation between the assessor and the parent or caregiver. It is a very detail oriented process in which the interviewee describes in detail the daily functioning of the child and the family. Prior to beginning the description of daily activities and routines, the administrator gathers basic information on the child and the family, such as who lives with the child and basic biographical information. The administrator then asks the interviewee their main concerns for the child and the family. Daily routines are then described in great length and detail and caregiver concerns are discussed. Each routine is then rated by the informant on a one to five scale on how much they like the routine. Following the interview and description of daily routines, the interviewer asks the informant what they worry most about when they lay awake at night and if they could change one thing about their life what it would be. These questions seek to give priority to goals. Following these general questions they go back though the concerns that were raised throughout the course of the interview. They then decided on the priority of concerns and the outcome or goal they would like to see based on that specific concern. The interviewer then reports back to the team and the information gathered can be used to develop the family's IFSP.

This is a very informative assessment tool because it is very family oriented. It seeks to discover the daily functioning of the family and specifically asks the concerns of the caregivers. It can also be administered in a comfortable environment for both the child and informant and gives a detailed look into the life of the family. The assessor is also likely to see how the child interacts with the informant while being interviewed. The RBI is a very family friendly tool that can be used by most service providers who know the questions to ask if enough detail is not being given. On the actual form, there are prompt questions for the interviewer if they are needed. While this interview is quite informative it can also be very lengthy, approximately two hours, and difficult for the caregiver to keep the child occupied while being interviewed. Some families may also not want to give such detailed information to the assessor upon the initial meetings so it is suggested to become acquainted with the family prior to the meeting which the RBI will be administered. Using this tool enhances the family centered approach as well as informs the team of the daily functioning of the family. However, the greatest strength of this tool is the attention to detail and concerns of the caregiver.

### **Results**

I interviewed Danni regarding the typical routine around the home during the day and wanted to gather information regarding any possible concerns she may have about behavior Harry exhibited. Danni gave me the typical day, from morning to bedtime. Harry has a very typical day when compared with most children his age. He sleeps through the night for approximately 11 hours and takes one two to three hour nap during the afternoon. He awakens without problems and he is then asked to use the potty which he usually is able to urinate when he awakens. He also does so during the night in his diaper. He then is changed into a pull-up as they are trying to potty train. He is doing fairly well and has even asked to go a handful of times

over the past several months. This is the biggest concern for Danni, just because it can be quite difficult to potty train a boy, but she is glad to be starting early and will be thankful when he is able to use the bathroom with greater independence! He then is dressed, Danni does this, and goes to eat breakfast and begin the day. He has no difficulty eating, and has a good appetite. He enjoys a variety of foods and is open to try new foods as well. Danni attributes this to introducing him to a variety of foods since he was able to eat whole foods. He will request more, juice, and certain food items when they are presented to him. He is able to say "please" and "thank you" with prompting ("what do you say"). This is very important to Danni, as she views manners essential for people, as a sign of respect. Following breakfast he helps put his dishes in the dishwasher and will ask to brush his teeth. He and Danni will wash their hands and brush their teeth following breakfast. The rest of the morning is spent either running errands, going to play with a neighbor, or playing at home with his mom and Uncle Josh. They play with a variety of toys, mainly ones that encourage some sort of educational process. They also read a lot of books together. They spend time outside at the local playground and go for walks around the neighborhood. Danni is very pleased with the variety of activities Harry enjoys. Harry does watch a bit of television during the day, which was difficult for Danni to allow, but it is PBS that he watches and is only allowed 30 minutes a day of television. This was an area of concern for Danni as she does not want him to become a child who does nothing but watch television and play video games like so many other children she knows. To circumvent this she limits the amount of time spent watching television and the programming he is allowed to watch. Following these activities it is time for lunch, again, an area in which there are no concerns. Following lunch there is the clean-up routine again and shortly there-after it is time for his afternoon nap. Harry goes down for his nap generally without issue, they had been giving him a

bottle before bedtime and naptime, however, they are now trying to wean him from the bottle and have been giving him sippy cups instead. Danni explained the difficulty with the transition at first but again, she understands that making a transition like this for all children is difficult and he is handling it as expected. Following his nap, he again uses the bathroom and then plays for a bit more. When his mom begins to prepare dinner he enjoys being in the kitchen with her, "helping" to make dinner. He will put things in the dishwasher for her and other small jobs, which Danni is glad he does as it is teaching him some sense of responsibility at a young age. Following the preparation of dinner Danni's mom, Harry's grandmother, arrives home from work and Harry is very glad to see her, they usually spend 30 to 45 minutes playing together before it is time to eat. Again, he eats well including many vegetables and fruits, he even requests these items. Following dinner he helps clean up and then it is off for some more playing with the whole family, Danni, Grandma, and Uncle Josh. They play with his toys, sing songs together (as Uncle Josh is a local musician and plays the guitar which Harry enjoys a great deal!), and he then is able to watch 15 minutes of television an hour before bedtime. When he begins his bedtime routine he first uses the bathroom which he will walk to automatically. He then will brush his teeth, another activity he actually enjoys, and will pick out his pajamas. Harry usually reads a book before bed with his mom in the rocking chair. He has no difficulty going to sleep when there is a white noise machine on in his room. Without it, the house is old and creaky and many small noises can be heard so it is pivotal to use this to aid in his sleep. He is able to sleep through the night and has for some time now. Overall, Danni's concerns are typical of those with typically developing children at this age. He shows no signs of delays or concerns within the daily routine.

**Checklist Adapted from Developmental Tools (See attached)**

**Description**

This checklist was distributed during an Early Intervention training as is a snapshot of developmental milestones for children based on age. It is a very quick overview of the child's progress in the following areas: social relationships, knowledge and skills, and adaptive behavior. The strengths of this instrument include the rapid and unobtrusive nature in which the behaviors can be observed. The behaviors in this checklist can be observed through play and those which are not can be asked of the caregivers. Following the list of behaviors, there are questions the administrator can ask the informant if there are concerns or a lack of detail. The checklist however does not touch on many areas of development such as motor and communication skills specifically. It also lacks detail and is not conversation based and does not aid in fostering a relationship between assessor and informant as the RBI does. Despite the pitfalls, it does give a quick overview of the child and their functioning and using the questions at the bottom of each outcome can aid in bringing more detail to the assessment.

**Outcome 1: Will Have Positive Social Relationships**

Harry demonstrates the ability to complete all of the skills associated with his age group and a handful associated with the next age increment (24 -- 36 months) without difficulty. Harry is a socially outgoing child who enjoys being in the company of people, both adults and children. Greater exposure to children his age, especially in the coming year will greatly enhance his social skills with children his age, as this is pivotal when entering school. One item which struck Danni as interesting was "Needs caregiver to help with conflict resolution: may bite, hit or yell but caregiver can usually calm and redirect." Danni explained that this behavior is quite infrequent, especially for a child who is entering the "terrible two's" and it was explained that this is more common with children who have many playmates their age or siblings. She is

thankful he is a well behaved child but understands as he grows, he may experiment with such behaviors, at which time she will have to teach him appropriate coping mechanisms.

### **Outcome 2:**

#### **Acquires and Uses Knowledge and Skills**

Again, Harry is able to maintain success in all of the areas associated with this outcome. He continues to have scattered skills into the 24 to 36 month range. The only question Danni was unsure of was if he recognizes himself in photos. He does recognize other family members and relatives in photos and can say their names but Danni does not remember Harry looking at photos in which he has been in. He does recognize himself in the mirror. Moreover he does not use crayons and other writing utensils as frequently as he uses other toys; however he is beginning to hold them in a pincer grasp. Danni predicts that as the weather changes, they will be starting more indoor activities and coloring/writing will be part of this repertoire.

### **Outcome 3**

#### **Takes Appropriate Actions to Meet Needs**

This area of development is most closely associated with adaptive behavior. Harry is able to complete all of the tasks associated with this area of functioning. The only task he has had no opportunity to complete is removing his shoes with the laces undone. His shoes are Velcro and he has not had the opportunity to remove shoes with laces. He is able to remove his shoes when the Velcro is loosened. Additionally, Harry is able to wash and dry hands partially with assistance and open most doors in his house with minor assistance from his mom. Some of the handles are especially difficult due to the age of the house, but when he tries to open them he holds the handle with both hands and turns the knob. Harry is developmentally without concern in the aforementioned areas on this developmental checklist.



**Formal Assessments:****Carolina Curriculum for Infants and Toddlers with Special Needs**

The Carolina Curriculum for Infants and Toddlers with Special Needs (Carolina) was developed in 2004 by Nancy M. Johnson-Martin, Susan M. Attermeier, and Bonnie J. Hacker. It is published by the Paul J. Brookes Publishing Company at a cost of \$48.95 which includes the Carolina Curriculum for Infants and Toddlers with Special Needs as well as the administration manual which can be ordered by the general public and is available in both Spanish and English. The Carolina Curriculum is not normed, nor does it have reliability or validity data as it is a criterion referenced assessment. Prior to publication it was field tested at 22 centers in 13 states on 150 students many of whom had physical and sensory impairments. The people who administered the field tests explained the instrument was easy to use as intended and due to the progression of the questions, promoted developmental progress. Test items were originally selected from standardized developmental scales and then were integrated as developers thought appropriate. Further editions have not been field tested as the first, however they have been revised using the feedback from scholars and interventionists who use the Carolina Curriculum as part of their assessment battery.

This assessment is a criterion referenced assessment which examines the main areas of development: communication, social/personal, cognition, and motor skills (both gross and fine motor skills). Items assessed in the social/person section examine adaptive behavior which is one of the largest deficits for students with significant needs. The test administration takes approximately 120 minutes but can be administered in two sessions if needed. The administration can also be completed through play based observation in the child's natural setting allowing for a more accurate portrayal of the child's abilities. Additionally, since items

can be observed through play, cultural bias it kept to a minimum. Administration can be done by anyone who knows the child well including teachers or other therapists working with the child. The language used for the test items is user friendly and there is not a lot of professional jargon to decipher. The purpose of the instrument is to drive curriculum decisions for these children. Data drive curriculum typically leads to better long term outcomes for students with significant needs. It also allows for curriculum to be age appropriate while being adapted to meet the needs of those students with the most significant challenges.

### **Results**

Harry scored very well in all areas measured by the Carolina. He has skills in all areas through 24 months. He also has many scattered skills up through 30 and 36 months. The only area where he only has skills up through 21 to 24 months is in the area of outdoor play. When this was discussed with Danni, she believes this is because he was very young last summer, not giving him much opportunity to explore outdoors and this was his first spring and summer to play outside. It was also discussed that he does not have much contact with peers his age which has been a continuous theme throughout assessment.

### **Wisconsin Behavior Rating Scale**

The Wisconsin Behavior Rating Scale (WBRS) was developed by the Central Wisconsin Center for the Developmentally Disabled, an offshoot of the Department of Health and Social Services. The authors include Song, Agnes; Jones, Stephen; Lippert, Janet; Metzgen, Karin; Miller, Jacqueline; Borreca, Christopher. It measures various areas of development including motor development; gross and fine, social skills, language skills, and adaptive skills including eating, toileting, grooming, dressing, and domestic activity. This instrument is used for children with a developmental age under three years old. It was developed in the 1980's for children with

severe/profound disabilities. Each item on the test is ranked from 0 – 2, zero meaning the child does not perform that item or needs complete assistance, one meaning the child performs the skills less than half of the time or needs some assistance or supervision, and two meaning the child performs the task independently more than half of the time. There is also a “no opportunity” option, meaning the informant has not seen the child perform the skill due to environmental limitations even though the child may be able to do so. The assessment can still be scored with “N.O.” answers. This option is valuable for students who are considered in the severe/profound range of disability. Additionally, there is a separate section in each testing area for students who are blind or visually impaired. Scores on test items produce percentile ranks as well as developmental ages for each sub-category measured. At the end of the test items, a graphical representation is produced, showing the percentile ranks. The WBRIS can be administered by any professional who knows the child or can be administered by a professional in an interview format, asking the primary caregivers to rate each item. A variety of toys the child uses on a daily basis can be used for assessment which helps the child feel more relaxed and is familiar with the items. This instrument assess major areas of development, however due to the age of the assessment, the language used is out of date.

## **Results**

Harry scored very well in all areas of development (see attached assessment). His highest areas are expressive language, receptive language, and play skills. From observation and stories from mom, this assessment is accurate. Areas he scored lower in were eating, toileting, and dressing. However, he is still in the seventieth percentile in all of these areas, putting him well on track and above average for a 20 month old. This score is likely because some of the

skills assessed were closer to the age three range of skills. I was unable to locate information on the exact psychometric properties of the instrument.

### Conclusions

Harry is an outgoing child with a breadth of skills in all areas of development. Despite not being enrolled in a preschool program, Harry has a variety of social skills and seeks out social interactions with people in his surroundings. He shows no signs of attachment difficulty and is comforted by his mother upon her return. Another strength is his language ability. Harry names all familiar things in this environment and is inquisitive as to new objects and people in his environment. From the language sample, he has approximately 150 words in his vocabulary including names of people, places, objects, and routines in his daily life. He shows no delays in any areas of development and thus would not be a candidate for referral. However, Harry may benefit from joining a preschool group within the next year to build greater social connections with children his age. Danni would also be able to meet other mothers and build a greater friendship and support network outside of her family. Everyone involved with this wonderful boy is very thankful for his progress and looks forward to continued growth and success.

### Assessment Project

Jessica Null  
SPED 515

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### Meet the Man!



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### Family History/Case Study

- Only child
- Carried to term
- Lived with both parents but soon separated
- One brother that he has contact with
- Family consisted of a variety of risk factors including: low income due to unemployment, low maternal education, lack of health insurance

now lives w/  
mom, uncle, &  
grandmother  
- little to no  
contact w/dad -

**Informal Assessments  
Routines Based Interview (RBI)**

- Robin A. McWilliams
- Developed in 2004
- Interview Based Assessment with primary caregiver



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**Informal Assessments**

**Routines Based Interview  
Behavior Checklist**

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**Informal Assessment  
RBI**

**Strengths**

- Family is pivotal informant
- Gives insight to the family functioning and daily home environment
- Family concerns are seen as primary
- Helps develop goals for IFSP based on family priorities

**Weaknesses**

- Can be very lengthy
- Some may see as intrusive

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### Results

- Daily Routine is fairly typical for a stay at home mother and her son
- Mom's concerns include: toilet training, transitioning from bottle to a cup, and light sleeping
- These concerns are fairly typical for a 20-month old boy

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### Informal Assessment Checklist Adapted from Developmental Tools

- Three Outcome Areas:
  - Positive Social Relationships
  - Acquires Knowledge and Uses Skills
  - Takes Appropriate Actions to meet Needs
- Received at an Early Intervention Training
- Lists behaviors based on age group

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### Informal Assessment Checklist

#### Strengths

- Very quick
- Unobtrusive
- Can be quickly observed through play or asked of the caregiver
- Very Informal
- Gives a quick overview of the child
- Developed from a variety of Developmental Tools

#### Weaknesses

- Only covers a small range of behaviors
- Lacks detail
- Very informal
- Does not aide in fostering a relationship with the caregiver

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### Results

- Assessed using the checklist for 18 to 24 month olds
- Outcome 1: Positive Social Relationships achieved all behavioral descriptors ranging from showing affection to caregivers to initiating interaction with others, especially familiar people
- Prompt questions at the end of each outcome to gather further information if necessary

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### Checklist Results Cont'd.

- Outcome 2: Acquires and Uses Knowledge and Skills.
- Achieved all behavioral descriptors ranging from activating mechanical toys to using single words
- He uses many words and at times two word combinations "go now"
- Item referring to parallel play, has had limited opportunity with peers his own age

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### Checklist Results Cont'd.

- Outcome 3: Takes Appropriate Actions to Meet Needs (most closely measures adaptive behavior)
- Harry is able to complete most of the behavioral indicators for this area ranging from remembering where objects belong to using utensils for part of his meal (uses for most of his meal)
- Unable to open doors using the knobs but could be because of the doors/knobs and not a lack of ability

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### Formal Assessments

Carolina Curriculum and Infants and  
Toddlers  
Wisconsin Behavior Rating Scale

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### Carolina Curriculum for Infants and Toddlers

- Assess main developmental areas including communication, motor (gross and fine) cognition, and social/personal development
- Used for curriculum development
- Once developmental progress chart is completed it gives a pictorial view of skills

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### Carolina

#### Strengths

- Used to drive curriculum
- Can be administered by anyone who knows child
- Can be administered in two sessions
- Leaves room to monitor progress over time
- Unobtrusive play based observation

#### Weaknesses

- Lengthy
- Must be informed on how to administer the assessment



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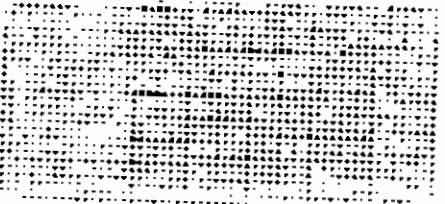
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**Harry's Results**



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**Carolina Results Cont'd.**

- Solid skills up through 21-24 months in all developmental areas
- Some skills assessed were similar to behavioral checklist and had same results (YAY!)
- Very strong communication and fine motor skills

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**Wisconsin Behavior Rating Scale (WBRS)**

- Published by the Central Wisconsin Center for the Developmentally Disabled
- Authors: Song, Agnes; Jones, Stephen; Lippert, Janet; Metzgen, Karin; Miller, Jacqueline; Borreca, Christopher
- Cost: Unknown
- Publication Year: 1984
- Measures communication, gross and fine motor, adaptive behavior, and social skills

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### WBRS

**Strengths**

- Very simple administration and scoring!!!!
- Measures adaptive skills including toileting, domestic routines, grooming, and eating
- Adaptive (life) skills are very important in severe disabilities
- Gives pictorial representation of results
- No Opportunity option
- Scales for children with vision impairments

**Weaknesses**

- Published 25+ years ago and language is out of date
- Little information can be found about it due to its age

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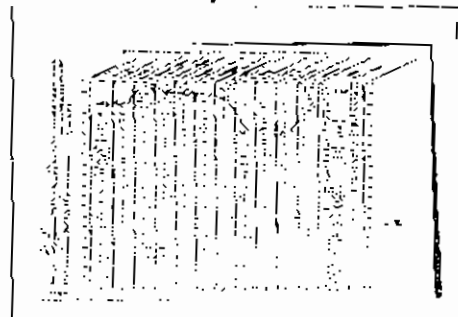
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### Harry's Results




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### WBRS Results Cont'd.

**Area Assessed**

- Gross Motor
- Fine Motor
- Expressive Language
- Receptive Language
- Play Skills
- Socialization
- Domestic Activity
- Eating
- Toileting
- Dressing
- Grooming
- Total Scale

**Percentile Rank**

- 50
- 90
- 97
- 85
- 95
- 94
- 93
- 77
- 75
- 76
- 90
- 96

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### Conclusions

- Harry is an outgoing 20 month old with a very supportive family
- Mom's concerns are typical of a parent who has a 20 month old
- In the next year Harry would benefit from greater peer interaction as well as some form of formal schooling to further enhance current skills

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# DEVELOPMENTAL PROGRESS CHART

Date: 11.1.10 Child: Harley  
 Interventionist: Jessie Hill

Curriculum Sequence	0-3 Months					3-6 Months					6-9 Months					9-12 Months					12-15 Months							
	a	b	c	d	e	f	g	h	i	j	k	l	m	n	o	p	q	r	s	t	u	v	w	x	y	z		
1. Self-Regulation & Responsibility																												
2. Interpersonal Skills																												
3. Self-Concepts																												
4-I. Self-Help: Eating																												
4-II. Self-Help: Dressing																												
4-III. Self-Help: Grooming																												
4-IV. Self-Help: Tolerating																												
5. Attention & Memory: Visual/Spatial																												
6-I. Visual Perception: Matching & Sorting																												
6-II. Visual Perception: Blocks & Puzzles																												
7. Functional Use of Objects & Symbolic Play																												
8. Problem Solving/Reasoning																												
9. Number Concepts																												
10. Concepts/Vocabulary: Receptive																												
11. Concepts/Vocabulary: Expressive																												
12. Attention & Memory: Auditory																												
13. Verbal Comprehension																												
14. Conversation Skills																												
15. Grammatical Structure																												
16. Imitation: Vocal																												
17. Imitation: Motor																												
18. Grasp & Manipulation																												
19. Bilateral Skills																												
20. Tool Use																												
21. Visual/Motor Skills																												
22-I. Upright: Posture & Locomotion																												
22-II. Upright: Balance																												
22-III. Upright: Ball Play																												
22-IV. Upright: Outdoor Play																												
23. Prone (on Stomach)																												
24. Supine (on Back)																												

Curriculum Sequence	15-18 Months					18-21 Months					21-24 Months					24-30 Months					30-36 Months									
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
PERSONAL-SOCIAL	1. Self-Regulation & Responsibility																													
	2. Interpersonal Skills	n	o	p		q	r	s	t		u	v	w	x		y	z													
	3. Self-Concept	d	e	f		g	h	i	j		k	l	m	n		o	p	q	r	s	t	u	v	w	x	y	z	aa	bb	
	4-I Self-Help: Feeding	p	q	r		s	t	u	v		w	x	y	z																
	4-II Self-Help: Dressing	d	e	f		g	h	i	j		k	l	m	n		o	p	q	r	s	t	u	v	w	x	y	z	aa	bb	
	4-III Self-Help: Grooming																													
	4-IV Self-Help: Toileting																													
	5. Attention & Memory: Visual/Spatial	t	u	v		w	x	y	z																					
	6-I Visual Perception: Blocks & Puzzles	b	c	d		e	f	g	h		i	j	k	l		m	n	o	p	q	r	s	t	u	v	w	x	y	z	aa
	6-II Visual Perception: Matching & Sorting																													
	7. Functional Use of Objects & Symbolic Play																													
	8. Problem Solving/Reasoning	q	r	s		t	u	v	w		x	y	z																	
	9. Number Concepts																													
	10. Concepts/Vocabulary: Receptive	d	e	f		g	h	i	j		k	l	m	n		o	p	q	r	s	t	u	v	w	x	y	z	aa	bb	
	11. Concepts/Vocabulary: Expressive																													
	12. Attention & Memory: Auditory	i	j	k		l	m	n	o		p	q	r	s		t	u	v	w	x	y	z	aa	bb		cc	dd	ee	ff	
	13. Verbal Comprehension																													
	14. Conversation Skills	u	v	w		x	y	z			aa	bb	cc	dd		ee	ff	gg	hh	ii	jj	kk	ll	mm	nn	oo	pp	qq	rr	ss
	15. Grammatical: Structure																													
	16. Imitation: Vocal																													
	17. Imitation: Motor																													
	18. Grasp & Manipulation	u	v	w		x	y	z			aa	bb	cc	dd		ee	ff	gg	hh	ii	jj	kk	ll	mm	nn	oo	pp	qq	rr	ss
	19. Bilateral Skills	m	n	o		p	q	r	s		t	u	v	w		x	y	z	aa	bb	cc	dd	ee	ff	gg	hh	ii	jj	kk	ll
	20. Tool Use																													
	21. Visual/Motor Skills																													
	22-I Upright: Posture & Locomotion	i	j	k		l	m	n	o		p	q	r	s		t	u	v	w	x	y	z	aa	bb		cc	dd	ee	ff	gg
	22-II Upright: Balance	a	b	c		d	e	f	g		h	i	j	k		l	m	n	o	p	q	r	s	t	u	v	w	x	y	z
	22-III Upright: Ball Play	a	b	c		d	e	f	g		h	i	j	k		l	m	n	o	p	q	r	s	t	u	v	w	x	y	z
	22-IV Upright: Outdoor Play	a	b	c		d	e	f	g		h	i	j	k		l	m	n	o	p	q	r	s	t	u	v	w	x	y	z
	23. Prone (on Stomach)																													
	24. Supine (on Back)																													

# 18 to 24 MONTHS

## Outcome 1: Will Have Positive Social Relationships

### Behavioral Descriptors

- ✓ Shows affection to caregivers and close family members/friends with enthusiasm: running towards, hugging, etc.
- ✓ Enjoys the company of other children: (play group, family parties, playground) by watching them and/or playing near them
- ✓ Asserts more independence by refusing to hold caregiver's hand, saying "no", tantrums when told "no" or in attempt to get own way
- ✓ Full of energy/curiosity and relies on caregiver to provide safety limits
- ✓ Begins to try to be helpful: assist with clean up, follows simple directions
- ✓ Needs caregiver to help with conflict resolution: may bite, hit, or yell, but caregiver can usually calm and redirect.
- ✓ Begins to initiate interactions with others especially when in a familiar setting (playing alongside, handing something to another, touching, saying "hi")

### Questions

- Can you tell me about a time when your child felt proud?
- Does your child ever seek out help from an adult? How?
- Who does your child play with? What does that look like?

## Outcome 2: Acquires and Uses Knowledge and Skills

### Behavioral Descriptors

- ✓ Activates mechanical toy
- ✓ Matches animal sounds ("moo") to pictures of animals (cow)
- ✓ Enjoys manual play activities
- ✓ Points to several clothing items, body parts, familiar objects, people on request
- ✓ Sorts objects by shape, color, or size
- ✓ Fits things together (puzzles, pegboards, etc.)
- ✓ Begins to hold crayon with thumb and fingers
- ✓ Recognizes self in photographs
- ✓ Remembers where objects belong
- ✓ Begins to point to pictures of familiar objects and people
- ✓ Attempts to sing songs with words
- ✓ Imitates vertical stroke and circular scribbles; builds tower of six cubes; strings beads; begins to hold crayon with thumb and fingers
- ✓ Engages in parallel play (plays near another child, each doing different things)
- ✓ Enjoys solitary play for a few minutes
- ✓ Uses single words to communicate and label objects, such as toys, people, or even actions (washing, eating)

### Questions

- What are some of the ways your child plays? What are his/her favorite toys and activities?
- What do you enjoy most/least about playing with your toddler?
- What can your child do independently without your help?
- What do you think your child is learning now?

## 18 to 24 MONTHS (Continued)

### Outcome 3: Takes Appropriate Action to Meet Needs Behavioral Descriptors

- ✓ Remembers where objects belong
- ✓ Using more words and short phrases, jabbars, and repeats in order to get needs met
- ✓ Is understandable to people other than family members most of the time
- ✓ Uses words effectively to communicate needs/wants/interests; may combine words (more juice, no more)
- ✓ Walks and begins to run independently in different environments
- ✓ Walks down stairs with hand held
- ✓ Defends possessions by using "mine" or pulling item toward self
- Removes own shoes with laces undone *N/A*
- ✓ Washes and dries hands partially
- ✓ Opens doors by turning knob
- ✓ Uses utensils for part of a meal

### Questions:

- How does your child let others know what he/she wants or needs?
- How does your child explore the environment?
- Does your child ever try to do things for her/himself? What are some things that your child is able to do independently?





# **PROTOCOL FOR THE ROUTINES-BASED INTERVIEW™**

**R. A. McWilliam**

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## The Day

### *Getting Into the Routines*

- 4) ***"How does your day begin?"***
  - a) [Make sure the discussion is about how the parent's day begins, not the child's]
  - b) **START TAKING NOTES ON ROUTINES PAGES.**
- 5) ***"What's everyone else doing?"***
  - a) [If the child is awake, get a description of what the child is doing?]
  - b) [Regardless of whether the child is awake,] ***"On a scale of 1 to 5, how much do you like this beginning of your day?"***
- 6) ***"What happens next?"***
  - a) [This is the transition question throughout the interview. It allows the parent to describe their day, rather than having the interviewer assume what the family does, including the order in which they do it.]
- 7) ***"Let's back up and deal just with your child's getting up."***
  - a) [Commonly, parents have to be slowed down, because they don't yet know the level of detail desired. These early-morning routines are the time to show the parent how much information to give in each routine.]
- 8) [Assuming this is the first routine involving the child,] ***"What is everyone else doing?"***  
[Trying to determine normative conditions for this routine and what the family has to contend with.]
- 9) ***"What is your child doing?"***
  - a) [Allow a response to the open-ended question and then, if necessary, follow up with these next questions.]
  - b) ***"How is your child participating in this activity?"***
    - i) [Try to find out whether the child is highly engaged, just following the routine, or not participating.]
  - c) ***"How much does your child do for him- or herself?"***
    - i) [Ask developmentally appropriate questions about the child's independence. You have to know your child development!]
  - d) ***"How is your child interacting (use simpler terms if necessary) with others at this time?"*** [Ask developmentally appropriate follow-up questions about communication, self-regulation, cooperation, and social skills. Generally, getting along with others during the routine.]
- 10) ***"On a scale of 1-5, how well do you feel this time of day goes for you?"*** [This is a variation on the satisfaction question.]
- 11) [Repeat Questions 5)-10) for each routine.]
- 12) [If necessary,] ***"Let's skip to dinner preparation time"*** (or another possible later routine. With some interviews, it is necessary to move the conversation along).

Concern		Routine Rating
★		

- What does this look like? Where is everyone?
- How does the child participate?
- How independent is the child?
- What's the child's communication like?
- How does the child get along with others?
- Anything else?
- Optional: What else could the child be doing?
- 1-5 (terrible-fantastic) scale

Concern		Routine Rating
★		

- What does this look like? Where is everyone?
- How does the child participate?
- How independent is the child?
- What's the child's communication like?
- How does the child get along with others?
- Anything else?
- Optional: What else could the child be doing?
- 1-5 (terrible-fantastic) scale

Concern		Routine Rating
★		

- What does this look like? Where is everyone?
- How does the child participate?
- How independent is the child?
- What's the child's communication like?
- How does the child get along with others?
- Anything else?
- Optional: What else could the child be doing?
- 1-5 (terrible-fantastic) scale

## **Things to Change—to Work On (Outcomes/Goals)**

Priority Order	Outcome/Goal

19) *"This is a great list of things to work on. I'll consult with other team members and the next time we meet we'll write down their ideas and your ideas for the strategies to begin addressing these. At that time, we'll decide what services are needed to get these priorities or "outcomes" addressed."*

**WISCONSIN BEHAVIOR RATING SCALE (WBRS)**  
 For individuals functioning below the developmental level of three years  
 Individual Record

Name - Resident <i>Harry</i>	ID Number —	Date - Evaluation <i>11-20-00</i>
Name - Informant(s) <i>Danni</i>	Sex <input checked="" type="radio"/> M <input type="radio"/> F	Birthdate <i>2-15-01</i>
Name - Father <i>Jerry</i>	Profession - Father <i>NA</i>	Age - Yrs, Mos.
Orthotic Devices - e.g. Braces, Splints <i>NA</i>	Mobility Equipment/Assistive Devices - e.g. Wheelchair, Walker, Cane <i>NA</i>	
Other Handicaps:	Severe Behavioral Problem, if any:	<input type="checkbox"/> Deaf <input type="checkbox"/> Blind <input type="checkbox"/> Non-Ambulatory <input type="checkbox"/> Nonverbal <input type="checkbox"/> Cerebral Palsy

**SUMMARY SCORES ON WBRS**

	I. Gross Motor	II. Fine Motor	III. Expressive Language	IV. Receptive Language	V. Play Skills	VI. Socialization	VII. Domestic Activity	VIII. Eating	IX. Toileting	X. Dressing	XI. Grooming	TOTAL SCALE
Maximum Raw Score	55	28	54	40	36	24	18	30	20	12	34	352
Raw Score	<i>54</i>	<i>27</i>	<i>45</i>	<i>31</i>	<i>27</i>	<i>23</i>	<i>9</i>	<i>27</i>	<i>13</i>	<i>7</i>	<i>17</i>	<i>278</i>
Percentile Rank *	<i>89</i>	<i>90</i>	<i>75</i>	<i>65</i>	<i>94</i>	<i>93</i>	<i>77</i>	<i>78</i>	<i>40</i>	<i>90</i>	<i>90</i>	<i>90</i>
Age Equivalent in Months												Behavioral Age

\* Percentile rank applies only to institutionalized individuals who function below the developmental level of three years.

**COMMENTS:**

**SCORING CRITERIA**

- 0 ..... The individual does not perform or respond; requires complete assistance.
- 1 ..... The behavior is emergent; individual performs independently LESS than 50 percent of the time or requires assistance/supervision.
- 2 ..... The individual performs skilfully or performs independently MORE than 50 percent of the time.
- N.O. .... (No opportunity) The individual might be able to perform the task but has not performed it due to environmental limitations. N.O.'s are not credited in scoring.



## I. GROSS MOTOR

- 2 1. Moves arms and legs randomly when lying on back.
- 2 2. Turns head from side to side when lying on abdomen.
- 2 3. Raises and holds head up in midline when lying on abdomen.
- 2 4. Bears weight on elbows, forearms and/or hands when lying on abdomen.
- 2 5. Rolls back to side and abdomen to side.
- 2 6. Rolls over abdomen to back.
- 2 7. When bearing weight on elbows, forearm and/or hands, moves around in space.
- 2 8. Rolls over back to abdomen.
- 2 9. Moves forward on abdomen using arms and legs-crawls or moves around on scooter board lying on abdomen.
- 2 10. Rocks when on hands and knees.
- 2 11. Bears weight simultaneously on hands and knees - 4 point position.
- 2 12. Sits leaning on one arm.
- 2 13. Sits without leaning on anything.
- 2 14. Moves forward on all fours - abdomen off ground, creeps or manipulates wheelchair as means of locomotion.
- 2 15. Kneels with both knees.
- 2 16. Lowers body from standing while holding onto an object or person. Various types of braces can be worn.
- 2 17. Pushes or pulls from various positions to standing. Various types of braces can be worn.
- 2 18. Walks with assistance of a person, an object or tactile cues. Various types of braces can be worn.
- 2 19. Walks (cruises) around objects using them for support. Various types of braces can be worn.
- 2 20. Stands without assistance. Various types of braces can be worn.
- 2 21. Climbs on objects using legs; e.g., chair bed. Various types of braces can be worn.

- 2 22. Stands up and lowers body without the help of an object or person. Various types of braces can be worn.

- 2 23. Squats without help of an object or person. Various types of braces can be worn.

- 2 24. Walks independently. Various types of braces can be worn.

- 1 25. Runs. Various types of braces can be worn.

Alternative Item for the Blind

- 2 25. Runs holding another person's hand or an object (for safety reasons).

- 2 26. Walks up and down stairs, both feet to each step. Holding onto a person's hand, rail or blind cane is allowed. Various types of braces can be worn.

- 1 27. Jumps. Various types of braces can be worn.

- 2 28. Walks up and down stairs, one foot to each step. Holding onto a person's hand, rail or blind cane is allowed; various types of braces can be worn.

54 TOTAL - SCALE I  
TOTAL - N.O.

## II. FINE MOTOR

- 2 1. Brings hands together in midline.
- 2 2. Reaches for people or objects.
- 2 3. Closes whole hand around objects when objects are suspended in the air.
- 2 4. Closes whole hand around objects when objects are placed on table or floor surface.
- 2 5. Manipulates objects with hands.
- 2 6. Grasps object using parts of hand such as fingers against palm when objects are placed on table, floor, crib or when objects are suspended in the air.
- 2 7. Releases objects voluntarily.
- 2 8. Transfers objects from hand to hand.
- 2 9. Picks up small objects (raisins, cereal, blocks, toast sticks, crayons) between the pad of the fingers.

27  
5/2  
5

- 2 10. Pushes buttons such as on a Busy Box or elevator.
- 2 11. Turns pages of a book made of thick material such as cardboard.
- 2 12. Scribbles with pencil or crayon.
- 2 13. Unwraps objects of various sizes, turns door knobs, or turns water faucet.
- 1 14. Turns pages of book made of regular paper.

27 TOTAL - SCALE II.  
 TOTAL - N.O.

III. EXPRESSIVE LANGUAGE  
 If the individual is deaf/blind, use the next scale.

- 2 1. Undifferentiated cry with total body response within physical limitations.
- 2 2. Differentiated cry to express discomfort, e.g., wetness, hunger, etc. within physical limitations.
- 2 3. Spontaneous social smile within physical limitations.
- 2 4. Produces throaty vowel-like sounds within physical limitations.
- 2 5. Babbles or squeals to express pleasure and/or eagerness within physical limitations.
- 2 6. Plays speech gesture games like "peek-a-boo" or "pat-a-cake" within physical limitations when initiated by adult.
- 2 7. Vocalizes or imitates sounds that adults make, e.g., ba ba, da da.
- 2 8. Attempts to obtain desired objects by vocalizing, pointing, gesturing and/or visually localizing.
- 2 9. Imitates waving "bye-bye" on request.
- 2 10. Uses one or two words of meaningful and appropriate vocabulary, such as "mama", "da da", "bye-bye", "more", "oh-oh", or "no" via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.
- 2 11. Uses some gestural language within physical limitations; such as shaking head for "no".
- 2 12. Uses two or more words meaningfully besides "ma ma" and "da da" via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.

- 2 13. Names or identifies two or more common objects when asked, "What is this?" via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.
- 2 14. Names or identifies one picture of a common object correctly when asked, "What is this?" Can substitute yes/no response when asked, "Is this a \_\_\_?" via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.
- 2 15. Uses five or more words meaningfully and with consistency via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.
- 2 16. Names or identifies two or more pictures via any form of communication; e.g., speech, gestures pointing to or looking at Blissymbols, pictures.
- 1 17. Imitates two or three word sentences e.g., "Go outside", "I want drink", via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.
- 1 18. Names or identifies four common pictures correctly when asked, "What is this?" via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.
- 2 19. Uses "yes" or "no" correctly within physical limitations via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.
- 1 20. Spontaneously combines words into phrases, e.g., "more milk", "go bye-bye" via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.
- 2 21. Uses 50-100 words meaningfully and appropriately via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.
- 1 22. Names and identifies four familiar objects and identifies at least one of them by use when asked, "Which one is used for \_\_\_?" via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.
- 1 23. Says or indicates how four simple objects are used e.g., "comb hair" for a comb, "wash face" for a washcloth via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.
- 2 24. Express specific needs, desires and problems via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.

25. An average sentence length is three to four words via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.
26. Correctly uses two or more pronouns e.g., I, me, you, he, it, etc. via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.
27. An average sentence length is four to five words via any form of communication; e.g., speech, gestures, pointing to or looking at Blissymbols, pictures.

TOTAL - SCALE III  
 TOTAL - N.O.

### III. EXPRESSIVE LANGUAGE FOR DEAF/BLIND

1. Makes undifferentiated cry with total body response.
  2. Makes differentiated cry with total body response.
  3. Makes spontaneous social smile.
  4. Produces throaty noises, vowel-like sounds.
  5. Performs simple position and gross body movement concurrently with the trainer (co-active movement).
  6. Performs fine body movement concurrently with trainer.
  7. Identifies body parts; e.g., places hand on corresponding body part after touching trainer's body part.
  8. Imitates gross body positions; e.g., arms out, both hands on head.
  9. Imitates gross hand and finger positions, e.g., fingers open and closed.
  10. Imitates manual sign prompted by use of visual verbal and/or tactile cues.
  11. Uses some gestural language within physical limitations; such as shaking head for "no".
- Alternative Item for the Blind
11. Imitates fine motor pattern in preparation for using signs.
  12. Spontaneously produces a meaningful word or manual sign.

13. Uses two or more words, gestures, sign languages, Blissymbols or vocalizations which consistently mean a specific concept.
14. Uses 10 - 20 words, any form of communication; signs, Blissymbols, etc.
15. Uses words, signs or gestures indicating functions of two or more objects.
16. Uses 50 - 100 words, any form of communication; signs, Blissymbols, etc.
17. Combines words; e.g., "more milk", "go bye-bye", using any form of communication.
18. Names four objects correctly when asked, "What is this?", via any form of communication.
19. Uses pronouns; e.g., I, me and mine via any form of communication.

TOTAL X 1.42 =  PRORATED TOTAL Scale III  
 Round the decimals to the nearest whole number.  
 TOTAL - N.O.

### IV. RECEPTIVE LANGUAGE

If the individual is deaf/blind, use the next scale.

1. When talked to, looks toward the speaker.
2. Readily attends to speaking voice by stopping movement.
3. Responds to speech by watching the face of the speaker.
4. Responds appropriately to different tones of voice; e.g., warning or soothing tones.
5. Looks for or searches after object immediately after being hidden or dropped.
6. Responds to own name when back is turned.
7. Stops or hesitates from activity when told "no", or "stop that".
8. Responds with appropriate gestures or actions to word(s) such as "eat", "up", "bye-bye".
9. Follows simple instruction(s); e.g., "come here", "look at me", and/or "sit down", when given with gestures, within physical limitations.
10. Looks or points to most common objects (table, ball, shoe, spoon, cup) when asked, "Where is \_\_\_\_\_?", "Give me \_\_\_\_\_", within physical limitations.

2 11. Identifies three common objects by use; e.g., knows what to do when handed a comb, attempts to comb hair (brush, cup, spoon etc.) within physical limitations.

2 12. Identifies two or more major body parts as hair, ear, nose and eye when they are named; e.g., "Show me your \_\_\_\_\_", "Touch your \_\_\_\_\_", "Where is your \_\_\_\_\_?", within physical limitations.

2 13. Responds to simple verbal directions without use of cues/gestures/facial expressions; e.g., "Sit down", "Come here", "Wipe your mouth".

1 14. Responds appropriately to commands involving "on" or "in"; e.g., "Put the spoon on the plate", "Is the spoon in the plate?", "Put the blocks in the box", or "Is the block in the box?"

2 15. Responds with yes/no, or points to any three to five parts of a doll; e.g., "Is this her nose?", or "Where is her nose?"

1 16. Identifies pictures of common objects by pointing, looking at, or by giving yes/no response; e.g., "Show me (give me) \_\_\_\_\_", "Is this a \_\_\_\_\_?"

1 17. Follows a series of two or three related simple verbal commands given without gestures; e.g., "Come here and give me the ball", or "Turn on the lights and close the door".

0 18. Responds to the question of who and what with any form of communication; e.g., "Who is in the chair?", "What do you eat with?"

0 19. Identifies two or more pictures of actions (verbs); e.g., "Show me eating", "Show me running", via any form of communication.

0 20. Gives appropriate answer when asked with sentences containing tall/short via any form of communication; e.g., pointing or nodding yes/no.

2 TOTAL - SCALE IV  
TOTAL - N.O.

#### IV. RECEPTIVE LANGUAGE FOR DEAF/BLIND

1 1. Looks for or searches after objects immediately after being hidden or dropped.

1 2. Responds appropriately to such words, gestures/signs as "Come", "Up" or "Bye-bye".

1 3. Distinguishes own name from others.

1 4. Stops or withdraws from an activity when told, in any form of communication, "No" or "Stop that".

1 5. Follows simple verbal, gestural sign or tactile instructions; e.g., "Sit down" or "Stand up".

1 6. Recognizes names of common objects; e.g., table, ball, shoe, spoon, when requested using any form of communication, "Show me \_\_\_\_\_" or "Give me \_\_\_\_\_", etc.

1 7. Appropriately uses three common objects; e.g., when handed a comb, attempts to comb hair (brush, cup spoon, etc.)

1 8. Responds to commands given using any form of communication involving "on" or "in"; e.g., "Put spoon on the plate".

1 9. Identifies pictures of common objects when appropriate gestures or sign are used.

#### Alternative Item For the Blind

1 9. Identifies common objects

1 10. Points out any (3-5) body parts on a doll when asked via any sensory modality.

1 11. Follows a series of two or three related simple commands; e.g., "Turn on the lights and close the door", via any form of communication.

1 12. Understands who/what in any form of communication; e.g., "Who is in the chair?", "What do you eat with?"

1 13. Identifies two or more verb (action words in pictures) using any form of communication; e.g., "Show me eating", "Show me running".

#### Alternative Item for the Blind

1 13. Demonstrates simple action words such as "eat", "clap hands" in any form of communication.

1 14. Understands concept, tall/short.

TOTAL X 1.42 =  PROPORTED TOTAL SCALE IV  
Round the decimals to the nearest whole number.  
TOTAL N.O.

#### V. PLAY SKILLS

2 1. Plays with hands; e.g., looking at them and/or bringing them to mouth.

2 2. Shows interest in toys by moving forward, looking at or reaching for them.

- 2 3. Grasps and manipulates toys/objects.
- 2 4. Examines or handles various objects/toys alone for 10 seconds or more.
- 2 5. Plays with familiar toys/objects appropriately.
- 2 6. Shows preference for toys; e.g., hugs or carries dolls or preferred objects.
- 2 7. Plays with unfamiliar toys/objects appropriately.
- 2 8. Explores drawers, cabinets and/or details of toys/objects.
- 2 9. Parallel plays - person plays near another person, is aware of other's presence but does not play with another person.
- 2 10. Entertains self looking at picture books, TV., listening to phonograph and/or with other play items when made available.
- 2 11. Combines two or more toys/objects; e.g., puts two blocks together.
- 2 12. Initiates or asks adult to play with favorite toys, balls, or cards.
- 2 13. Plays with hobby horse and other rocking toys.
- 2 14. Plays by manipulating swing or wagon.
- 1 15. Plays with one person with some interaction.
- 1 16. Plays with two or more persons with some interaction.
- 0 17. Engages in fantasy play; e.g., takes care of doll, be a doctor or a housekeeper.
- 1 18. Initiates own leisure time activities at a simple level; e.g., asks for records, cards, TV.

23 TOTAL - SCALE V.  
 \_\_\_\_\_ TOTAL - N.O.

**VI. SOCIALIZATION**

If the individual is deaf/blind, use the next scale.

- 2 1. Stops crying when picked up or talked to.
- 2 2. Follows moving person with eyes within three to five feet.
- 2 3. Enjoys having people around; e.g., gurgles and laughs in response to people, cries when they leave.
- 2 4. Responds positively to physical interaction; e.g., touching and rough-housing.

- 2 5. Smiles and/or vocalizes at mirror image.
- 2 6. Distinguishes familiar people and/or withdraws from strangers.
- 2 7. Reaches for and pats mirror image.
- 2 8. Engages in social interaction such as playing pat-a-cake or waving bye-bye.
- 2 9. Seeks affection by hugging, smiling, laughing or throwing kisses.
- 2 10. Gets attention by verbalizing, touching others or gesturing.
- 2 11. Repeats performances rewarded by an adult.
- 1 12. Cooperates with others; e.g., takes turns or shares things.

23 TOTAL - SCALE VI.  
 \_\_\_\_\_ TOTAL - N.O.

**VI. SOCIALIZATION FOR DEAF/BLIND**

- 1 1. Stops crying when picked up or talked to.
- 1 2. Enjoys having people around; e.g., gurgles and laughs in response to people.
- 1 3. Responds positively to physical interaction; e.g., touching and rough-housing.
- 1 4. Distinguishes familiar people and/or withdraws from strangers.
- 1 5. Engages in social interaction such as playing pat-a-cake or waving bye-bye.
- 1 6. Seeks affection by hugging, smiling, laughing or throwing kisses.
- 1 7. Gets attention by verbalizing, touching others or gesturing.
- 1 8. Repeats performances rewarded by an adult.
- 1 9. Cooperates with others; e.g., takes turns or shares things.

TOTAL X 1.33 =  PRORATED TOTAL SCALE VI.  
 Round the decimals to the nearest whole number.  
 \_\_\_\_\_ TOTAL - N.O.

**VII. DOMESTIC ACTIVITIES**

- 2 1. Shows an interest in adult performing domestic activities, such as cleaning and cooking, by following adult or turning head toward adult.

2 2. Assists adult with sweeping, mopping, dusting or throwing clothes into hamper by holding onto the same object as adult.

2 3. Manipulates tools such as mop, rag and broom in an appropriate manner on own or upon request.

1 4. Puts away objects such as personal items, dirty clothes, dried dishes or trash in the proper place on own or upon request.

2 5. Carries dinner tray or plate.

1 6. Performs bed making, dish drying and/or table setting on own or upon request.

2 7. Folds clothes with assistance.

2 8. Empties wastepaper basket and/or garbage cans into proper places on own or upon request.

2 9. Puts clothes in the washer and dryer and starts the machine with assistance.

9 TOTAL - SCALE VII.  
TOTAL - N.O.

#### VIII. EATING

2 1. Suckles on a nipple and swallows.

2 2. Sucks food (e.g., pureed food) from a spoon.

2 3. Opens mouth at the sight or smell of food.

2 4. Closes lips with food in mouth.

2 5. Swallows semi-solid food e.g., blended diet.

2 6. Removes food from spoon with lips.

2 7. Bites.

2 8. Chews and swallows.

2 9. Finger feeds Cheetos, bread sticks, oyster crackers and similar sized solid foods.

2 10. Drinks from cup when cup is held. Adapted devices such as spout cup can be used.

2 11. Drinks from cup by holding with both hands. Adaptive devices such as cups with handles or with weighted bottoms can be used.

2 12. Feeds self with spoon. Adaptive spoon, such as built-up handled spoon or swivel spoon with or without special plate can be used.

2 13. Uses fork with or without adaptive devices when food is cut.

2 14. Drinks from glass/cup with one hand. Cup with handles or with weighted bottom can be used.

1 15. Feeds self with appropriate utensils, spoon and/or fork. Adaptive devices can be used.

27 TOTAL - SCALE VIII.  
TOTAL - N.O.

#### IX. TOILETING

2 1. Stays dry for two hours.

2 2. Has bowel movement at predictable intervals.

2 3. Has a pattern of voiding at predictable intervals.

2 4. Indicates by gesture, action, vocalization when wet and/or soiled.

2 5. Eliminates in toilet, bedpan, urinal within 15 minutes when placed.

1 6. Goes to toilet with a reminder with necessary help.

1 7. Indicates need to go to toilet by gesture, action or vocalization.

1 8. Stays dry during daytime.

2 9. Stays dry at night.

2 10. Goes to toilet independently.

13 TOTAL - SCALE IX.  
TOTAL - N.O.

#### X. DRESSING

2 1. Holds out limbs to aid in dressing spontaneously or when directed.

2 2. Cooperates by holding still when dressed.

2 3. Pulls off clothing; e.g., socks, shoes or underpants.

1 4. Zips (when zipper is started) end/or unzips large zippers.

2 5. Takes off pullover shirt.

2 6. Dresses self except buttoning, zipping and tying.

7 TOTAL - SCALE X.  
TOTAL - N.O.

GROOMING

A. Toothbrushing

- 2 1. Cooperates by allowing teeth to be brushed.
- 2 2. Brushes teeth when a toothbrush with toothpaste and water are provided.
- ~~0~~ 3. Brushes teeth spontaneously or when requested, obtaining toothpaste and applying by self.

4 TOTAL - A. TOOTHBRUSHING

B. Hand/Face Washing

- 2 1. Cooperates when being washed by holding still.
- 2 2. Takes towel and dries hands/face.
- 1 3. Washes hands/face when water is turned on/off and soap is applied, spontaneously or when told.
- 1 4. Hangs up or disposes towel after using when requested.
- ~~0~~ 5. Washes hands/face spontaneously or when requested, including turning on/off water and applying soap.
- ~~0~~ 6. At appropriate times, washes hands/face and dries them without needing to be reminded.

6 TOTAL - B. HAND/FACE WASHING

C. Bathing

- 2 1. Cooperates by holding still while being bathed.
- 2 2. Appropriately turns head and extends arms while being bathed.
- ~~0~~ 3. Appropriately washes and rinses some body parts when soap and/or washcloth are supplied.
- ~~0~~ 4. Washes most body parts with soap.
- ~~0~~ 5. Dries body parts when handed a towel, spontaneously or on request.

4 TOTAL - C. BATHING

D. Hair Combing/Brushing

- 2 1. Cooperates by holding still when hair is combed/brushed.
- 1 2. Combs/brushes hair when given the items.
- ~~0~~ 3. Combs/brushes hair when appropriate.

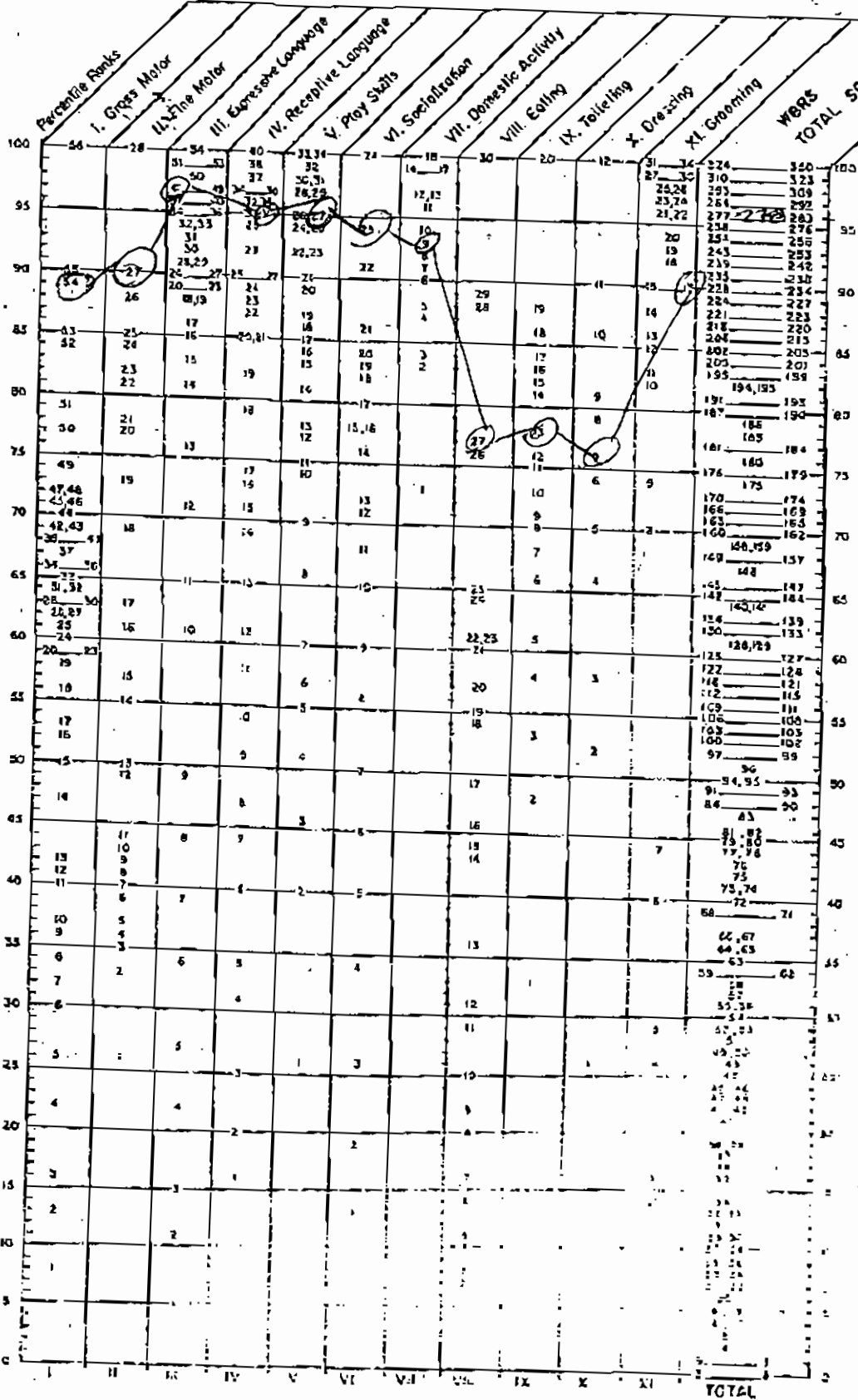
3 TOTAL - D. HAIR COMBING/BRUSHING

13 TOTAL - SCALE XI. (A + B + C + D)  
TOTAL - N.O.

WISCONSIN BEHAVIOR RATING SCALE INDIVIDUAL PROFILE SUMMARY

DIRECTIONS: (1) Circle the scale score in each column. (If the score falls within a range, write the exact score on the line and circle it)  
 (2) Connect the circles.

NAME: Harry  
 BIRTHDATE: 2-15-09  
 EVALUATOR: WES



Number of

TOTAL