



Michigan Autism Conference

September 14-16, 2016

Welcome to the Fourth Annual Michigan Autism Conference (MAC)! This conference is dedicated to providing families, practitioners, and researchers with information on a variety of topics related to the assessment and treatment of those affected with autism. We hope you will find our conference to be informative and enjoyable.

Registration

Wednesday, September 14	7:30 a.m. – 8:00 a.m.
Thursday, September 15	7:00 a.m. – 8:00 a.m.
Friday, September 16	7:00 a.m. – 8:00 a.m.

Remember to stop by the Continuing Education table for information about CEUs!

Please stop by the Discover Kalamazoo table for information about things to do while you are in Kalamazoo!



Program Content

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Michigan Autism Conference is thankful for the assistance and efforts of the following organizations:



Discover Kalamazoo

Provided assistance with the information table, volunteer staffing, and speaker welcoming.



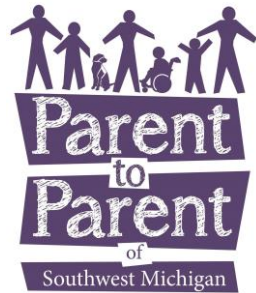
Foxy Learning LLC

Provided assistance with MAC's website.



Image Stream

Provided assistance with audio/visual needs.



Parent to Parent of Southwest Michigan

Provided assistance with organizing parent scholarships.



Radisson Plaza Hotel and Suites

Provided assistance with conference planning and support.



Western Michigan University Autism Center of Excellence

Provided assistance with child supervision.



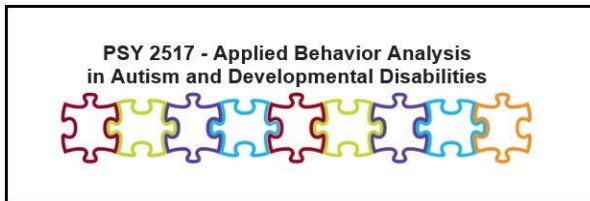
Western Michigan University Department of Psychology

Provided organizational assistance.



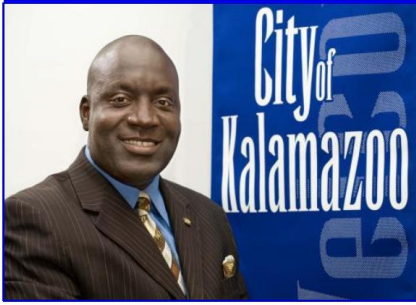
Western Michigan University Lee Honors College

Provided assistance with volunteer staffing.



Western Michigan University PSY 2517 Course Instructors and Students

Provided assistance with volunteer staffing.



OFFICE OF THE MAYOR

241 W. South Street
Kalamazoo, MI 49007-4796
Phone: (269) 337-8046
Fax: (269) 337-8182
www.kalamazoo-city.org

Welcome to the City of Kalamazoo!

On behalf of the City of Kalamazoo, I would like to welcome practitioners from across the state of Michigan including individuals who are working at community mental health agencies and private agencies delivering services to individuals with autism to the Michigan Autism Conference of 2016. It is our privilege to host your annual event, and we hope you are able to enjoy everything that Kalamazoo has to offer!

You will find our great city to be warm and friendly. Our vibrant downtown area is filled with unique restaurants, boutique retail stores, coffee shops, pubs, microbreweries and art galleries. The Kalamazoo Public Library, the Kalamazoo Valley Museum, and the Kalamazoo Institute of Arts are within easy walking distance of the downtown district.

Also nearby is the outdoor Arcadia Festival Site, the location for many special entertainment events throughout the warm spring, summer and fall months. Sports enthusiasts will enjoy the Kalamazoo River Valley Trailway, which borders the Kalamazoo River. Other area Trailway attractions include the Celery Flats scenic walking/biking trail, and the Kal-Haven Trail, which connects the Kalamazoo area to the Lake Michigan community of South Haven where there are beautiful public beaches.

Discover Kalamazoo can provide additional information about area attractions or you can check the link to events at www.discoverkalamazoo.com.

I am very proud to call this great city my home and trust you will find our city interesting, vibrant, and friendly. I hope that your stay here will provide many pleasant memories. Again, welcome to Kalamazoo and best wishes for a wonderful conference!

Once you Discover Kalamazoo, you'll be back. We promise!


Supporting the Journey,

A handwritten signature in blue ink that reads "Bobby J. Hopewell".

Bobby J. Hopewell
Mayor

Wednesday, September 14

Use this color-coded chart to find each room on the map and to determine the location of each presentation. A map is located at the back of your program.

	Kalamazoo Room	Arcadia Ballroom	Stone Theatre	Oaks	Prairies 4	Meadows
7:30 – 8:00	Registration					
8:00 – 12:00		Andy Bondy	BACB Supervisor Training	Matthew Brodhead	Patrick McGreevy	
12:00 – 1:00	Lunch (on your own) - <i>please visit the Discover Kalamazoo table for a list of local restaurants</i>					
1:00 – 5:00		Andy Bondy <i>continued</i>	BACB Supervisor Training <i>continued</i>	Jennifer Austin		
6:00 – 6:30	Light Refreshments					
6:30 – 7:30	Kick-Off Event Stephanie Peterson <i>Strategies That Parents Can Use to Minimize Problem Behavior</i>					

Please turn the page for more information about each event.

Wednesday, September 14

Workshops

8:00 a.m. – 5:00 p.m. (Lunch 12:00 – 1:00); Stone Theatre

Andy Bondy, Ph.D. (Pyramid Educational Consultants, Inc.)

Andy Bondy, Ph.D. is president and co-founder of Pyramid Educational Consultants, Inc. Dr. Bondy is an innovative leader in the field of autism and applied behavior analysis. He directed a statewide public school system for students with autism for fourteen years. He is co-author of the PECS Training Manual. He also wrote the Pyramid Approach to Education, a training manual that offers an integrated orientation to developing effective educational environments blending applied behavior analysis with functional activities and create communication strategies. Dr. Bondy received his MA and Ph.D. from the UNC Greensboro, and completed his clinical internship in 1976 at the University of Kansas Medical Center. Dr. Bondy has presented numerous papers, lectures and workshops in regional, national and international conferences and conventions on behavior analysis, PECS and the Pyramid Approach to Education. He has remained active in research and writing, and continues to develop new and innovative methods of helping children with autism and related developmental disorders.



Teaching Critical Communication Skills

This training discusses how to teach critical communication skills that lead to greater independence in the home, work, school, and community settings for all learners regardless of communicative modality.

8:00 a.m. – 5:00 p.m. (Lunch 12:00 – 1:00); Oaks

Heather McGee, Ph.D. (Western Michigan University) and **Katie Garza, M.A., BCBA** (Western Michigan University)

Heather M. McGee is an Associate Professor of Psychology and Co-Chair of the Industrial/Organizational Behavior Management program at Western Michigan University (WMU). She received her B.S. (1998), M.A. (2003), and Ph.D. (2004) from WMU. Dr. McGee is also co-founder of Performance Blueprints, a performance improvement consulting firm specializing in helping small businesses, non-profits & human service settings by providing a variety of consulting and training services. Dr. McGee has designed, developed and implemented organizational performance solutions in a variety of industries and settings, including autism service providers, the pharmaceutical industry, education, and health and human services. These solutions have included performance-based instruction, performance management, behavioral systems changes, and lean sigma initiatives. Additionally, Dr. McGee is the Executive Director of the Organizational Behavior Management (OBM) Network and serves as an



associate editor for the *Journal of Organizational Behavior Management (JOBM)* and on the editorial board for *Behavior Analysis: Research and Practice*.

Katie L. Garza is a doctoral student in behavior analysis at Western Michigan University. She received her B.A. (2011) and M.A. (2013) from WMU. Katie has a variety of interests within the field of behavior analysis, including the treatment of autism spectrum disorder, arrangement of supportive living, leisure, and vocational environments for adults with developmental disabilities, and training for individuals practicing or interested in practicing within the field of behavior analysis. She has experience writing and implementing skill acquisition programs for children with developmental disabilities, writing behavior plans and training staff to implement plans for adults with developmental disabilities, creating data collection systems for a vocational training program, and developing training materials for individuals supervising aspiring BCBAs. After graduation, Katie plans to manage systems and train and supervise staff and volunteers in non-profit settings.

BCBA 8-Hour Supervision Training

In their September, 2012 newsletter, the BACB announced that BCBAs providing supervision must complete an 8-hr approved supervision training in order to “more directly impact the acquisition and maintenance of quality supervision repertoires and increase compliance with BACB standards.” However, training alone may not be sufficient. Supervisors training people to become Board Certified Behavior Analysts typically serve in other professional roles outside of that of BCBA supervisor. These roles may effectively compete with the responsibilities of supervising. Having materials to reduce the effort of supervising may increase the likelihood of supervisors carrying out the full process of behavioral skills training, which would help increase the proficiency with which their supervisees can perform the skills outlined in the BACB Fourth Edition Task List and Supervision Training Curriculum Outline. The purpose of this workshop is therefore to satisfy the BACB 8-hr supervision training requirements as well as to introduce some tools for increasing the efficiency and effectiveness of supervision and facilitating the process of behavioral skills training for BCBA supervisors.

This training program is based on the BACB Supervision Training Curriculum Outline, but is offered independent of the BACB.



Autism Centers OF MICHIGAN

“Over the past 60 years, applied behavior analysis has become recognized as the treatment of choice for behavior problems associated with autism spectrum disorders, intellectual disabilities, brain injury, and other disorders.”

—Association for Behavior Analysis International

ABA Programs

Our ABA Programs are comprehensive and state-of-the-art, using techniques with strong scientific support. We are consistent with best practice and have a commitment to ongoing assessment of progress. We also believe that parents play a role as active participants in the decision-making process within an ABA program for their children.

ABA Center Based Services

Our center-based services are ideal for clients that qualify for early intervention treatment or for clients regardless of age who are seeking intensive ABA treatment. Early intensive ABA services have enabled many children diagnosed with an ASD to become successful in mainstream classrooms with their peers. Early intervention services are ideally delivered 20-30 hours per week, but we will work with families to come as close to that goal as possible.

ABA Outreach Services

Our outreach services are provided in-home and in the community. Each session includes consultation with parents/caretakers and direct care for the child impacted by Autism. The goals of these sessions will be determined by the combined efforts of parents/caretakers and their Board Certified Behavior Analyst.

Phone: 231-668-4909 **Fax:** 231-943-1334 **E-mail:** info@autismcentersmi.com

Web: www.autismcentersmi.com **Facebook:** Autism Centers of Michigan

Lansing • Midland • Saginaw • Traverse City

8:00 a.m. – 12:00 p.m.; Prairies 4

Matthew T. Brodhead, Ph.D., BCBA-D (Michigan State University)

Matthew T. Brodhead, Ph.D., BCBA-D, is an Assistant Professor at Michigan State University. His research examines the behavioral determinants of response variability and decision-making in children with autism. He is also interested in research and conceptual issues relating to the ethical and professional behaviors of practicing behavior analysts. Through workshops and consultation, he has established multiple school-based programs for children with autism, and he has provided training to teachers, related service providers, and behavior analysts throughout the United States.



Strategies for Using Photographic Activity Schedules and Script Training to Promote Independence, Verbal Behavior, and Social Skills in Individuals with Autism

Many individuals with autism display deficits in spontaneous language. Some also have difficulty completing complex sequences of behavior or multi-step tasks without adult prompting and supervision. These skills deficits can limit access to social situations and produce prompt dependence. Researchers have developed techniques, called Photographic Activity Schedules and Social Scripting/Script Fading, to address these specific deficits. These techniques take advantage of visual discrimination and auditory imitation skills that are often areas of strength for individuals with autism. Descriptions of these techniques, the research behind them, and strategies for using them with individuals with autism will be described in this workshop. Ultimately, attendees of this workshop will obtain the skills necessary to be able to implement photographic activity schedules and social scripts with individuals with autism.

8:00 a.m. – 12:00 p.m.; Meadows

Patrick McGreevy, Ph.D., BCBA-D (Patrick McGreevy, Ph.D., P.A. and Associates)

Dr. McGreevy received B.S. and M.A. degrees in Psychology and Special Education, respectively, from the University of Iowa. He was a special education teacher for eight years, working with children and young adults with moderate-to-severe developmental disabilities. He received the Ph.D. degree in Education from Kansas University under the guidance of Ogden R. Lindsley.

Dr. McGreevy served as an assistant research professor in the Institute for Community Studies and the Department of Special Education at the University of Missouri-Kansas City and as an assistant professor in the Department of Special Education at Louisiana State University. He taught courses in applied behavior analysis, as well as, curriculum and instruction for students with moderate-to-severe disabilities. He is the author of *Teaching and Learning in Plain English*, an introduction to Precision Teaching, and the founder and first editor of the *Journal of Precision Teaching and Standard Celeration Charting*. He is also the author of nine journal articles and a book chapter on teaching verbal behavior. He is also the first author of



Essential for Living, a new functional skills curriculum, assessment, and professional practitioner's handbook for children and adults with moderate-to-severe disabilities. For the past 30 years, Dr. McGreevy has provided consultations for children and adults with developmental disabilities and hands-on training for their families. He has also provided consultation and training for school districts, residential programs, and hospitals in the United States, the United Kingdom, and Canada, specializing in the treatment of aggressive and self-injurious behavior in individuals with limited communication or language skills. Dr. McGreevy has also conducted workshops on teaching communication skills and language in the context of severe problem behavior, which are based on B. F. Skinner's analysis of verbal behavior. From 2005-2014, Dr. McGreevy served as an assistant professor in the Behavior Analysis Program at the Florida Institute of Technology. He taught on-campus courses and seminars, and online lectures, with an emphasis on the application of principles and procedures. From 2005-2014, Dr. McGreevy served as an assistant professor in the Behavior Analysis Program at the Florida Institute of Technology. He taught on-campus courses and seminars, and online lectures, with an emphasis on the application of principles and procedures.

Functional Skills and Curriculum-based Assessments for Learners with Moderate-to-Severe Disabilities: It's as Much about What we Teach as How we Teach it

In recent years, many teachers, curriculum coordinators, and behavior analysts have struggled with 'what to teach children' with moderate-to-severe disabilities or limited skill repertoires, including many children with autism, especially as they grow older. In public schools, they are often instructed to adhere to the Common Core State Standards, while in ABA centers they are often offered only developmental curricula designed to help young children 'catch up' to their typically-developing peers. When they look for alternative sources of more functional skills, they often find few available options. If they look to the BACB Fourth Edition Task List, on which many BACB approved programs are based, they find no items that assist in resolving this or any other curricular issue. The presenter will describe functional skills and curriculum-based assessments, their value for specific children and adults, and the scientific literature that supports their use.

1:00 p.m. – 5:00 p.m.; Prairies 4

Jennifer L. Austin, Ph.D., BCBA-D (University of South Wales)

Jennifer L. Austin, Ph.D., BCBA-D has been applying the science of behavior analysis to improve outcomes for children and their teachers for nearly 20 years. Both her research and clinical work focus on how behavior analytic assessment and intervention strategies can be applied with typically developing children, as well as examining what adaptations may be necessary for making our science “work” in mainstream classrooms. She has worked with numerous schools in the US and the UK, focusing primarily on those in disadvantaged communities. Dr. Austin received her PhD from the Florida State University and currently serves as Principal Lecturer in Psychology at the University of South Wales, where she leads the Behaviour Analysis Unit and directs undergraduate and postgraduate programs in behavior analysis. Prior to moving to the United Kingdom, Dr. Austin served as faculty at the University of South Florida, California State University, Fresno and the University of Houston, Clear Lake. She is the past President of the UK Society for Behaviour Analysis and a former Associate Editor of the *Journal of Applied Behavior Analysis* and *Behavior Analysis in Practice*.



Improving the Efficiency and Acceptability of Functional Analyses in Classrooms

Conducting functional analyses (FAs) in classrooms are often difficult and time-consuming endeavors for both behavior analysts and the teachers with whom they work. Further, questions frequently arise regarding the validity of analog versus naturalistic arrangements, who should conduct the FA, and what type of FA is best suited for particular situations. Trial-based functional analyses are gaining strong empirical evidence regarding their validity, efficiency, and applicability to school contexts. In this workshop, attendees will learn how to design, implement, and evaluate trial-based functional analyses for school-based cases on which they are currently working. They will consider how these strategies can best be integrated into naturally occurring classroom routines, as well as how they can effectively work with teachers as FA collaborators.



Autism Center of Excellence

WESTERN MICHIGAN UNIVERSITY

For individuals with ASD

Western Evaluation Center for Autism and Neurodevelopmental Disorders (WECAN)

- Diagnostic Evaluations

Kalamazoo Autism Center (KAC)

- ABA Therapy (Ages 2-20)

Autism Services Center (ASC)

- College Student Supports

PROMOTES: Job Readiness Skills

Contact us:
wmuace.com
psy_ace@wmich.edu
(269) 387-4311
facebook.com/WMUACE

For service providers, practitioners and individuals preparing for the field

FBACOM: Teleconsultation for
Service Providers

Video Interviews with ABA Experts

RBT Training: Online and Face-to-Face

WMU Extended University Programs:

Hybrid Graduate Program in
Behavior Analysis

BCBA Supervisor Training

You are invited

Western Michigan University
KALAMAZOO AUTISM CENTER

Ribbon Cutting Ceremony

September 17, 2016

10 a.m.

4200 S. Westnedge Ave.
Kalamazoo, MI 49008



Wednesday, September 14

Kick-Off Event

6:30 p.m. – 7:30 p.m.; Arcadia Ballroom

Stephanie Peterson, Ph.D., BCBA-D (Western Michigan University)

Stephanie M. Peterson, Ph.D., BCBA-D, is Professor of Psychology at Western Michigan University. She earned her doctorate in Special Education at The University of Iowa in 1994. Her primary research interests are choice making, functional communication training, reinforcement-based interventions for children with problem behavior, and concurrent schedules of reinforcement in the treatment of severe problem behavior and in functional analysis of problem behavior. She also has interests in applications of behavior analysis to educational interventions and teacher training. She currently serves on the Editorial Board of the Journal of Applied Behavior Analysis.



Strategies That Parents Can Use to Minimize Problem Behavior

Behavior management is one common concern for many families of children with autism and other developmental disabilities. These concerns make it difficult for many families to get through every day routines and often disrupt family dynamics. Applied behavior analysis (ABA) has shown much success in decreasing severe problem behaviors with many populations, including children diagnosed with autism. Many of the strategies used in ABA are things that parents can do every day to encourage desirable behaviors. This talk will focus on strategies that parents can use to minimize problem behaviors and increase their children's overall quality of life.

Thursday, September 15

Use this color-coded chart to find each room on the map and to determine the location of each presentation. A map is located at the back of your program.

Lobby	Arcadia Ballroom	Glens 1 & 2	Glens 3
7:00 - 8:00	Registration		
8:00 - 8:30	<i>Opening Remarks and Announcements</i>		
8:30 - 9:20	Ron Van Houten <i>How Can We Increase the Impact of Behavior Analysis in Solving Problems in New Areas?</i>		
9:30 - 10:20	Jennifer Austin <i>What Students and Educators Can Teach Us About Functional Behavior Assessment and Intervention in the Classroom</i>		
10:30 - 11:20	Andy Bondy <i>A Clear Picture: The Use and Benefits of PECS</i>		
11:30 - 1:00	Lunch (on your own) - <i>please visit the Discover Kalamazoo table for a list of local restaurants</i>		
1:00 - 2:20	Carl Sundberg ♦C	Amy Matthews ♦C, ■E, ▲P	Ethical Practice** ♦C
2:30 - 3:20	Poster Session 1 Exhibit Expo and Bookstore		
3:30 - 4:20	Patrick McGreevy ♦C, ■E	Robert Ross ♦C, ▲P	Grost, Elsasser, & VanDenBerg ♦C, ■E, ▲P
4:30 - 5:20	Dennis Reid ♦C	Quigley, Trott, & Blevins ♦C, ■E, ▲P	Luchara Wallace ♦C, ■E, ●R, ▲P

♦C - Recommended for clinic/center-based practitioners

■E - Recommended for educators


●R - Recommended for researchers

▲P - Recommended for parents/caregivers

Thursday, September 15

Use this color-coded chart to find each room on the map and to determine the location of each presentation. A map is located at the back of your program.

Prairies 4 & 5	Prairies 6	Stone Theatre	Kalamazoo Room
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Continental Breakfast			7:00 – 8:00	
	Exhibit Expo and Bookstore		8:00 – 8:30	
			8:30 – 9:20	
			9:30 – 10:20	
			10:30 – 11:20	
Lunch (on your own) – <i>please visit the Discover Kalamazoo table for a list of local restaurants</i>			11:30 – 1:00	
Costanza Colombi ♦C, ■E, ●R, ▲P	Parents' Experiences** ▲P	Scott Schuelke ▲P	1:00 – 2:20	
Poster Session 1 Exhibit Expo and Bookstore		Exhibit Expo and Bookstore	2:30 – 3:20	
Kimberly Bancroft ♦C, ●R	Marita Inglehart ▲P		Jessa Love ▲P	3:30 – 4:20
Jeana Koerber ▲P	Jonathan Baker ♦C, ■E		Ron Sandison ♦C, ■E, ▲P	4:30 – 5:20

****Symposium with multiple presenters.**

Please turn the page for more information about each event.

Thursday, September 15

Continental Breakfast

7:00 a.m. – 8:00 a.m.; Lobby

Please enjoy a special continental breakfast during registration. Remember to stop by the CEU table if you need CEUs, and check out the Information Table to learn more about things to do in Kalamazoo. The Exhibitor Expo and bookstore will also be open during this time!

Opening Remarks

8:00 a.m. – 8:30 a.m.; Arcadia Ballroom

Please join us for opening remarks after you enjoy our continental breakfast. Important announcements will be delivered at this time as well.

Thank you for joining us at the Michigan Autism Conference!

W Kalamazoo
Autism Center
WESTERN MICHIGAN UNIVERSITY

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Pre-academic
(learning to learn) skills
Communication skills
Group skills
Social skills
Play skills
Daily living skills
Vocational skills
Parent training

MDHHS
Michigan Department of Health & Human Services

Thursday, September 15

Keynote Addresses

8:30 a.m. – 9:20 a.m.; Arcadia Ballroom

Andy Bondy, Ph.D. (**Pyramid Educational Consultants, Inc.**)

Andy Bondy, Ph.D. is president and co-founder of Pyramid Educational Consultants, Inc. Dr. Bondy is an innovative leader in the field of autism and applied behavior analysis. He directed a statewide public school system for students with autism for fourteen years. He is co-author of the PECS Training Manual. He also wrote the Pyramid Approach to Education, a training manual that offers an integrated orientation to developing effective educational environments blending applied behavior analysis with functional activities and create communication strategies. Dr. Bondy received his MA and Ph.D. from the UNC



Greensboro, and completed his clinical internship in 1976 at the University of Kansas Medical Center. Dr. Bondy has presented numerous papers, lectures and workshops in regional, national and international conferences and conventions on behavior analysis, PECS and the Pyramid Approach to Education. He has remained active in research and writing, and continues to develop new and innovative methods of helping children with autism and related developmental disorders.

A Clear Picture: The Use and Benefits of PECS

The Picture Exchange Communication System (PECS) is an evidence-based Augmentative/Alternative Communication (AAC) strategy developed by Lori Frost and Andy Bondy. This talk will briefly review the 6 phases of the teaching protocol, including attributes and complex language skills. We will review transitional issues from both PECS to speech and to SGDs. Given the many years of international use, there are numerous myths and misconceptions associated with PECS. We will review some of the key recent studies associated with PECS use as well as the recent push for fully replacing PECS with high-tech alternatives.

Dr. Bondy will be introduced by the Great Lakes Center for Autism Treatment and Research. Michigan Autism Conference would like to thank the Great Lakes Center for their generous sponsorship of this year's conference!

9:30 a.m. – 10:20 a.m.; Arcadia Ballroom

Ron Van Houten, Ph.D., BCBA-D (Western Michigan University)

Dr. Van Houten received his BA from SUNY at Stony Brook and his MA and Ph.D. from Dalhousie University where he received training in the Experimental Analysis of Behavior. He is currently Professor of Psychology at Western Michigan University. Dr. Van Houten has published extensively in JABA on a wide variety of problems, ranging from the education of inner city youth and children with “learning disabilities”, the treatment of children and adults with developmental delays, the treatment of clinical problems in children, traffic safety, energy conservation, and aviation safety. Currently Dr. Van Houten is a member of the Transportation



Research Board and a member of the National Committee for Uniform Traffic Control Devices. He is a past AE for the Journal of Applied Behavior Analysis and a Fellow of the ABAI. In 2013 he received the Waller Award from the National Academy of Science and in 2015 he received the Award for Scientific Translation Impact of Science on Application from the Society for the Advancement of Behavior Analysis. Dr. Van Houten is also an avid pilot flying power aircraft and gliders and a flight instructor.

How Can We Increase the Impact of Behavior Analysis in Solving Problems in New Areas?

Behavior analysis is a powerful tool that could ameliorate many of society's problems. One of the first problems that was seriously addressed with a behavior analytic approach was the treatment of autism. Although a behavioral approach yielded promising results from the start, it took many years before the behavioral approach was accepted as the treatment of choice for autism. Although promising data have also been obtained from applications of behavioral technology to many other social problems, these applications have not yet been widely accepted or disseminated. Skinner envisioned behavior analysis as a technology that would address a wide variety of societal challenges. Initially behavior analysts were highly enthusiastic about society adopting our approach in areas such as education, but many people already working in these fields were resistant to a behavioral approach. This paper will examine a number of areas where behavior analysis could make a difference, and explore ways to overcome obstacles and accelerate the acceptance of our approach.



Great Lakes Center for Autism Treatment and Research

Outpatient Applied Behavior Analysis (ABA) Services

- Teach academic, adaptive, and social skills to prepare children ages 15 months to 21 years old to lead full and successful lives.
- Immediate openings:
 - Half-day and after school programs
 - All-day program
 - Challenging behavior, caregiver training, and social skills groups are also available.



Intensive Residential Treatment Program

- Through the use of ABA and in coordination with medical, education, and psychiatric supports, we aim to reduce problem behaviors and teach adaptive skills to prepare children ages 6-17 years old to transition back to their home as soon as clinically appropriate.
- Goals of the program are: decrease challenging behaviors, increase functional communication skills, work successfully in a classroom, participate in a group, build self-care and adaptive living skills, and improve social skills.
- Parent and family member training.

Interested in Joining Our Team?



We are hiring full and part-time Behavior Technicians and ABA-Tutors

- Please visit our exhibit to learn more and/or to schedule an on-site interview.
- Apply on line at: <http://www.autismtreatmentresearch.org/join-our-staff>



ADDRESS 9616 Portage Road • Portage, MI 49002 **PHONE** 269.250.8200 **FAX** 269.250.8339

www.autismtreatmentresearch.org



10:30 a.m. – 11:20 a.m.; Arcadia Ballroom

Jennifer L. Austin, Ph. D., BCBA-D (University of South Wales)

Jennifer L. Austin, Ph.D., BCBA-D has been applying the science of behavior analysis to improve outcomes for children and their teachers for nearly 20 years. Both her research and clinical work focus on how behavior analytic assessment and intervention strategies can be applied with typically developing children, as well as examining what adaptations may be necessary for making our science “work” in mainstream classrooms. She has worked with numerous schools in the US and the UK, focusing primarily on those in disadvantaged communities. Dr. Austin received her PhD from the Florida State University and currently serves as Principal Lecturer in Psychology at the University of South Wales, where she leads the Behaviour Analysis Unit and directs undergraduate and postgraduate programs in behavior analysis. Prior to moving to the United Kingdom, Dr. Austin served as faculty at the University of South Florida, California State University, Fresno and the University of Houston, Clear Lake. She is the past President of the UK Society for Behaviour Analysis and a former Associate Editor of the *Journal of Applied Behavior Analysis* and *Behavior Analysis in Practice*.



What Students and Educators Can Teach Us About Functional Behavior Assessment and Intervention in the Classroom

The use of functional behavior assessments (FBAs) to inform treatment recommendations has long been established as best practice in behavior analysis from both ethical and empirical standpoints. However, the practicalities of conducting various forms of FBA (and implementing subsequent interventions) in schools sometimes poses obstacles for behavior analysts and the teachers with whom they work. The degree to which these obstacles can (and should) be overcome depends on a variety of factors that might be missed if one does not carefully consider the nature of the problems and the environments in which behaviors are expected to occur. Drawing upon nearly two decades of research and clinical work in schools, Dr. Austin will address how considering teacher and student behavior can potentially point us to more effective, efficient, and acceptable practices in conducting classroom-based assessments and interventions.

Thursday, September 15

Breakout Sessions

◆C - Recommended for clinic/center-based practitioners

■E - Recommended for educators

●R - Recommended for researchers

▲P - Recommended for parents/caregivers

1:00 p.m. – 2:20 p.m.; Arcadia Ballroom

◆C

Carl Sundberg, Ph.D., BCBA-D (Behavior Analysis Center for Autism)

Teaching in the Natural Environment

Teaching in the natural environment can be difficult but is critical. This is one of the areas that parents, behavior technicians, and teachers seem to have the most difficulty. It is sometimes thought that if a child is not sitting at the table being drilled then you are not doing ABA. While it is true that trials in the natural environment may not be as intense or frequent; the quality of these trials is typically better. They are better because they are more functional. Natural environment teaching by itself may not be sufficient because the number of trials and the structure may not be there. Both types of training are typically needed. Through this presentation the participants will learn how to create teaching situations while doing everyday activities such as bath time, dinner, bedtime routine, playing in the backyard, etc.

1:00 p.m. – 2:20 p.m.; Glens 1 & 2

◆C, ■E, ▲P

Amy Matthews, Ph.D., BCBA (Grand Valley State University and START Project)

What Behaviorally-Trained School Professionals Bring to the School Setting for Children with Autism Spectrum Disorders

Research has clearly demonstrated that applied behavior analysis (ABA) is an evidence-based practice for children with autism spectrum disorders (ASD) and is applicable across a broad range of settings. Schools are a key setting for children since they offer core curriculum content, an environment rich with adult and peer interactions, and natural learning opportunities. Linking the school setting with behavior analysis seems to be a natural combination. However the explicit adoption of ABA in schools has been slow and only a modest number of school professionals have comprehensive training in behavior analysis. School professionals with dual training in education and behavior analysis can contribute in many ways to the education of children with ASD such as the assessment of challenging behavior and development of intervention plans, supporting instructional interventions, coaching educators implementing behaviorally-based plans, ensuring interventions are implemented with fidelity, and data collection and analysis. The strength of having behaviorally-trained school professionals embedded in the schools is that they fully understand both the strengths and constraints of the school context, educational regulations and practices, and how to work collaboratively with a school team. This presentation will explore the ways that ABA is being utilized in schools for students with ASD in Michigan, and how to expand these efforts, work collaboratively with clinically-based ABA providers, and create a support

community for behavior analysts working in the schools. Results from a state survey of BCBA's in schools in Michigan will be shared along with initial efforts to connect school professionals who are also behavior analysts.

1:00 p.m. – 2:20 pm.; Glens 3



Symposium – Ethical Practice

Chair: Margaret Uwayo, M.A. (Western Michigan University)

Jessica Korneder, Ph.D., BCBA-D (Oakland University)

Creating a Culture of Ethics: A Top Down Approach

Working with families, individuals with autism, and students studying behavior analysis is an important responsibility. The Behavior Analyst Certification Board (BACB) provides Behavior Analysts with 10 clear guidelines on ethical behavior. Even with those guidelines, Behavior Analysts are often making choices regarding ethical behavior on a daily basis. These decisions affect the quality of services and social validity of the services. This presentation will focus on how to create and foster a culture of strong ethics in a center-based autism program and during university academic instruction.

D'Jaris Coles-White, Ph.D. (Andrews University)

Ethical Decision Making in the Treatment of Individuals with ASD Who Are Moderate to Severe: Avoiding the Potholes and Pitfalls

Autism Spectrum Disorder (ASD) is a complex neurodevelopmental disorder characterized by marked impairments in the ability to interact socially combined with restrictive, repetitive patterns of behavior (Bent & Hendren, 2015). According to the Centers for Disease Control and Prevention (CDC), ASD affects 1 in 68 children in the US. Although those with ASD make up a very heterogenic group, autism often has a negative impact on those affected, their families and their communities. Individuals with ASD who are moderate to severe will have significant challenges related to academic/school performance, health, behavior, as well as cognition, communication, and social skills. As a result, individuals with moderate to severe autism will need treatment across their lifespan. Some elective treatments have been elusive for many families because they are either too expensive or geographically far-reaching. Other treatments may be readily available to families but are without efficacy (e.g., complementary and alternative medicine (CAM) therapies). Consequently, many families are desperately seeking our clinical expertise. Working with individuals with ASD who are moderate to severe can raise ethical dilemmas for clinicians. Professional codes of ethics and the use of evidence-based practices provide clinicians with a roadmap for the ethical approach to providing services to individuals with ASD.

Kent Rehmann (Summit Pointe)

Title and abstract to be announced.

Constanza Colombi, Ph.D. (University of Michigan, Ann Arbor)

Bridging the Gap Through Naturalistic Behavioral Early Intervention

Autism Spectrum Disorder (ASD) affects approximately 1 in 68 children, according to the CDC's Autism and Developmental Disabilities Monitoring (ADDM) Network (Baio, 2014). Despite the fact that more children than ever are being diagnosed or identified as at-risk for ASD in the first years of life (Lord et al., 2012), and despite strong evidence for the significant impact of early intervention that begins immediately following diagnosis (Koegel et al., 2014), access to developmentally appropriate treatment is quite limited, and this is particularly true for very young children. The National Research Council has recommended a minimum of 25 hours per week of intervention (2001). However, it seems impossible to provide such intensity to all children immediately following diagnosis, due to increased incidence of ASD, combined with scarcity of providers. One way of increasing access to intervention is to teach intervention strategies to parents. Parent based intervention has shown positive outcomes in children, as well as in parents (Kasari et al. 2012). One of these interventions, the Early Start Denver Model (ESDM) is particularly promising for improving child's outcomes (Dawson et al., 2012). ESDM focuses on the core areas of difficulties of ASD: verbal and nonverbal communication, joint attention, social engagement, imitation, play and cognition. ESDM is delivered by adults within in the context of play and daily routines in which highly precise teaching is imbedded. During the presentation, several adaptations of the ESDM in community settings both nationally and internationally will be illustrated.

Symposium – Parents' Experiences

Chair: Alissa Conway, M.A. (Western Michigan University)

Bruce Mills (Kalamazoo College)

Life with a Son with Autism

In my presentation, I will narrate and reflect upon 2-3 brief stories of experiences with my son, Jacob, who is now 24. (Some of these stories will be drawn from my memoir, *An Archaeology of Yearning*, a book that explores life with my son.) Through these anecdotes, I will depict emblematic moments and thus characterize the sometimes hidden family dynamics between those on and off the spectrum.

Leasa Androl, M.A., BCBA (Spectrum Autism Center)

The Stages of an Autism Parent

An autism diagnosis for my youngest child turned my life upside down. It led me down a winding road that including depression, financial turmoil, confusion, failure, information overload, and/but eventually enlightenment, excitement, and happiness. I've had many failures and successes throughout my journey as an autism parent. Hindsight can provide so much valuable information and I hope to share my experience with other parents so that they can avoid some of the mistakes my family made early in our journey.

Rae Hall, M.A. (Spectrum Autism Center)
Autism and My Rose Colored Glasses

When my grandson was diagnosed with autism nine years ago, we had rarely heard the word. I understood he was diagnosed with autism, but I didn't really know what that meant; I knew that he didn't talk much and was in his own world. I was sure I could get him to talk, so I obnoxiously hounded him until he would say something.

As he moved through the school system, a "professional" told my daughter that he would never graduate, because he was unable to sit down for long periods of time and do his classwork. I did not know much about ABA in a formal way, but my persistence again drove me to work with him during "Nana's Summer School", with the goal of getting him to sit for 20 minutes and do worksheets. By the end of the summer, he was not only able to sit for 20 minutes or longer; he could also read several books and complete several worksheets in a row, independently.

This year, my daughter received a note from a social worker who observed him in school, commenting on how amazingly he maneuvered throughout his day totally independent, sat quietly, and waited patiently.

Today, am nearing completing my MA in Applied Behavior Analysis so that I can help children while never underestimating the abilities/willingness of parents and grandparents to become involved in the process as they begin to see the same successes our family did when we got my grandson ABA Therapy.



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**Parent
to
Parent
of
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1:00 p.m. – 2:20 p.m.; Stone Theatre

▲P

Scott Scheulke, Sergeant (Autism Alliance of Michigan)

Michigan Autism Safety Training

The Autism Alliance of Michigan is committed to training and educating community, law enforcement, caregivers, and educators on safety needs of individuals and families affected by autism.

2:30 p.m. – 3:20 p.m.; Kalamazoo Room

Reception, Poster Session 1, and Exhibit Expo

Please see pages 37 and 72 for a complete list of posters and exhibitors. The Michigan Autism Conference would like to thank the Little Star Center for their sponsorship of this afternoon's free beverages.

3:30 p.m. – 4:20 p.m.; Arcadia Ballroom

◆C, ■E

Patrick McGreevy, Ph.D., BCBA-D (Patrick McGreevy, PhD., P.A. and Associates)

Selecting, Confirming, and Maintaining an Alternative Method of Speaking for Non-Verbal Children and Adults that Endures Through Their Adult Years

Many children do not learn to communicate with spoken words. Many of these non-verbal children reach adulthood without an effective, alternative method of speaking. Some children are taught to 'exchange pictures', 'select pictures on an electronic device with voice output', or 'use signs'. Still others are not provided with an alternative method of speaking at all.

As the children become older, those who were provided with an alternative method, often abandon this method in favor of methods like 'informal gestures' or 'leading others to what they want', which are portable and which do not require special equipment. This abandonment suggests the need for systematic procedures which insure that alternative methods of speaking selected for non-verbal children are effective and endure through their adult years.

The presenters will describe systematic procedures for selecting an alternative method of speaking for specific learners and then testing the effectiveness of this method. In order to insure active learner participation, the presenters will ask frequent questions of specific participants.

3:30 p.m. – 4:20 p.m.; Glens 1 & 2

◆C, ▲P

Robert K. Ross, BCBA-D, LABA (Beacon ABA Services of MA and CT)


Are You "Doing ABA"? Behavioral Indicators of Effective ABA Program Implementation

This presentation will describe key learner and instructor behavioral indicators of quality/effective ABA based EIBI programming for individuals with Autism Spectrum Disorders. The focus will be on observable measurable behavioral "red flags" indicating either effective or problematic aspects of treatment. These behavioral indicators are meant to be used to evaluate services and guide intervention to improve the quality of interventions for children with ASD. A one page instructional structure evaluation tool will also be presented and provided to participants attending this presentation.



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3:30 p.m. – 4:20 p.m.; Glens 3

◆C, ■E, ▲P

Lisa Grost, MHSA, PAPHS; Brie Elsasser, M.S.Ed., BCBA; and Morgan VanDenBerg, M.A., BCBA (Michigan Department of Health and Human Services)

Introduction to Michigan Behavioral Health Treatment

The Michigan Medicaid system continues to evolve to meet the needs of individuals with Autism Spectrum Disorder (ASD). Since the introduction of service coverage for Applied Behavior Analysis (ABA) in April of 2013, thousands of children and families have been positively impacted and are making significant gains through ABA. This newly available treatment modality and qualified providers have added to the already robust array of behavioral health services covered by the Prepaid Inpatient Health Plans and Community Mental Health Service Programs.

The presenters will provide an introduction to the Medicaid ABA eligibility process from screening, referral, diagnostic evaluation, and finally to service delivery. The presenters will highlight fundamental areas of the policy to increase clarity of this covered service, along with providing an overview of the managed care system in Michigan.

The presenters will discuss key items identified across Michigan after three years of implementation of the Medicaid ABA service, recommendations for improving compliance and practice, as well as, suggestions for recruiting providers and developing infrastructure for quality ABA service programs.

3:30 p.m. – 4:20 p.m.; Prairies 4 & 5

◆C, ●R

Kim Bancroft, Ph.D. (Western Michigan University)

A Survey of Screening and Diagnostic Assessment Measures for Autism Spectrum Disorder

Autism spectrum disorder is a neurodevelopmental disorder characterized by deficits in social reciprocity and communication and the presence of restricted/repetitive behaviors and interests. However, the presentation of core symptoms is heterogeneous and can be difficult to discern from normal variation in development or other psychiatric disorders of childhood. Without a biological marker for ASD, the diagnosis is made based upon a behavioral profile, thereby creating a need for trained professionals to be able to accurately and reliably identify the condition and with increased emphasis on early identification and diagnosis to access intervention services. This presentation shall examine issues related to screening and diagnosis of autism spectrum disorder across childhood and adolescence, describe components of a diagnostic assessment, and review commonly used screening and diagnostic measures and its evidence base.

3:30 p.m. – 4:20 p.m.; Prairies 6

▲P

Marita R. Inglehart, Dr. phil., Dr. phil. Habil. (University of Michigan – School of Dentistry & Department of Psychology)

Autism and Dental Care – The Importance of Parent-Provider Communication

Purpose: To explore (a) general dentists' and pediatric dentists' thoughts concerning providing care for patients with Autism Spectrum Disorder diagnoses and (b) to discuss the relationship between the level of functioning (listening/talking/reading/daily self-care/care at home/social skills) of children with Autism Spectrum Disorder (ASD) and their oral health and oral health-related behavior (brushing, flossing, dental visits).

Methods: Survey data were collected from general and pediatric dentists and parents of children with ASD. Children's level of functioning was determined with a short version of the Survey Interview Form of the Vineland Adaptive Behavior Scales (2nd edition).

Results: The results of the dentist surveys showed that 89% of pediatric dentists and 32% of general dentists treated patients with ASD. The respondents did not think that their pre-doctoral dental education had prepared them well to treat patients with ASD. However, the better they felt prepared, the more likely they were to provide care for these patients. The frequency with which pediatric dentists used appropriate behavior management strategies when treating patients with ASD correlated with the quality of their educational experiences. The results of the parent surveys showed that parents' comfort levels concerning brushing and flossing their child's teeth and taking their child to the dentist varied considerably and correlated significantly with their child's level of functioning.

Conclusions: Improving health care providers' education and especially assuring that they understand the relationships between the level of functioning of children with ASD and their oral health and oral health-related behavior could increase dentists' ability to provide the best possible care for these patients.



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3:30 p.m. – 4:20 p.m.; Stone Theatre

▲P

Jessa Love, Ph. D., BCBA-D (Building Bridges Therapy Center)

Intensive Toilet Training

This presentation will cover intensive toilet training procedures that caregivers can use with individuals with ASD. Topics covered include: (1) when to begin toilet training, (2) how to implement intensive training for urine continence, (3) bowel training, and (4) common questions or concerns.

4:30 p.m. – 5:20 p.m.; Arcadia Ballroom


◆C

Dennis H. Reid, Ph. D., BCBA (Caroline Behavior Analysis and Support Center)

Promoting Happiness Among Adults with Autism on the Severe End of the Spectrum: Evidence-Based Strategies

This presentation will describe evidence-based strategies for promoting happiness among adults with autism on the severe end of the spectrum. The focus will be on enhancing happiness to promote a desirable quality of life among adults who have challenges readily describing their emotional experiences. Initially, means of identifying and validating indicators of happiness and unhappiness on an individual basis will be presented. Next, specific strategies for increasing happiness and decreasing unhappiness during daily routines will be described. Examples of topics to be presented include how staff and others can develop good relationships with people with autism whom they support, how to identify situations accompanied by unhappiness and how to alter those situations, ways to identify and embed individual preferences within daily routines, how to provide necessary instructional and related demands in ways that are enjoyable, and how enhancing daily enjoyment can prevent and reduce challenging behavior. Throughout the presentation an emphasis will be on how promoting happiness as a desired outcome should be targeted, monitored, and evaluated just as other more traditional outcomes are addressed in human service agencies.

Dr. Reid will be introduced by the Little Star Center.



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4:30 p.m. – 5:20 p. m.; Glens 1 & 2

◆C, ■E, ▲P

Shawn P. Quigley, Ph.D., BCBA-D; Maryann Trott, M.A., BCBA; and Patrick Blevins, M.A., BCBA (University of New Mexico Medical Group – Center for Development and Disability)

Back to the Basics: Experiences in School-Based Consults

Many behavior analysts and other professionals provide consultation for students in the education setting. A group of professionals at a southwest university provide state-wide trainings for teachers, paraprofessionals, and administrators to enhance the capacity of the educators to serve children with autism. Technical assistance consultations are also provided to support the needs of individual students with autism. The trainings and consultations follow an “I do, we do, you do” philosophy. Specifically, brief lectures or webinars introduce strategies, the strategies are practiced with the consultants, and the consultants give feedback to the educators while implementing the strategies. Strategies requested are often at the individualized supports tier (i.e., intensive supports based upon individualized assessment). A theme that has arisen over the last couple of years though, is an absence of basic assessment and intervention strategies that should proceed this higher level of assessment and intervention. The purpose of this presentation is to share our experiences in recent years and to discuss how our team has handled this need to refocus on the basics of intervention and assessment in a multi-tiered system.

4:30 p.m. – 5:20 p.m.; Glens 3

◆C, ■E, ●R, ▲P

Luchara Wallace, Ph.D. (Western Michigan University, Department of Special Education and Literacy Studies)

Culturally Responsive Service Provision with Individuals and Families

Participants will learn evidence-based evaluation and intervention practices with culturally diverse populations (including but not limited to ethnic, geographic, religious, and socio-economic diversity). This presentation will address research investigating programs and strategies that support improved long term outcomes for students from culturally diverse backgrounds and how this body of research can inform practices in cross-disciplinary service provision.

4:30 p.m. – 5:20 p.m.; Prairies 4 & 5

▲P

Jeana Koerber, Ph.D., BCBA-D (Great Lakes Center for Autism Treatment and Research)

Navigating Applied Behavior Analysis Services for Your Child

When a child is diagnosed with Autism or another developmental disability, caregivers may hear the term Applied Behavior Analysis (ABA) for the first time. What is ABA and how does the therapeutic approach benefit the child and impact the family dynamic? During this session, caregivers will learn about the principles of ABA, how the approach can benefit their child, the impact of ABA on the family dynamic, and how ABA integrates with other therapies. Caregivers will also participate in goal development for their family and child during the session to determine what type of ABA services (home or center-based) would best align with their goals.

4:30 p.m. – 5:20 p.m.; Prairies 6

◆C, ■E

Jonathan C. Baker, Ph.D., BCBA-D (Western Michigan University)

Writing Behavior Intervention Plans: A Review of the Literature on the Construction and Evaluation of Plans

Both federal (IDEA, 2004) and state (Sass, 2015) regulations require the use of behavior intervention plans (BIP) when a child's behavioral needs warrant intervention. Furthermore, the Michigan Department of Community Mental Health (MDCH) require behavior treatment plans for any individual receiving public mental health services who engages in "aggressive, self-injurious behavior or behaviors that place the individual or others at risk of harm" (p. 1; MDCH, 2008). Despite clear expectations for behavior plans, guidance on developing and assessing the quality of behavior intervention plans/behavior treatment plans is not included in the regulations. Indeed, in a letter to the Michigan Protection and Advocacy service, the United States Department of Education stated that, "IDEA does not address how the BIP must be reflected in a child's IEP" (p. 1; Musgrove, 2015). This presentation will review the existing literature that guides behavior analysts on the necessary components of behavior intervention plans/behavior treatment plans, as well as existing tools that can be used to evaluate such plans. This talk will also review the role that plan evaluation must play in the assessment of the efficacy of any behavioral intervention.

4:30 p.m. – 5:20 p.m.; Stone Theatre

◆C, ■E, ▲P

Ron Sandison, B.A., MDiv (Havenwyck Hospital & Spectrum Inclusion)

Autism Refined

Ron's presentation will discuss the importance of assessing the unique gifts of children with autism, and will incorporate these gifts into program ideas to promote independent and social skill development. As a young adult author and individual with autism, Ron has firsthand experiences in this area that may help practitioners and parents of children with autism understand the child's perspective. To enhance his firsthand experience, Ron will also share insights gathered from interviews with top experts on autism and with parents of children with autism.

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Thursday, September 15

Reception and Poster Session 1

2:30 p.m. – 3:20 p.m.; Kalamazoo Room

Please join us for a special dessert and social hour as you enjoy visiting the posters! Michigan Autism Conference would like to thank the Little Star Center for their generous sponsorship of this afternoon's free beverages!

1. **Nicole Bauer, B.S.; Thom Ratkos, M.A., BCBA; Mindy Newhouse-Oisten, M.A., BCBA; and Jessica E. Frieder, Ph.D., BCBA-D** (Western Michigan University)

Assessing the Effects of Different Methods of Data Collection on Pace of Instruction

Data collection is an important part of conducting discrete trial training (DTT), as it allows practitioners and researchers to determine whether their treatments are effective. One consequence of frequent data collection is that it may increase the duration of the intertrial interval (ITI), resulting in behavior aides delivering instruction at a slower pace (Cummings and Carr, 2009). Previous research has demonstrated that a quick pace of instruction when conducting DTT results in children engaging in higher rates of correct responding (Koegel, Dunlap, & Dyer, 1980) and lower rates of problem behavior (Roxburgh & Carbone, 2012). We evaluated two methods of data collection: Three-trial probe data sheets and 10-trial data sheets currently being used at an early intervention center. Behavior aides were presented with either data sheet determined at random for each session, and observers collected data on the frequency of trials presented during a 30-minute observation. The purpose of this project is to display the effects of these types of data collection on pace of instruction in behavior aides in an early intervention setting.

2. **Michael Brooks, Marcel Kirberg, Rebecca Jokinen, Seth Whiting, and Christie Nutkins** (Central Autism Assessment and Treatment Centers, Central Michigan University)

Using a Random Stimulus Design with the PEAK Curriculum for Objective Analysis of Concept Mastery

The PEAK curriculum for academic and verbal skills has showed numerous benefits for children with autism. Mastery for each learning target within the curriculum, similar to other behavioral assessments, is based on the number of stimuli mastered and the judgment of the treatment provider. However, the number of stimuli trained doesn't imply concept mastery of the underlying skill and individual judgment is subject to bias. In the present study, we demonstrate the utility of the random stimulus experimental design with PEAK program 13K: Intraverbal "Wh" questions in allowing for objective analysis of concept mastery in treatment for a seven year-old boy with autism. Thirty non-mastered "Wh" questions were randomly divided into six groups. In the random stimulus design, groups of probe stimuli were presented without reinforcement or error correction as a baseline, and were alternated with groups of training stimuli which were presented with reinforcement for correct

responses and correction for incorrect responses. Response accuracy during probe sessions were low (0-10%), and all three groups of training stimuli were mastered (two consecutive sessions scoring 80% or higher) in six to ten sessions. One group of probe stimuli were then trained to criterion, which required only three sessions, indicating a faster learning rate than the previous training groups and suggesting mastery of the overall concept. The benefits of the random stimulus design in autism practice with the PEAK curriculum including avoiding repeated exposure of stimuli, replicating teaching effects, and objectively judging concept mastery are discussed

- 3. Hugo Curiel, M.A., BCBA; Anita Li, M.S., BCBA; Kourtney Bakalyar, M.A., BCBA; Jessica Frieder, Ph.D., BCBA-D; Alan Poling, Ph.D., BCBA-D; and Andrea Miller** (Western Michigan University)

Increasing Physical Activity in College Students with Autism Spectrum Disorder

The consequences of sufficient physical activity have long been reported to have a variety of benefits such as decreased risks of developing cardiovascular diseases, diabetes, osteoporosis, and some cancers (Centers for Disease Control and Prevention [CDC], 2015; Sandhu, Shafiq, & Singh, 2013; Srinivasan et al., 2014; World Health Organization [WHO], 2016), while having a positive impact on mental health (CDC, 2015; Sandhu, Shafiq, & Singh, 2013). An overwhelming number of adults in the United States have failed to meet the prescribed recommendations, with approximately 20% meeting the recommendations (CDC, 2013). Unsurprisingly, the lack of physical activity is also prevalent among college students. According to the American College Health Association-National College Health Assessment (ACHA-NCHA), only 45.4% of the sampled students engaged in the prescribed recommendations for aerobic activity (ACHA-NCHA II, 2016). In an attempt to increase aerobic physical activity among college students with autism spectrum disorder (ASD), a goal-setting and peer-pairing treatment package was implemented and evaluated with a multiple-baseline-across-participants design. The participants' goals were individualized and systematically increased throughout the course of the study. The paired-peers provided daily goal reminders and met with their assigned participant on a weekly basis. The data suggest that goal-setting and peer-pairing were effective in increasing levels of physical activity for two out of three participants.

- 4. Brian Davis, Michael Brooks, and Seth Whiting** (Central Michigan University)
A Comparison of Typical Percent Correct Scoring Systems and the PEAK Scoring System

Common measures of response accuracy, such as percent correct responses, are often simple and easy to train and implement, but fail to reveal smaller but important advances in learning. The scoring system of the PEAK Relational Training System allows for tracking of prompt level and may be more sensitive to progress with little added effort. The goal of the current study was to demonstrate the increased utility of the PEAK scoring system over the common percent correct scoring system. Study

1 assessed the reliability of the PEAK scoring system by examining inter-observer agreement on PEAK scores following minimal training of the observers. Study 2 examined differences in the judgements of programs by clinicians following visual inspection of graphs generated using the PEAK system and the percent correct system. Finally, study 3 involved examining the usefulness of the PEAK system in depicting acquisition of new skills by collecting data on the acquisition of a new behavioral skill program with both the PEAK scoring system and the common percent correct system, and comparing the graphs of the resulting data. Results from our studies suggest that the use of the PEAK scoring system offers considerable benefits over the typical percent correct scoring system.

5. Amelia M. Fonger, M.A., BCBA and Richard Malott, Ph.D., BCBA-D (Western Michigan University)
Teaching Eye Contact and Responding to Name to Lower-Performing Children with Autism

Eye contact and other attending responses are common targets within early intensive behavioral intervention curricula because failure to acquire these skills may negatively impact future rate of acquisition in educational settings (Carbone, O'Brien, Sweeney-Kerwin, & Albert, 2013). Within the group of children receiving early intervention services, a small percentage does not respond to standard methods of teaching (Sallows & Graupner, 2005; Lovaas, 1987; Birnbrauer & Leach, 1993). These students face various barriers to learning including a limited variety of reinforcers, faulty stimulus control, and limited prerequisite skills that could account for the ineffectiveness of standard teaching methods. Past research has investigated standard interventions for teaching eye contact and attending behaviors, however, limited research has focused on what to do when these standard methods are ineffective or undesirable given a child's learning history (Foxy, 1977; Greer & Ross, 2008; Helgeson, Fantuzzo, Smith, & Barr, 1989; Lovaas, 1977; Lovaas, 1981; Mirenda, Donnellan, & Yoder, 1983). This study identified four children in an early childhood special education classroom who had difficulty mastering some of the fundamental skills necessary to be successful in the classroom (e.g., eye contact and responding to name). Shaping, differential reinforcement, and pairing were used to increase the frequency and duration of eye contact and to teach the children to respond to their name.

6. Sydney Harbaugh, M.A.; Allison Beveridge, B.S.; Kelly Kohler, Ph.D., BCBA-D; and Richard W. Malott, Ph.D., BCBA-D (Western Michigan University)
Attempts to Reduce Elopement Using Blocking, a Time-Out Procedure, and Differential Reinforcement

The present study aimed to decrease elopement in a child diagnosed with autism to better prepare him for community outings. Elopement was identified as the main concern from his family. The participant was five years old and received four years of discrete-trial training before transitioning to a special education kindergarten classroom. The existing literature addressing elopement is limited, however some studies have found differential reinforcement and blocking to be effective

interventions for decreasing elopement (Piazza, 1997; Call, 2011). The intervention used in this study was a treatment package that combined social reinforcement, blocking, and a time-out procedure. Sessions were conducted at various locations in the community such as parks, grocery stores, and walking trails. Elopements were decreased to near zero levels using the above mentioned treatment package. Performance maintained after removing praise from the intervention package, suggesting that the time-out procedure and blocking were the more crucial variables.

7. Hilary Barns, M.A., BCBA and Britany Melton, M.Ed., BCBA (LOGAN Autism Learning Center)

The Use of DRO and Functional Communication Training to Reduce Self-Injury

Differential reinforcement of other behavior and functional communication training were implemented with an adolescent male diagnosed with Autism who engaged in high rates of Self-Injury. The client's self-injury was forceful hitting and biting; he would repeatedly hit himself in the head with an open or closed hand, and bite his right forearm. Biting resulted in severe tissue damage such as bleeding and callouses. Through a functional behavior assessment it was determined that the self-injury was predominately maintained by access to tangible and edible items as well as escape from task demands. A preference assessment was conducted and the client's highest preferred tangible was IPAD. The DRO was implemented and the client was allowed to earn IPAD for refraining from self-hitting and self-biting. The client was also taught to ask for a break in place of engaging in self-injury. At Baseline, the client was engaging in an average of 90 hits per day, and 11 bites per day. After implementation of DRO and FCR, the client's average rate of self-injury was 10 self-hits per day and 9 self-bites per day; this is an overall reduction of 82% in self-injurious behavior.

8. Jeremy Jamieson, Brian Davis, Christie Nutkins, and Seth Whiting (Central Autism Assessment and Training Centers, Central Michigan University)

A Case Study in Assessment and Verbal Skills Training in a Boy with Autism Using the VB-MAPP

The Verbal Behavior Milestones Assessment and Placement Program (VB-MAPP) is one of the field's leading tools for assessing skill development, behaviors challenging to academic development, and readiness to transition to more intensive learning settings with children with autism. Using assessment tools such as the VB-MAPP along with the use of discrete trial training have been shown to significantly increase the performance of many skill acquisition tasks. We provide a training case study based on using the VB-MAPP along with discrete trial training in autism services highlighting key targets. The participant, a seven year-old boy diagnosed with autism, demonstrated delays in intraverbal, tact, and listener responding repertoires in an initial VB-MAPP assessment. The current case study shows the skill acquisition via discrete trial training for intraverbal "who" and "what" questions, fill-in-the-blank questions, tacting actions, and performing actions via verbal instruction. Training in each program included providing clear opportunities for the individual to engage in target behaviors and positive reinforcement for doing so

accurately. Across all of these skills, data show a quick and significant increase in performance, both on accuracy measures in each program and within overall VB-MAPP scores. Implications for using behavioral assessments and the VB-MAPP to guide treatment development will be discussed.

9. **Kayla Jenssen, B.S.; Rebecca Kolb, M.A.; Kellie Skiba, B.S.; Kourtney Bakalyar, M.A., BCBA; Jessica E. Frieder, Ph.D., BCBA-D; and Alan Poling, Ph.D., BCBA-D** (Western Michigan University)
Summer Transition Program: Promoting a Successful Transition from High School to College for Students with ASD

The Autism Services Center (ASC) at Western Michigan University is providing supports for students with Autism Spectrum Disorder (ASD), in addition to those provided by the Disability Services for Students (DSS). Because impairments in social interactions, communication, organization, and independent living skills act as barriers for young adults with ASD who desire a job or to attend a university, the ASC, in partnership with Michigan Rehabilitation Services (MRS), developed the Summer Transition Program for high school juniors and seniors with ASD. The goal of this program is to provide instruction needed for a successful transition to college or employment, through a variety of on-campus experiences. This summer, student on-campus experiences included taking a 3-credit WMU course, participating in a College Experience Course and weekly social skills workshops, working in paid on-campus employment positions while receiving job coaching to development employment skills, and living in the residence hall for the duration of the semester. Services provided by the program were based in an explicit instruction model, which provided students with multiple opportunities to view models, practice and receive feedback on their skills to become successful in educational and employment settings. One of the main goals of the program is a focus on students' classroom performance. Video modeling was used as an instructional tool to promote skill acquisition within this setting. Data on classroom performance before and after third-person video modeling was measured. Third-person video models were created to identify examples and non-examples of adaptive classroom behaviors. Social acceptability measures to assess student perception of the video modeling intervention as a class-wide instructional tool will also be presented.

10. **Cody Morris, M.A. and Stephanie Peterson, Ph.D., BCBA-D** (Western Michigan University)

The Effects of Electronic Data Collection, Immediate Graphic Feedback, and Automated Scheduled Prompts on Data Collection Adherence

While data are essential to behavior analysis, collecting the type of data that behavior analysts often require can be a labor-intensive and time-consuming task. There have been many attempts to reduce the amount of time and effort required to collect behavioral data; most recently research in this area has been focused on computerized or electronic ways to do this. While electronic data collection seems to be gaining popularity within applied behavior analysis, many obstacles still exist. The purpose of this project was to design a data collection system that was cost-efficient,

adaptable, easy to use, and effective at increasing data collection adherence. This study used a customized data spreadsheet with embedded immediate graphic feedback using the Microsoft Excel® app and automatic scheduled prompts using a calendar app. This study used an A-B design to examine the effects of an electronic data sheet, immediate graphic feedback, and automated scheduled prompts on data collection adherence.

11. Shelby Muhn, Alesha Bove, Seth Whiting, and Christie Nutkins (Central Autism Assessment and Treatment Centers, Central Michigan University)

Effects of Function-Based Behavior Reduction Procedures for Aggression in Autism

Aggressive behaviors often interfere with learning, safety, and transitions into general education. While common behavior reduction procedures such as timeout are often effective in reducing problem behaviors in this population, reductive procedures addressing behavioral function are often more effective. The purpose of the present study was to examine the effects of standard timeout and a function-based intervention on the aggression of a 3-year-old boy with autism. During baseline, significant aggression occurred approximately 4 times per day. Next, standard timeout resulted in little improvement. Functional assessment then indicated aggressive behaviors were maintained by escape from demands. The second intervention included academic demands during timeout, and quickly reduced aggression to approximately 0.6 occurrences per day, suggesting that autism service providers should consider function-based treatments.

12. Denesha Sangster and Meaghan M. McCollow, Ph.D., BCBA-D (Central Michigan University)

Antecedent Strategies for Young Children with ASD: A Review Across Service Providers

Young children diagnosed with ASD receive treatment from a wide variety of service providers. This presentation will provide a discussion of the antecedent strategies utilized by these service providers, highlighting the similarities and differences across fields, especially education, applied behavior analysis, and speech-language pathology, involved in the treatment of ASD.

13. Kasey Weston, Alesha Bove, Christie Nutkins, and Seth Whiting (Central Autism Assessment and Treatment Centers, Central Michigan University)

Naturalistic Mand Training to Start Language and Communication Development in a Nonverbal Child with Autism

We present a case study in establishing a beginning verbal repertoire in a three-year old nonverbal boy with autism. Initially, the child had limited vocal sounds with no communication to adults or peers. He also showed little eye contact and frequently withdrew from others. As a part of intensive autism services consisting of three days of therapy per week, he participated in a naturalistic verbal behavior training program to establish basic requests, or mands. Naturalistic verbal behavior training targeted sign language and verbal speech. While allowing the child to guide the

direction of each session, clinicians used incidental teaching opportunities to arrange the environment for the child to emit mands. Each session began by assessing which items or toys the child was interested in most that day. By saying, “my turn” and taking and holding the current toy of interest in view, the clinician created motivation to gain the item. The child would then need to emit an approximation of the correct sign or verbal response to receive the toy. Reinforcement was immediately provided during the session contingent on the emission of the appropriate sign or an approximation of the vocal response. This was done repeatedly throughout the day with multiple toys and items. Over four months of therapy, the child’s mand repertoire increased from 0 to 30 independent vocal or sign-language mands. Program implementation, feasibility, and future directions will be discussed.

- 14. Rebecca Wiskirchen, M.A., BCBA; Denice Rios, M.A., BCBA; Yannick Schenk, M.A., BCBA; Stephanie M. Peterson, Ph.D., BCBA-D; and Kristin Cyrul, LMSW, BCBA** (Western Michigan University, The Children’s Center)

The Effects of a Remote Behavioral Skills Training Package on Staff Performance in Conducting Functional Analyses

The present study seeks to extend the current literature on utilizing behavioral skills training (BST) to teach practitioners how to implement functional analyses (FA). Using a multiple baseline design across participants, this study will measure the effects of using a remote BST package on accurate implementation of FA procedures. Specifically, researchers will use the latest HIPAA-secure teleconsultation technology and BST when training practitioners who have no previous training in FA methodologies. Each participant will experience four phases, which include baseline (only instructions with simulated clients), BST (instructions, modeling, rehearsal, and feedback with simulated clients), post training probes (probes with simulated clients), and generalization probes (probes with actual clients). We will evaluate the effects of a remote BST package on levels of performance in simulated conditions as well as the effects of the remote BST on performance in generalization probes with actual clients.

- 15. Katie Mattox, M.A., BCBA and Kelsey Ruffin, B.A.** (Building Bridges Therapy Center)

Teaching Reciprocal Conversations Using Video Modeling to a Child Diagnosed with ASD

Communication is one of the core deficits of ASD and is an essential skill in learning about and forming relationships. Video modeling was used as the intervention to teach a child to engage in reciprocal conversations. Baseline data shows that this child had extremely limited reciprocal conversational skills. Three scripts were taught during the intervention phase and video modeling was shown to be an effective intervention with this child. Additionally, these reciprocal conversations have maintained over time and have generalized across people and settings.

Friday, September 16


Use this color-coded chart to find each room on the map and to determine the location of each presentation. A map is located at the back of your program.

Lobby	Arcadia Ballroom	Glens 1 & 2	Glens 3
7:00 - 8:00	Registration		
8:00 - 8:30	Announcements		
8:30 - 9:20	Anthony Ianni <i>Dreams, Goals, and Aspirations</i>		
9:30 - 10:20	Bruce Thyer <i>Evidence-Based Practice: Myths and Realities</i>		
10:30 - 11:20	Lorri Unumb <i>Favors, Facts, & Fishnets: Shaping Autism Law and Policy</i>		
11:30 - 1:00	Lunch (on your own) - <i>please visit the Discover Kalamazoo table for a list of local restaurants</i>		
1:00 - 2:20	Josh Plavnick ♦C, ■E	Chaturi Edrisinha ♦C, ■E, ●R	Excelling as a Supervisor** ♦C
2:30 - 3:20	Poster Session 2 Exhibit Expo and Bookstore		
3:30 - 4:20	Matthew Brodhead ♦C, ●R	Heather McGee ♦C	Kate LaLonde ♦C
4:30 - 5:20	Mandy Rispoli ♦C, ■E	Christie Nutkins ♦C, ■E	Bruce Thyer ♦C

Friday, September 16

Use this color-coded chart to find each room on the map and to determine the location of each presentation. A map is located at the back of your program.

Prairies 4 & 5	Prairies 6	Stone Theatre	Kalamazoo Room
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Continental Breakfast			7:00 – 8:00	
	Exhibit Expo and Bookstore		8:00 – 8:30	
			8:30 – 9:20	
			9:30 – 10:20	
			10:30 – 11:20	
Lunch (on your own) – <i>please visit the Discover Kalamazoo table for a list of local restaurants</i>			11:30 – 1:00	
Ethics of Punishment** ◆C, ■E ▲P	ABA In Schools** ■E	Bodine, Dewitt, & Thomas ▲P	1:00 – 2:20	
Poster Session 2 Exhibit Expo and Bookstore		Exhibit Expo and Bookstore	2:30 – 3:20	
Michael Hixson ◆C, ■E	Angela Fish ◆C		Jessica Korneder ▲P	3:30 – 4:20
Jamie Owen- DeSchryver ◆C, ■E ▲P	James Todd ◆C		Sean Casey ◆C	4:30 – 5:20

****Symposium with multiple presenters.**

Please turn the page for more information about each event.

Friday, September 16

Continental Breakfast

7:00 a.m. – 8:00 a.m.; Lobby

Please enjoy a special continental breakfast this morning. Remember to stop by the CEU table if you need CEUs, and check out the Information Table to learn more about things to do in Kalamazoo. The Exhibitor Expo and bookstore will also be open during this time!

Opening Remarks

8:00 a.m. – 8:30 a.m.; Arcadia Ballroom

Please join us for opening remarks after you enjoy our continental breakfast. Important announcements will be delivered at this time as well.

Thank you for joining us at the Michigan Autism Conference!



Save the Date
Join us for the 5th Annual
Michigan Autism Conference
Thursday, October 12th &
Friday, October 13th
Pre-Conference Workshops
& Kick-Off Event
Wednesday, October 11th

Michigan Autism
MAC
Conference

Friday, September 16

Keynote Addresses

8:30 a.m. – 9:20 a.m.; Arcadia Ballroom

Anthony Ianni, B.A. (Michigan Department of Civil Rights and Michigan State University)

Anthony Ianni is one of the most sought after motivational speakers in the Nation. At the age of 4, Anthony was diagnosed with Pervasive Developmental Disorder (PDD), which is on the Autism Spectrum (ASD). Doctors and specialists told Anthony's parents that he would barely graduate from high school, would never graduate from college, would never have a shot at being an athlete and would likely live in a group institution with other Autistic kids for his adult life. His family was devastated but pledged they would help Anthony be successful no matter what, and he is. Despite bullies, adversity & numerous personal challenges Anthony worked hard & never gave up. Not only did he earn his Bachelor's Degree from Michigan State University in Sociology, he is the first Division 1 Basketball Player in NCAA History with Autism. Anthony played for legendary coach Tom Izzo. He won two Big Ten Championships, a Big Ten Tournament Title, was the recipient of the 2011 Tim Bograkovs Walk On Award & the 2012 Unsung Player Award, and was a member of the 2010 Final Four team. He is the recipient of 2014 Epling Agent of Change Award, Finalist for the 2013 Detroit Pistons Game Changer Award, was named by Autism Speaks as 1 of 10 People with Autism who inspired 2014, was named one of CBS News's Inspiring Individuals on the Autism Spectrum. Anthony has pledged his life & career to help those who face similar challenges. He has been invited to tell his story & share his message across the country & has inspired countless individuals to Live Your Dreams.



Dreams, Goals, and Aspirations

This presentation will provide the audience with an overview of Anthony's life, his challenges and his successes. The speaker will talk about autism and how it has impacted his life and how he has utilized the support and resources around him to get where he is today. Anthony will talk about the role of education, coaches and teachers in his life as well as that of family. The audience will be inspired to find their hope and motivation and to be that for others.

9:30 a.m. – 10:20 a.m.; Arcadia Ballroom

Bruce A. Thyer, Ph.D., BCBA-D, LCSW (Florida State University)

Dr. Thyer is a Board Certified Behavior Analyst – D, and a professor of social work at Florida State University. He is a past-member of the Editorial Board of the Journal of Applied Behavior Analysis, and has been a member of ABAI-International since 1979. He has served on the Executive Committees of Division 25 (Behavior Analysis) of the American Psychological Association and of the Association for Professional Behavior Analysts. Holding degrees in both social work and psychology, Dr. Thyer's academic focus has been on promoting behavior analysis within the large field of social work. He is a Fellow of the American Psychological Association, the Association for Psychological Science, the American Academy of Social Work and Social Welfare, and the Society for Social Work and Research. He has authored over 50 articles and chapters related to behavior analysis, and edited two books in our field, *The Philosophical Legacy of Behaviorism* (Kluwer, 1999), and *Finding Solutions for Social Problems: Behavioral Strategies for Change* (APA, 1996). His most recent books are *Science and Pseudoscience in Social Work* (Springer, 2015) and *Program Evaluation: An Introduction to an Evidence-based Approach*, 6th edition (Cengage, 2015).



Evidence-Based Practice: Myths and Realities

The term evidence-based practice (EBP) is often confused with the act of locating treatments which have been well-supported through past research studies, and then deciding to apply these treatments to one's work with clients. This latter model formally originated within psychology and can be called the Research-Supported Treatments (RST) initiative, and is sponsored by Division 12 (Clinical) of the American Psychological Association. EBP is a quite different approach, originating in medicine, and includes many other considerations in choosing assessment and treatment options. These other central elements include client preferences and values, professional ethics, costs, one's own clinical expertise, available resources, all of which are valued equally with research evidence. This generic clinical decision making model of EBP has been widely adopted in many health and social care professions and is having a major impact on both services and education. This presentation will review the history and development of both EBP and ERSTs, and suggest why the RST approach is a far more limited model of practice than EBP. EBP is quite congruent with behavior analysis, and the parallels between the two fields will be illustrated.

10:30 a.m. – 11:20 a.m.; Arcadia Ballroom

Lorri Shealy Unumb, J.D. (Vice President, State Government Affairs, Autism Speaks)

Lorri Unumb is a lawyer, professor, and the mother of three children – Ryan (15), who has classic autism; Christopher (12); and Jonathan (8), who has Asperger's. In 2005, she wrote ground-breaking autism insurance legislation for South Carolina ("Ryan's Law") that served as the catalyst for the national autism insurance movement.

Lorri began her autism advocacy as a volunteer. In 2008, she was recruited by **Autism Speaks** to work full-time and has since testified more than 100 times on health insurance issues around the country.

For her advocacy efforts, Lorri has been recognized with many awards including:

- BACB's Michael Hemingway Award;
- California Association of Behavior Analysts "Leadership in Law" Award;
- APBA "Jerry Shook" Award; and
- NASCAR Foundation's Betty Jane France Humanitarian Award.

Lorri's work has been profiled on CNN, on NPR's "Morning Edition," and in *Town&Country* magazine, from whom she received one of three 2009 "Women Who Make a Difference" awards. She is profiled in the American Academy of Pediatrics book "Autism Spectrum Disorders: What Every Parent Needs to Know."

Following law school, Lorri clerked for a federal judge and then enjoyed a fulfilling career as an appellate litigator with the United States Department of Justice. She left DOJ to become a law professor at George Washington University Law School and later served as an inaugural faculty member at the Charleston School of Law. While in Charleston, she hosted a weekly TV show called "The Law with Professor Lorri." Lorri teaches a course at GW Law called "Autism and the Law." She and her husband wrote the first-ever comprehensive textbook on legal issues related to autism, also called "Autism and the Law." She also founded the Autism Academy of South Carolina in 2011.



Favors, Facts, & Fishnets: Shaping Autism Law and Policy

In 2004, the New York Times wrote that "no disability claims more parental time and energy than autism." Families dealing with autism face many hardships, not the least of which is financial hardship. One reason for the financial hardship is the failure of the health insurance industry to cover treatments for, and sometimes even diagnosis of, autism. As recently as the turn of the millennium, it was widely accepted that health insurance did not cover even the standard treatments for autism.

Since 2007, there has been a fast-moving national movement toward autism insurance reform. More than 40 states have now enacted legislation requiring insurers to cover autism interventions, including ABA. In this session, we will examine the language of the autism insurance laws, including a comparison of their key terms and features. We

will learn about the different types of public and private health insurance plans, with a particular emphasis on recent activity in Medicaid policies. We will discuss potential pitfalls that consumers may face when attempting to utilize benefits. Finally, we will talk about effective strategies for influencing autism-related policy decisions.

Lori Unumb will be introduced by the Little Star Center. Michigan Autism Conference would like to thank the Little Star Center for their generous sponsorship of this year's conference!

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Friday, September 16

Breakout Sessions

◆C — Recommended for clinic/center-based practitioners

■E — Recommended for educators

●R — Recommended for researchers

▲P — Recommended for parents/caregivers

1:00 p.m. – 2:20 p.m.; Arcadia Ballroom

◆C, ■E

Josh Plavnick, Ph.D., BCBA-D (Michigan State University)

Checklists, Timers, and Other Tools to Help You Implement Evidence-Based Behavioral Programs

Despite the identification of numerous evidence-based practices for use in educational and behavioral service settings with individuals with autism spectrum disorders (ASD), many of these practices are not implemented or are implemented with varied levels of fidelity to the original practice. The current presentation outlines the issues that can arise for consumers who receive sub-standard behavioral interventions and provides a series of simple strategies and readily available tools service providers can use to increase accurate implementation of evidence-based practices when serving individuals with ASD. Multiple examples of effective self-management strategies and tools for public educators, paraprofessionals, behavior technicians, and behavior analysts will be presented, as will examples of ineffective strategies and tools. At the conclusion of the session, participants will be able to select, devise, and deploy a number of procedures that support high quality implementation of evidence-based practices.

1:00 p.m. – 2:20 p.m.; Glens 1 & 2

◆C, ■E, ●R

Chaturi Edrisinha, Ph.D., BCBA-D (Oakland University)

Leisure Skills and Quality of Life

Recreation and leisure are considered vital to sustain the quality of life for human beings. "Recreation" could be defined as an activity that people engage in for the primary purpose of enjoyment and satisfaction. The term "leisure" describes one's perception that one is free to choose and participate in meaningful recreation. Since the early 1990's Dattilo and Schleien argued that (a) all human beings have a right to engage in leisure activities and, (b) that services provided to adults with developmental disabilities should offer these individuals opportunities to engage in such activities. And yet, a quick survey of the recent number of studies that have examined recreation and leisure for adults with Autism Spectrum Disorders (ASD) and other developmental disabilities (DD) reveal only a handful of studies have tried to address this issue systematically. In fact, recent studies indicate that adults with disabilities engage in very few leisure activities. One study found that on a typical weekend, persons with ASD/DD spend less than 4 hours in leisure activities. This presentation will discuss some of the recent work in teaching leisure skills to adults with ASD/DD and discuss some ways in which we can continue to improve the quality of life for all persons.



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Symposium – Excelling as a Supervisor

Chair: Luke D. Lubbers, B.S. (Western Michigan University)

Jeana Koerber, Ph.D., BCBA-D (The Great Lakes Center for Autism Treatment and Research)

Teaching Supervisees How to Teach Individuals with Challenging Behaviors

Supervising potential BCBA's places responsibility on the supervisor to ensure ethical and appropriate experiences. When dealing with individuals who have challenging behaviors, the supervisor must ensure that supervisees can safely perform their tasks and understand the difference between treatment and crisis management. This portion of the discussion will discuss these issues, along with the targets supervisors should focus on when teaching supervisees about functional behavior assessments and treatment of challenging behaviors.

Deborah Grossett, Ph.D., LP, BCBA-D (The Shape of Behavior)

Supervising Behavior Technicians

As the need to for BCBA's increases, the role of behavior analysts has shifted from direct clinician to more of a supervisory capacity. BCBA's may not have had formal training in organizational behavior management, but are now faced with new job duties. Ethically it is the responsibility of the BCBA to provide proper supervision to Behavior Technicians implementing treatment plans. Advantages and concerns regarding service-delivery models with BCBA's providing direct and indirect supervision will be addressed. Ongoing training, observations, feedback, and reinforcement systems are essential for weekly supervision of RBT's and front-line staff by the BCBA. Employment of a performance assessment tool is recommended to monitor the outcome of ongoing supervision.

Kate LaLonde, Ph.D., BCBA-D (Michigan State University/The Early Learning Institute)

Supervising Budding Behavior Analysts: The Role of the Mand and the Tact

Behavioral skills training is an effective way to teach students of behavior analysis to implement various behavior analytic interventions (e.g., Parsons, Rollyson, & Reid, 2012). After a student has demonstrated mastery of an intervention, it is likely that they will continue to receive on-going feedback during in vivo teaching sessions. Immediate, direct feedback is effective for maintaining high procedural integrity of interventions (Coddington, Feinberg, Dunn, & Pace, 2005); however, it is unclear if such feedback improves a supervisee's ability to verbally explain behavioral principles and processes (e.g., stimulus control). Therefore, it is important to provide quantitative (e.g., percentage of correct implementation) and qualitative (e.g., differential reinforcement) during feedback sessions and to ensure the supervisee understand behavioral mechanisms. The current presentation will highlight the importance of supervisor's mands for

information from their supervisees and the importance of the supervisees to tact his or her own behavior and to tact the functional relations observed during teaching sessions. Increasing supervisor's mands and supervisee's tacts during feedback sessions provides at least three possible outcomes. It allows the supervisor to provide differential reinforcement compared to corrective feedback, it allows the supervisor to assess the supervisee's verbal skills about behavioral principles and interventions, and it allows the supervisor and supervisee to conduct mini assessments that teach the supervisee the importance of continual assessment and treatment.



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Dave Manson, M.A., Ed.S. (Van Buren Intermediate School District); **Shawn P. Quigley, Ph.D., BCBA-D** (University of New Mexico Medical Group – Center for Development and Disability); and **Amy Helmuth** (Parent of a Child with Autism)

Ethics of Punishment: What Can We Learn From Research About Crisis Management Procedures?

Parents and professionals, at times, support children and adults who are at risk of harm to themselves or others. The risk might be aggression toward the parent, professional or others that results in injuries (e.g., bruises, cuts, broken bones). It might be self-injury such as head-banging or eye-gouging. It might also be running into a crowded intersection. Many treatment models attempt to reduce the likelihood and level of risk of these types of situations, but there are times when such situations occur. Parents and professionals are hopefully trained to use crisis management procedures to reduce the current situation. However, how do parents and professionals decide which crisis management procedure is likely to reduce the risk? Which crisis management procedure will reduce the risk of harm to the individual and others? These are just a few questions related to crisis management procedures. The purpose of this presentation is to provide evidence from the research literature that has addressed these questions.

Symposium – ABA in Schools

Chair: Austin Seabert, B.A. (Western Michigan University)

Amy Matthews, Ph.D., BCBA (Grand Valley State University and START Project)

Applied Behavior Analysis in Schools

This presentation will include a discussion of ways to scale up applied behavior analysis (ABA) and evidence-based practices (EBP) in schools across the state of Michigan to provide the most effective learning and behavior support to students with autism spectrum disorders (ASD). To improve post school outcomes for students with ASD, school-based teams need training, information, and resources to implement and monitor behaviorally-based practices with fidelity. With over 1,000 public school buildings, including public school academies, and close to 18,000 students with ASD, it is important to consider how to bring ABA and EBP to all schools serving students with ASD. Issues to be discussed related to ABA in schools include limited expertise in ABA, lack of coaching and feedback following training in ABA, consideration of match between the school context and behaviorally-based practices, challenges associated with limited resources, competing initiatives, belief systems, establishment of systems for implementation of practices with fidelity, and accountability for student progress as demonstrated through data. In order to expand the implementation of ABA in schools, a collaborative approach is needed that includes professionals across education and outside the educational system.

Laurie Montgomery, Ed.S. (Western Michigan University)
Assistant Superintendent for Special Education

Share the long standing collaboration between WMU psychology department and KRESA. WMU student practicum with preschool children with ASD. Intensive early intervention services.

Dave Manson, M.A., Ed.S. (Van Buren Intermediate School District)
Assistant Superintendent for Special Education

VBISD has developed a partnership in collaboration with WMU whereby BCBAs and BCBA's in training are incorporated in the public school system to assist students and train staff in the utilization of ABA techniques. Particular focus is given on the use of universal strategies, the completion of functional behavior assessments and positive behavior support plans. Both public school staff and WMU students learn from the reciprocal relationship.

1:00 p.m. – 2:20 p.m.; Stone Theatre

▲P

Kris Bodine, M.A., BCBA; Nikki DeWitt, M.A., BCBA; and Betsy Thomas, M.A., LLP, BCBA (Logan Autism Learning Center)

Catch 'Em Being Good: How Caregivers Can Increase Desirable Behaviors in the Home

Caregivers may not have the time or resources to identify the precise function of challenging behaviors in the home. However, you can oftentimes reduce challenging behaviors by increasing desirable behaviors. This presentation will provide caregivers some tools to easily and effectively increase desirable behaviors.

2:30 p.m. – 3:20 p.m.; Kalamazoo Room

Reception, Poster Session 2, and Exhibit Expo

Please see Pages 64 and 72 for a complete list of posters and exhibitors. The Michigan Autism Conference would like to thank the Great Lakes Center for Autism Treatment and Research for their sponsorship of this afternoon's free beverages.

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3:30 p.m. – 4:20 p.m.; Arcadia Ballroom

◆C, ●R

Matthew T. Brodhead, Ph.D., BCBA-D (Michigan State University)

◆C, ●R

How to Systematically Evaluate Treatments for Autism That Lack an Evidence Base

With over 400 treatments for autism, behavior analysts are sometimes placed in a position where they must monitor the effects of alternative or ancillary treatments that lack an evidence base. Behavior analysts must be mindful about how they evaluate treatments that lack an evidence base in order to determine whether or not they produce desired outcomes. This presentation will provide an overview of research methods to evaluate such treatments and will highlight notable research studies that evaluated questionable treatments (e.g., weighted vests and sensory integration) for individuals with autism.



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3:30 p.m. – 4:20 p.m.; Glens 1 & 2



Heather McGee, Ph.D. (Western Michigan University)

Task Analyzing Complex Staff Performance

Training and monitoring staff performance requires first determining exactly what the performance should look like and how it should be done. This can be a difficult challenge when the desired performance involves problem solving or decision making processes. This presentation will describe a process and tools for breaking down complex performances, including those involving problem solving or decision making, into trainable and measurable components.

3:30 p.m. – 4:20 p.m.; Glens 3



Kate LaLonde, Ph.D., BCBA-D (Michigan State University)

Increasing Physical Activity in Individuals with Autism

This presentation will outline two experiments that evaluated behavioral intervention on physical activity in young adults with ASD. The first experiment employed a multiple-baseline-across-participants design with a reversal design to determine the effects of a treatment package on the number of daily steps measured using a pedometer. During treatment, participants set individual goals and received reinforcers for meeting those goals. By the end of each treatment condition all participants were successfully meeting their goals and walking at least 10,000 steps per day. These findings suggest that behavioral intervention can substantially increase walking in individuals with ASD. Experiment 2 extended the findings in three ways. First, participants wore the pedometer in less structured settings (i.e., nights and weekends) to see if the treatment would be as effective in natural settings. Second, self-monitoring was evaluated to determine if participants could manage their goal independently and if doing so would maintain high levels of walking. Lastly, participant's weight was measured to see if the intervention would lead to weight loss. Results suggest that self-monitoring can be effective at maintaining steps, but reinforcers may need to be periodically provided. Additionally, participants' weight decreased during the experiment. Suggestions for how behavior analysts can incorporate behavior analytic interventions into programming for all ages will be discussed.

3:30 p.m. – 4:20 p.m.; Prairies 4 & 5



Michael Hixson, BCBA-D (Central Michigan University)

Reading Assessment and Intervention for Children with ASD or an Intellectual Disability

Reading is considered the most important academic skill children learn in school. Although children with ASD or an intellectual disability may demonstrate slower and more variable progress in learning early reading skills, current research on phonics instruction indicates they can make progress when taught prerequisite skills and provided with appropriate instruction. Some children with ASD may need no or only minor modifications of instructional procedures to learn to read. Others may require very intensive instructional procedures. In this presentation issues, procedures, and curricula pertaining to reading instruction for children with ASD or an intellectual disability will be discussed.



3:30 p.m. – 4:20 p.m.; Prairies 6



Angela Fish, LP (University of Michigan)

Modifying Cognitive Behavioral Therapy for Children and Adolescents with Autism Spectrum Disorder

Cognitive Behavioral Therapy (CBT) has been shown to be an effective form of treatment for ASD related difficulties in children and adolescents, including therapies to enhance social skills and decrease anxiety, depression, and behavioral problems. However, modifications to standard CBT programs are typically necessary to ensure effectiveness. This talk will focus on where the field is in terms of understanding the effectiveness of therapy in children and adolescents with high-functioning ASD. It will focus on the importance of assessment of strengths and weaknesses prior to treatment and common modifications to CBT treatments that have been shown to be effective in this population.

3:30 p.m. – 4:20 p.m.; Stone Theatre



Jessica Korner, Ph.D., BCBA-D (Oakland University)

Models for Caregiver Involvement – What is Best for You?

Parent training provides parents with specific techniques to manage behavioral problems in children (Bearss, 2015). Brightman, Baker, Clark, & Ambrose (1982), compared different parent training programs (individual, group based, or a delayed

training control group) to identify which, if any were more effective in improving children's self-help skills as well as improve their behavior problems. The results of this study indicate that both group parent training and individual parent training methods are effective. This presentation will focus on informing participants of the variety of models of caregiver training and involvement. The intention is to provide the participants with knowledge and resources so that they can advocate for a model that will work best for their resources, child, and family structure. Models that will be addressed are group parent training, individual training, and academic instruction. Within in each of those models, additional teaching strategies and interventions will be covered.

4:30 p.m. – 5:20 p.m.; Arcadia Ballroom

◆C, ■E

Mandy Rispoli, Ph.D., BCBA-D (Purdue University)

Conducting Accurate Functional Behavior Assessment in School Settings

Behavioral interventions developed from a functional behavior assessment (FBA) are more likely to be effective than interventions that are not function-related (Carr, 1994). Further, the quality and fidelity of FBAs are positively correlated with student educational outcomes including reduction in challenging behavior, increases in appropriate behavior, and improved academic performance (Cook et al., 2012). However, the quality and structure of FBAs in school settings can vary widely and often rely on the observations of outside personnel. This reliance on outside personnel leads to problems in the area of supply and demand, rushed FBAs, and intervention development that lacks contextual fit with the school or classroom environment (Loman & Horner, 2014). Preparing school personnel to conduct systemic FBAs with fidelity is one means of increasing school capacity to assess student challenging behaviors (Scott, et al., 2005). The purpose of this session is to provide an overview of a school-based functional behavior assessment model.

4:30 p.m. – 5:20 p.m.; Glens 1 & 2

◆C, ■E

Christie Nutkins, Ph.D., LP, BCBA-D (Central Michigan University)

Tips From the “Other-Side”: Enhancing Collaboration Between Clinic Providers and Schools

As both the number of children and the age of the children receiving applied behavior analysis services in Michigan increases, so too, does the need for effective collaboration between school and clinic providers. This session will provide examples of both positive and negative collaborative experiences along with strategies for improving collaboration based on the experience of a practitioner that has worked as both a school-based and clinic-based provider.

4:30 p.m. – 5:20 p.m.; Glens 3

◆C

Bruce A. Thyer, Ph.D., BCBA-D, LCSW (Florida State University)

Evidence-Based Practice and Social Work: It Is Not What You Think

The five-step clinical decision-making process known as evidence-based practice (EBP) emerged in the early 1990s and began influencing the profession of social work by the end of that decade. EBP reflects the integration of the current best research evidence with the client's preferences and values, professional ethical standards, available

resources, and the practitioner's expertise. This original EBP model of conducting clinical practice will be reviewed. Sometimes agencies, managers and supervisors select one or more supposedly research-supported treatments (RST), and require that their subordinate practitioners learn and adopt these given RSTs and provide them to their clients. This latter approach is quite distinct, and is indeed opposite, of the original model of EBP. EBP will be presented as a conceptually, scientifically, and professionally far more sophisticated approach to delivering clinical services than the use of mandated RSTs.

4:30 p.m. – 5:20 p.m.; Prairies 4 & 5

◆C, ■E, ▲P

Jamie Owen-DeSchryver, Ph.D. (Grand Valley State University, START Project)
Implementing Evidence-Based Practices to Improve Outcomes for Students with Autism Spectrum Disorders

This session will provide a brief overview of three evidence-based practices for students with ASD: self-management, peer-mediated instruction and intervention, and video modeling. The presenter will briefly review accessible web-based resources describing these evidence-based interventions and summarize three projects where these interventions were implemented for individuals with ASD. In the first study, a self-monitoring intervention was implemented via an iPad to improve social-communication skills for a high school student with ASD. The second study involved analysis of specific data targets (attendance, behavior referrals and GPA), for peer mentors who supported students with ASD in five high schools across Michigan. The third study involved the implementation of a video modeling intervention to increase play behaviors and play commenting in preschoolers with ASD. The presenter will summarize each of these studies, briefly review data and results, and offer relevant resources and research to help practitioners access further information about these interventions and how they may be used for a range of individuals with ASD. Additional references to articles and resources will be provided to participants.

4:30 p.m. – 5:20 p.m.; Prairies 6

◆C

James T. Todd, Ph.D. (Eastern Michigan University)
How an 18th Century Presbyterian Minister Taught Us (Almost) Everything We Need to Know About Evaluating Claims About Autism

Due to certain mathematical realities discovered about 250 years ago, rare conditions with variable presentations tend to have many solutions—virtually all of them ineffective, some of them dangerous. Autism is rare, presents itself in many different ways, and probably has more solutions than any other single condition—virtually all of them ineffective, some of them dangerous. Consider, for instance, “Miracle Mineral Solution” (MMS)—a bleach enema that people with no medical training are giving to small children. Unfortunately, the standard ways of detecting bogus treatment claims are not always helpful. They ignore these mathematical realities, assume that everyone has some kind of scientific training, and presume that scientists and non-scientists alike are immune to the kinds of biases that lead seemingly reasonable people to seemingly reasonable conclusions—that are totally wrong and actually unreasonable. This presentation shows how and why we sometimes come to believe in even the most

unlikely autism treatments, and offers some pragmatic methods that might be applied to detecting and rejecting not only the worst of them, but also the ones that seem promising but offer little or nothing. (Mathematics will be involved. But, only the good kind. Not the kind you got in middle school.)

4:30 p.m. – 5:20 p.m.; Stone Theatre



Sean Casey, Ph.D., BCBA-D (Heartland Pediatric Feeding Disorders Services)

Assessment and Treatment of Children with Feeding Problems

Treating children who display food refusal behavior can be a major preventative measure for later development of developmental disabilities. Applied behavior analysis (ABA) approaches have often been linked to success in the treatment of feeding disorders. Nevertheless, ABA approaches are seldomly utilized by many front-line interventionists who commonly provide therapy for children with feeding disorders. This workshop will delineate an ABA approach to assessment and treatment of children who display food refusal behaviors or whose diet is severely limited. Attendees of this workshop will learn a scope and sequence for treatment, how to develop appropriate, measurable goals to establish success or failure of current and future treatment efforts, and to determine when to refer children to programs that report the highest success rates. Implications for OTs and SLPs use of ABA approaches for assessing and treating feeding problems with young children will also discussed in detail.



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Friday, September 16

Reception and Poster Session 2

2:30 p.m. – 3:20 p.m.; Kalamazoo Room

Please join us for a special dessert and social hour as you enjoy visiting the posters! Michigan Autism Conference would like to thank the Great Lakes Center for Autism Treatment and Research for their generous sponsorship of this afternoon's free beverages!

1. **Alesha Bove, Allura Malcolm, Christie Nutkins, Michael Palmer, Marcel Kirberg, and Seth Whiting** (Central Autism Assessment and Treatment Center, Central Michigan University)

Drooling Reduction: The Implementation of Discrimination Training and Random Checks

Drooling is more frequent among children with ASD and other developmental disabilities when compared to typically developing peers. In this intervention, a variable time schedule was used to decrease instances of drooling in a four-year-old with ASD. Drooling consisted of saliva collecting on the lower lip or chin; during the intervention phase, a combination of verbal and modeling prompts to swallow were utilized to increase the child's self-awareness. Utilizing a withdrawal design, clinicians collected baseline and intervention data during play times. The data collected presented a significant decrease in instances of drooling. The results of this intervention suggest that the benefits derived from this intervention warrant further exploration and research.

2. **Kendra Combs, M.A., BCBA; Calvin Gage, M.A., BCBA; and Jeana Koerber, Ph.D., BCBA-D** (Great Lakes Center for Autism Treatment and Research)

Using Preference Assessments to Decrease Medical Non-Compliance

A case study report on using preference assessments to determine a medically appropriate item to reduce compliance with blood draws. Due to health issues of the client, each item's calories and carbs needed to be calculated and 30 items were included in the assessment. Non-compliance with procedures in the medication room have reduced from 40 minutes to 30 seconds, as a result of uncovering a preferred item to use as a reinforcer.

3. **Justin J. Daigle, M.A., BCBA, LBA; Corey Spala; and Richard W. Malott, Ph.D., BCBA-D** (Western Michigan University)

Comprehensive Practitioner Model

The Comprehensive Practitioner Model is a new research model for applied setting. It utilizes the underpinnings of the Practitioner Model suggested by Azrin (1977) while combining the application of Rothman and Thomas (1994). The goal of this model is to provide an applied research model that focuses on "outcome importance" rather than the "form" of the research design (Azrin, 1977). This format

allows us to look at the comprehensive treatment of splintered-skilled children while continuing to develop and implement experimental applications for treatment.

4. **Kate LaLonde, Ph.D., BCBA-D; Ana Dueñas, M.A., BCBA; Joshua Plavnick, Ph.D., BCBA-D; Richard Price, M.A., and Kate Fitzpatrick, B.A.** (Michigan State University)

An Evaluation of Two Tact Training Procedures

The current study used a repeated acquisition design to evaluate two tact training procedures on tact acquisition among children with autism spectrum disorders and the extent to which these training procedures led to tacting in a play-based context following discrete trial training. The two tact training procedures evaluated were presentation of the stimulus and presentation of the stimulus while asking, "What is it?" Participants were taught to tact stimuli under both intervention conditions. Unknown stimuli were divided into four sets and stimuli were assigned to one of the intervention conditions. Prior and immediately after each set, participants completed two types of probes; discrete trial training and a play-based probe to determine if learned tacts would be emitted in a context similar and dissimilar to intervention. Participant 1 learned tacts more quickly under the "Object Only" condition for three of the four sets, participant 2 learned tacts more quickly under the "Object + Question" for 3 of the 4 sets and participant 3 learned sets A and B faster under "Object + Question" and the last two sets faster under "Object Only." Performance during the discrete trial and play-based probes varied across participants, participant 1 showed similar performance, whereas participant 2 showed an increasing trend of tacting during the play-based probes and participant 3 tacted stimuli more often during the discrete trial probes. Results suggest clinicians may consider using multiple types of teaching arrangements when teaching tacts and teaching tacts in a variety of settings.

5. **Emily Gregori and Mandi Rispoli** (Purdue University), **Stephanie Gerow** (Baylor University), and **Samantha Guz** (University of Texas)
Interventions to Reduce Self-Injurious Behavior in Adults with Intellectual and Developmental Disabilities: A Systematic Review

This review summarizes studies that implemented non-pharmacological interventions to treat self-injurious behavior in adults with developmental disabilities. A systematic search of two databases yielded 41 studies that implemented behavioral interventions from 1995-2015. The studies were evaluated based on: (a) participant characteristics, (b) intervention, (c) functional assessment, (d) intervention implementer, (e) setting, (f) maintenance, and (g) generalization. A total of 81 participants were evaluated across the 41 studies. Interventions used to treat self-injury included: differential reinforcement, noncontingent reinforcement, and functional communication training. Results indicated that most interventions reduced self-injury.

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6. **Jenna Hicken, B.S.; Jesse Carrington, M.Ed., BCBA; and Jeana Koerber, Ph.D., BCBA-D** (Great Lakes Center for Autism Treatment and Research)

Staff Feedback System to Increase Children's Learning Opportunities

The purpose of this intervention was to heighten awareness and increase the number of learning opportunities for children receiving EIBI services. The staff were provided a goal, a sheet to record the total number of trials per half hour interval, and a frequency clicker to track their current trial rates. Their group goal was for 80% of the children receiving services to have a 5% increase in learning opportunities per half hour. If staff met their goal of 80% of children with the increase they were entered into a prize drawing for a gift card of their choice. Learning opportunities provided to children receiving ABA therapy can play a role in how quickly progress is made on current goals that are being worked on. Staff working with children receiving EIBI services were provided individual trial rate goals based on previous performance. The goals provided to each staff were a 03% increase of their baseline performance across all of their sessions. They were provided a sheet to record total number of trials per half hour interval and a frequency clicker to track rates. While each staff had an individual goal, if 80% of the group met their individual goals for four consecutive weeks, then a reward drawing was held for a \$5.00 gift card.

7. **Kayla J. Jenssen, Patrick A. Wieszciecinski, Kimberly M. Peck, and Jessica E. Frieder** (Western Michigan University)

Education to Employment: A Summary of the PROMOTES Employment Project After Year 1

In collaboration with the Van Buren Intermediate School District (VBISD), the Psychology Department at Western Michigan University (WMU) has created a unique program called the PROMOTES (Providing Realistic Opportunities to Mentor On-site Training for Employment Skills) Employment Project. The purpose of PROMOTES is to provide additional supports to individuals with developmental disabilities who are 16 and older, before, during, and after they have obtained paid employment in the community. Individuals with disabilities often struggle with social and other job-related skills, which may impact their marketability when applying for employment positions (Tomblin & Haring, 2000). In an already competitive job market, individuals with developmental disabilities are severely underemployed (Hartman, 2009). This program is grounded in Applied Behavior Analysis with the use of evidence-based practices to support skill repertoire development in vocational and job-related social skills relevant to successful integration into the workforce. Primary service providers in this setting are job coaches that individualize training to student needs, while also providing support and supplemental instruction to business leaders in the community. Job-related data for PROMOTES participants will be presented. Additionally, social acceptability measures from participants, job coaches, teachers, caregivers, and employers will be summarized. Discussion will focus on strengths of the program and areas for future development.

8. **Kenzie Gatewood, B.A.; Shantinique Jones, B. A.; Kate LaLonde, Ph.D., BCBA-D; and Joshua Plavnick, Ph.D., BCBA-D** (Michigan State University)

An Evaluation of Behavioral Skills Parent Training on Parent Reported Standardized Assessment Measures

The present study evaluated the effects of early intensive behavioral intervention (EIBI) for children with autism spectrum disorder (ASD) combined with a behavioral skills parent training on parent reported measures of family routines, interaction, and socialization. Participants were eight families whose children attended the Early Learning Institute, a 30-hour per week early intensive behavioral intervention program for children with a diagnosis of ASD. The behavioral skills training consisted of monthly one-hour sessions that taught parents to implement applied behavior analytic focused interventions. The behavioral skills training (BST) consisted of four steps; (1) presentation of the intervention by the BCBA-D, (2) observation of the intervention implemented by a BCBA-D or behavior technician, (3) parent implementation while receiving coaching and feedback from the BCBA-D and (4) discussion on how to implement the focused intervention within the home. Focused interventions consisted of mand training, photographic activity schedules, preference assessment, token economies, potty training, reciprocal imitation training, and compliance protocol with adults and peers. Pre-treatment assessments were completed by families prior to EIBI and BST and post-treatment assessments were given after children were enrolled in the program for 1 year and parents had completed nine trainings. Implications of results are discussed and suggestions for future family trainings are presented.

9. **Anita Li, M.S., BCBA; Kellie Skiba, B.S.; Kourtney Bakalyar, M.A., BCBA; Jessica E. Frieder, Ph.D., BCBA-D; and Alan Poling, Ph.D., BCBA-D** (Western Michigan University)

Autism Services Center: Promoting Success for Students with Autism Spectrum Disorders at WMU

The Autism Services Center (ASC) at Western Michigan University (WMU) serves as a resource for college students diagnosed with autism spectrum disorder (ASD) at no cost. The program assists students in connecting and communicating with faculty, staff, parents, and other on-campus resources. Additionally, students receive individualized advising in academics, self-management, and social skills to promote success in a college setting. ASC works closely with WMU's Disability Services for Students (DSS) to ensure students are aware of resources such as testing accommodations and the Peer Mentor program. ASC also provides trainings to the community, faculty, staff and students to promote awareness and strategies when interacting with students diagnosed with ASD. This poster will provide an overview of the program's current and future offerings in addition to information on enrollment and demographics.

10. Mindy K. Newhouse-Oisten, M.A., BCBA, TLLP; Matthew M. Laske; Cadi L. Rulison; and Jessica E. Frieder, Ph.D., BCBA-D (Western Michigan University)
Effects of Generalized Imitation Training on Functional Speech Acquisition During Picture Exchange Communication System (PECS) Training

Previous research has demonstrated that some children with autism exhibit increases in speech during Picture Exchange Communication System (PECS) training, but factors influencing this speech gain have not been widely studied. Some research suggests a link between motor as well as vocal imitation and language acquisition in general. This study examined generalized motor imitation as one potential factor influencing speech gains during PECS training. Participants included children diagnosed with autism with no previous history of formal motor imitation training prior to the study. Participants were divided into two groups, one that received PECS training without any prior imitation training and one which received imitation training prior to PECS training. This poster will show preliminary results for one child from each group. Implications for utilizing this information to better inform early intervention practices aimed at improving the communication skills of children with autism will also be discussed.

11. Jana M. Sarno (Autism Home Support Services)
An Evaluation of Reading Groups Using Video Conferencing to Increase Practitioner Knowledge

Professional development for behavior analytic practitioners can take a number of forms such as staying current with published literature, attending professional conferences and workshops, and consulting with and obtaining feedback from other practitioners (Gillis & Carr, 2014). Specific to reading published behavior-analytic research, a number of barriers and potential recommendations to remove these barriers have been discussed (Carr & Briggs, 2010, Parsons & Reid, 2011). In a practical application, Parsons and Reid (2011) evaluated the effectiveness of a monthly reading group to increase professional knowledge. Using pre- and post-test competency assessments, Parsons and Reid demonstrated that reading groups were effective at increasing knowledge. Additionally, high social validity was also obtained. Finally, the authors provided recommendations to practitioners who wish to implement reading groups at their own organization. The current project sought to replicate and extend the work of Parsons and Reid. Specifically, this was accomplished by (1) maximizing efficiency and decreasing travel demands the reading groups were facilitated using video conferencing versus direct in-person groups, (2) continuing education units were provided following each event, and (3) the inclusion of supplemental strategies to increase practitioner interest in the groups. Additionally, social validity was assessed using a modified version of the Intervention Rating Profile-15 (Martens, Witt, Elliott, & Darveaux, 1985). Nine practitioners participated in the reading groups. Comprehensive pre- and post-tests were administered for each article in the reading group series. During the reading discussions, active responding (e.g., guided notes, open-ended questions) was required. The results for this initiative will be shared in the poster presentation. Specific attention will be focused on pre-and post-test knowledge gains and social

validity results. Limitations, recommendations, and future directions for reading groups will be discussed.

12. Justin J. Daigle, M.A., BCBA, LBA; Corey Spala; and Richard W. Malott, Ph.D., BCBA-D (Western Michigan University)

Pilot Case Study of the Comprehensive Practitioner Model

The Comprehensive Practitioner Model is a new research model for applied settings. It was first piloted in an Early Intensive Behavioral Intervention classroom within a public school. This project reports the progress and data of one student who participated in this research model. The model allows the student to receive Discrete Trial Instruction in addition to intensive services to address functional manding deficits.

13. Lyndsay Williams, Thom Ratkos, and Jessica E. Frieder (Western Michigan University)

Learning Colors Incidentally in an Art Room

Early Intensive Behavior Intervention (EIBI) is documented throughout the literature as the leading treatment for children with autism. While skill acquisition is efficiently taught through discrete trials, one potential disadvantage of EIBI centers is they lack a typical environment and activities as seen in normalized preschool or kindergarten classrooms which may minimize Natural Environment Teaching (NET). Previous research indicates that a successful transition from EIBI to a more normalized learning environment would need to include materials and demands similar to typical learning environments (Bailey Jr. and McWilliam, 1990). After hearing colors labeled in the context of an art project, using no programmed reinforcement, children with autism learned to tact those colors. We conducted a multiple baseline across colors in three different settings without programmed consequences with two children with autism in an early intervention center setting. Results suggest EIBI centers may benefit by including activities typical of early elementary school classrooms.

14. Kimberly Phillips, M.A., BCBA and Lisa K. Dworkin, M.A., BCBA (Autism Home Support Services)

Advantages of a Clinical Peer Review for High Risk Cases Model for In-Home Service Organizations

Clinical peer review processes typically offer valuable learning opportunities for individual clinicians. For organizations providing in-home Applied Behavior Analysis (ABA) services to children with autism, the issues of client and staff safety can become serious liabilities when addressing challenging behavior. Furthermore, without effective behavior reduction strategies, children demonstrating such significant challenging behavior (i.e., self-injurious behavior, severe physical aggression, elopement, and/or inappropriate sexual behavior) may experience barriers to skill acquisition/learning, can contribute to increased parental stress, limit social/community opportunities and result in restrictive placements outside of the home, (Hayes & Watson, 2013, Intagliata & Willer, 1981, Rivard, Terroux, Boursier, & Mercier, 2014). The utilization of a Clinical Peer Review model, reflective of a

Behavior Support Committee often required by state licensure for adults with disabilities, can offer not only learning opportunities but can help to mitigate risk for cases in which behavior intervention strategies are implemented in the home setting. With the growth of in-home ABA organizations, greater opportunities for safety risks exist when plans are implemented independently in the home with oversight only during supervisory overlaps. To that end, a beneficial model might incorporate a defined list of challenging high-risk behaviors that require close ongoing monitoring and consultation. The Clinical Peer Review may include a standard review process, a group of consulting clinicians highly experienced with challenging behavior, additional tracking and reporting mechanisms, and crisis intervention support. To date, limited research and discussions have occurred on how to design, implement, and evaluate a Clinical Peer Review process in in-home ABA organizations. The poster presentation will explore the effectiveness of this Clinical Peer Review for High Risk Cases model at a large in-home ABA organization in terms of 1) reduction in target behavior over time and 2) BCBA satisfaction with the Clinical Peer Review for High Risk Cases process. Recommendations will be presented for future use including such topics as model replication, additional outcome measures, and training efforts.

Thursday and Friday, September 15 and 16

Vendor/Exhibit Expo

This is an alphabetical listing. Please see insert for a map and booth numbers for each vendor.

8:00 a.m. – 5:00 p.m.; Kalamazoo Room

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altshift.education
aimee.cain@altshift.education

Applied Behavior Center for Autism

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Autism Alliance of Michigan

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Autism Home Support Services

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Behavior Analysis Graduate Student Organization (BAGSO)

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cgizewski@behavioralperspectiveaba.com

Braintrust Behavioral Health, LLC

1617 E. Milham Ave, Ste. B
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(269) 303-5931
www.braintrustbehavioralhealth.com
zach@braintrustmi.com

By Your Side – Autism Therapy Services

1920 Thoreau Dr., Ste. 180
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(847) 496-5513
www.byyoursideac.com
hr@byyoursideac.com

Centria Healthcare

41521 W. 11 Mile Rd.
Novi, MI 48375
(248) 299-0030
centriaautism.com
info@centriahleathcare.com

Constant Connections

(734) 788-8151
ilovemycz.com
autismconstantconnections@gmail.com

Crawl Walk Jump Run Therapy Clinic – *Thursday Only*

42804 Garfield Rd.
Clinton Township, MI 48038
(586) 323-2957
www.crawlwalkjumprun.com
info@crawlwalkjumprun.com

Developmental Enhancement Behavioral Health

1428 44th St. SW, Ste. B
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(616) 604-8492
www.debh.org
info@debh.org

Discovery Toys

9888 Southlawn Circle
Jerome, MI 49249
(517) 392-1082
discoverytoys.com/bjwinters
bettyjowinters@gmail.com

Easter Seals Michigan

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Auburn Hills, MI 48236
(800) 75-SEALS
eastersealsmichigan.com
info@essmichigan.org

Eric Fox (Foxylearning LLC)

885 N. High St., Ste. 106
Worthington, OH 43085
(614) 468-3235
<https://foxylearning.com/about>
info@foxylearning.com

Family Center for Children and Youth with Special Health Care Needs

320 S. Walnut St.
Lansing, MI 48913
(800) 359-3722
www.michigan.gov/CSHCS
CSHCSF@michigan.gov

Great Lakes Center for Autism Treatment and Research

9616 Portage Rd.
Portage, MI 49002
(269) 250-8200
www.autismtreatmentresearch.org
dstevens@resopp.org

GVSU Autism Education Center and START Project

401 W. Fulton St.
Grand Rapids, MI 49504
(616) 331-6480
www.gvsu.edu/autismcenter
autismmed@gvsu.edu

Harbor Oaks Hospital

35031 23 Mile Rd.
New Baltimore, MI 48047
(586) 725-5777
www.harboroaks.com
along@harboroaks.com

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www.kmoexpressions.com
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3730 Edison Lakes Pkwy.
Mishawake, IN 46545
(574) 387-4313
www.lighthouseautismcenter.com
maggiek@lighthouseautismcenter.com
leilaa@lighthouseautismcenter.com

Little Star Center

12650 Hamilton Crossing Blvd.
Carmel, IN 46032
(317) 249-2242
www.littlestarcenter.org
maryr@littlestar.org

LOGAN Autism Learning Centers

6339 Atlantic Ave.
Kalamazoo, MI 49009
(269) 353-9533
www.loganautismlearningcenters.org
bthomas@logancenter.org

Michigan Council for Exceptional Children (MCEC)

527 Grand St.
Portage, MI 49024
(269) 366-4673
<http://www.michigancec.org/home>
ljfsen.mcec@gmail.com

Michigan State University

620 Farm Ln.
East Lansing, MI 48823
(517) 884-8494
education.msu.edu/cepse/specialed
sped@msu.edu

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456 Pioneer Dr.
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(248) 370-4415
oakland.edu
martino@oakland.edu

Parent to Parent of SW Michigan

3901 Emerald Dr., Suite D
Kalamzoo, MI 49001
(269) 345-8950
www.p2pswmi.org
jill@p2pswmi.org

Patrick McGreevy (Essential for Living)

4767 New Broad St.
Orlando, FL 32814
(407) 415-5241
<http://www.essentialforliving.com/>
office@essentialforliving.com

QBS, Inc.

49 Plain St., Ste. 200
North Attleboro, MA 02760
(508) 630-6370
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agately@qbscompanies.com

Relias Learning

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Cary, NC 27518
www.reliaslearning.com
jmartin@reliaslearning.com
(919) 655-1827

Special Education and Literacy Studies

1903 W. Michigan Ave.
Kalamazoo, MI 49008
(269) 387-4478
<http://www.wmich.edu/specialed/>
erik.e.pye@wmich.edu

Sullivan Center for Autism

10031 Spencer Rd.
Brighton, MI 48114
(810) 229-4334
sullivancenterforautism.com
bret@sullivancenterforautism.com

Summit Pointe

140 W. Michigan Ave.
Battle Creek, MI 49014
(269) 441-2700
www.summitpointe.org
akp@summitpointe.org

The Autism Society of Michigan

2178 Commons Pkwy.
Okemos, MI 48864
(517) 882-2800
www.autism-mi.org
asminr@autism-mi.org

Western Michigan University Autism Center of Excellence

1903 W. Michigan Ave.
Kalamazoo, MI 49008
(269) 387-4311
www.wmuace.com
psy_ace@wmich.org

Westminster Technologies, Inc.

1702 St. Clair Ave.
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(844) 881-2088
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tklopp@westminstertech.com

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www.autismcentersmi.com
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Lighthouse Autism Center

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Mishawaka, IN 46545
(574) 387-4313
www.lighthouseautismcenter.com
info@lighthouseautismcenter.com



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Wyoming, MI 49059
(616) 604-8492
www.debh.org
info@debh.org

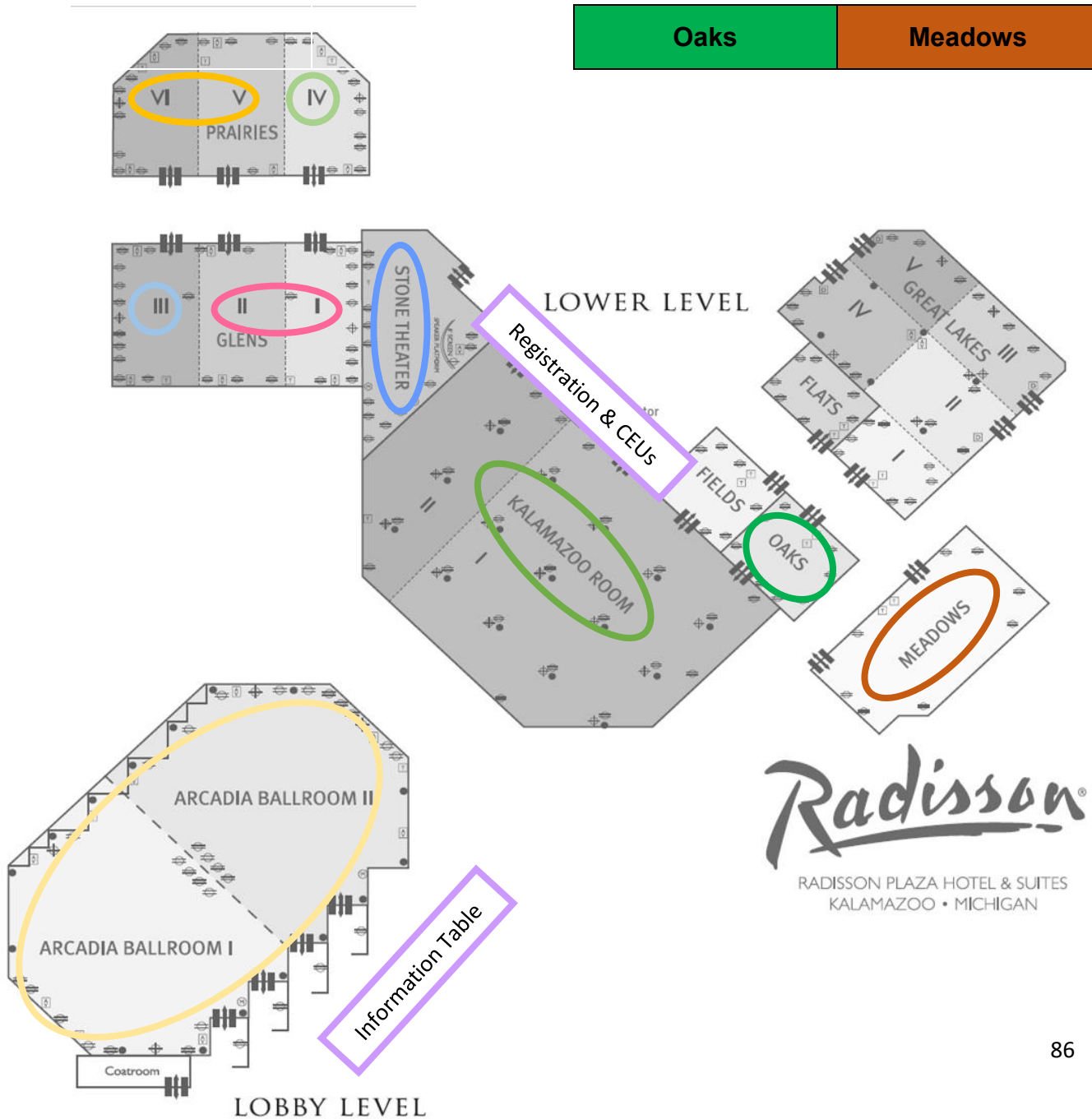
Map of Room Locations

Use this color-coded chart to find each room on the map and to determine the location of each presentation.

Lobby	Arcadia Ballroom	Glens 1 & 2	Glens 3
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Prairies 4 & 5	Prairies 6	Stone Theatre	Kalamazoo Room
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Oaks	Meadows
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