In-Home/Parent Training Needs Assessment Navigation Page

Instructions for use:



Click 'Enable Editing' to release the file from Protected View.

	Working with the student's parent(s) and teacher(s), answer each question with relation to b	pehaviors performed at school and home/community.
Key:		
	Independent - Able to perform task/skill independently (more than 80% of the time)	Usually - Able to perform task/skill with minimal/partial prompts (60% – 79% of the time)
	Sometimes - Able to perform task/skill with several/full prompts (40% -59% of the time)	Rarely - Task/skill Not presently acquired (Less then 40% of time)
	** Ultimately, eligibility is determined by the ARD committee; severity and present level of academic and functi are determined by the in-home training assessment team in collaboration with teachers and parents. Use the	, , ,
	*** Home rating is developed collaboratively between In Home Trainer and parent *** School rating is developed.	developed collaboratively between In Home Trainer and classroom teacher

Student Name:	
Campus:	
Parent(s)	
DOB:	Grade:

Person completing evaluation:	
Date of Report:	

*Provided by ESC Region 11

Adapted from the assessment developed by Curt Johnson & Amanda Foy, in conjunction with workshop participants at the 25th Annual Texas Autism Conference

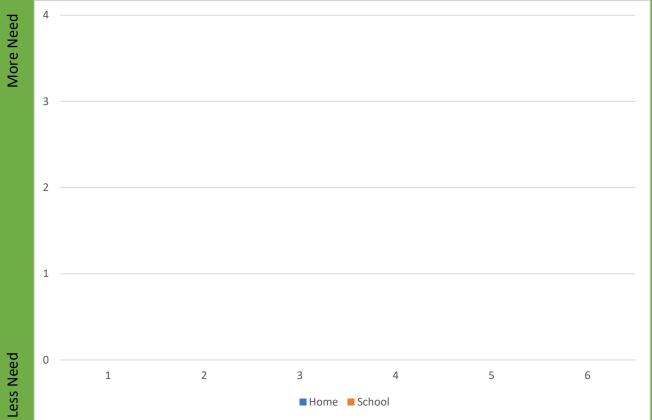
Communication

HOME (Parent/Guardian)

Compared to your child's performance at school, at home your child can:	Independent	Usually	Sometimes	Rarely		At school, the student can:	Independent	Usually	Sometimes	Rarely
understands directions (receptive language)	0	0	0	0		understands directions (receptive language)	0	0	0	0
express his/her feelings	0	0	0	0		express his/her feelings	0	0	0	0
express wants & needs/requesting/manding	0	0	0	0		express wants & needs/requesting/manding	0	0	0	0
indicate choice when given two items	0	0	0	0		indicate choice when given two items	0	0	0	0
ask for help	0	0	0	0		ask for help	0	0	0	0
engage in age appropriate reciprocal conversation	0	0	0	0		engage in age appropriate reciprocal conversation	0	0	0	0
In-Home Observation:						School Observation / Teacher Comments:				
	understands directions (receptive language) express his/her feelings express wants & needs/requesting/manding indicate choice when given two items ask for help engage in age appropriate reciprocal conversation	understands directions (receptive language) express his/her feelings express wants & needs/requesting/manding indicate choice when given two items ask for help engage in age appropriate reciprocal conversation	understands directions (receptive language) express his/her feelings express wants & needs/requesting/manding indicate choice when given two items ask for help engage in age appropriate reciprocal conversation	understands directions (receptive language) express his/her feelings express wants & needs/requesting/manding indicate choice when given two items ask for help engage in age appropriate reciprocal conversation	understands directions (receptive language) express his/her feelings express wants & needs/requesting/manding indicate choice when given two items ask for help engage in age appropriate reciprocal conversation	understands directions (receptive language) express his/her feelings express wants & needs/requesting/manding indicate choice when given two items ask for help engage in age appropriate reciprocal conversation	understands directions (receptive language) express his/her feelings express wants & needs/requesting/manding indicate choice when given two items ask for help engage in age appropriate reciprocal conversation understands directions (receptive language) express his/her feelings express wants & needs/requesting/manding indicate choice when given two items ask for help engage in age appropriate reciprocal conversation	understands directions (receptive language) express his/her feelings express wants & needs/requesting/manding indicate choice when given two items ask for help engage in age appropriate reciprocal conversation understands directions (receptive language) express his/her feelings express wants & needs/requesting/manding indicate choice when given two items ask for help engage in age appropriate reciprocal conversation engage in age appropriate reciprocal conversation	understands directions (receptive language) express his/her feelings express wants & needs/requesting/manding indicate choice when given two items ask for help engage in age appropriate reciprocal conversation understands directions (receptive language) express his/her feelings express wants & needs/requesting/manding indicate choice when given two items indicate choice when given two items ask for help engage in age appropriate reciprocal conversation engage in age appropriate reciprocal conversation	understands directions (receptive language) express his/her feelings express wants & needs/requesting/manding indicate choice when given two items ask for help engage in age appropriate reciprocal conversation understands directions (receptive language) express his/her feelings express wants & needs/requesting/manding indicate choice when given two items indicate choice when given two items ask for help engage in age appropriate reciprocal conversation engage in age appropriate reciprocal conversation engage in age appropriate reciprocal conversation

SCHOOL (Teacher)







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Self-Help

HOME (Parent/Guardian)

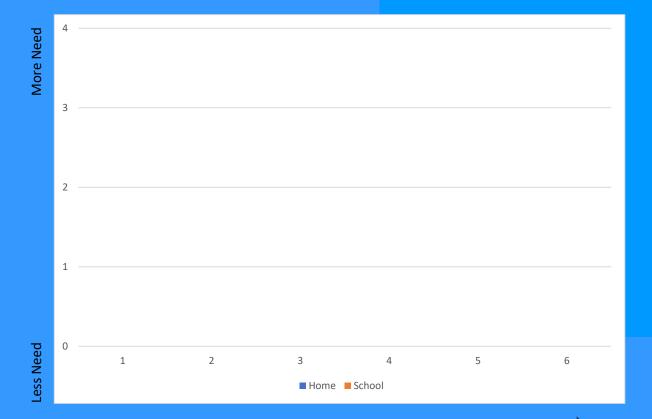
	Compared to your child's performance at school, at home your child can:	Independent	Usually	Sometimes	Rarely
1	use the restroom independently	0	0	0	0
2	take care of his/her age appropriate grooming needs.	0	0	0	0
3	dress him/herself	0	0	0	0
4	eat independently	0	0	0	0
5	complete home chores	0	0	0	0
6	wash independently (incl. washing hands/face/shower)	0	0	0	0

SCHOOL (Teacher)

At school, the student can:	Independent	Usually	Sometimes	Rarely
use the restroom independently	0	0	0	0
take care of his/her age appropriate grooming needs.	0	0	0	0
dress him/herself	0	0	0	0
eat independently	0	0	0	0
complete school chores	0	0	0	0
wash independently (incl. washing hands/face/etc.)	0	0	0	0

In-Home Observation:







Socialization

HOME (Parent/Guardian)

	Compared to your child's performance at school, at home your child can:	Independent	Usually	Sometimes	Rarely
1	follow the rules of simple games	0	0	0	0
2	maintain appropriate limits with strangers	0	0	0	0
3	take turns with others in conversation	0	0	0	0
4	respond appropriately to greetings	0	0	0	0
5	initiate age appropriate play with others	0	0	0	0
6	share with others	0	0	0	0

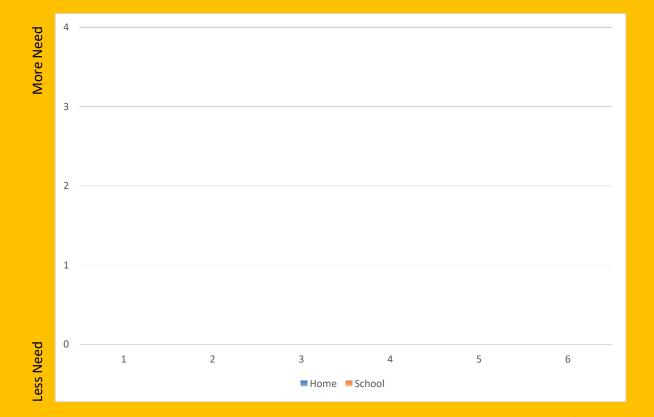
SCHOOL (Teacher)

At school, the student can:			Sometimes	Rarely
follow the rules of simple games	0	0	0	0
maintain appropriate limits with strangers	0	0	0	0
take turns with others in conversation	0	0	0	0
respond appropriately to greetings	0	0	0	0
initiate age appropriate play with others	0	0	0	0
share with others	0	0	0	0

In-Home Observation:

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Community

HOME (Parent/Guardian)

	Compared to your child's performance at school, at home your child can:	Independent	Usually	Sometimes	Rarely
1	use a public restroom independently	0	0	0	0
2	give personal information	0	0	0	0
3	request a break when needed	0	0	0	0
4	can ask authority figures for asisstance	0	0	0	0
5	follow car safety rules	0	0	0	0
6	age appropriate interaction with others in community	0	0	0	0

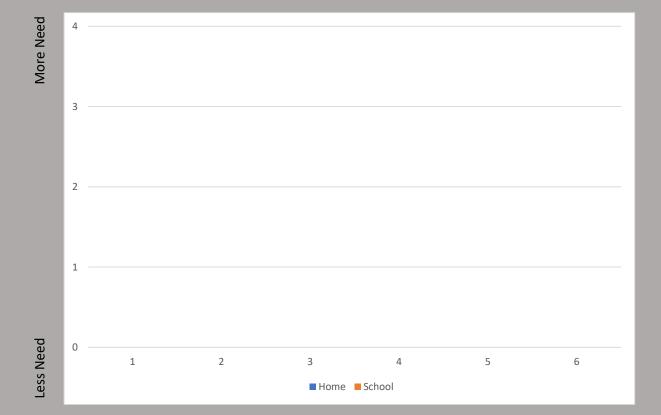
SCHOOL (Teacher)

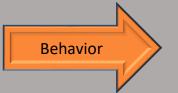
At school, the student can:			Sometimes	Rarely
use a school restroom independently	0	0	0	0
give personal information	0	0	0	0
request a break when needed	0	0	0	0
can ask authority figures for asisstance	0	0	0	0
follow bus safety rules	0	0	0	0
age appropriate interaction with others in the school community	0	0	0	0

In-Home Ob	servation:		

School	Observation /	Teacher	Comments
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Behavior

HOME (Parent/Guardian)

	Compared to your child's performance at school, at home your child can:	Independent	Usually	Sometimes	Rarely
1	comply with rules and follows adult directions	0	0	0	0
2	accepts no for an answer	0	0	0	0
3	have appropriate use of hands and/or body	0	0	0	0
4	be safe and not engage in self-injurious/aggressive behaviors.	0	0	0	0
5	wait patiently	0	0	0	0
6	avoid elopement	0	0	0	0

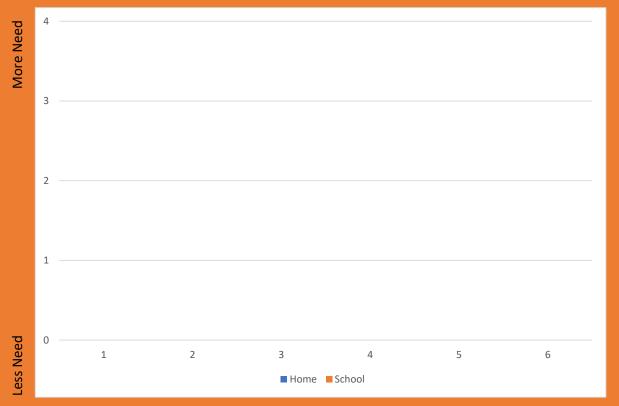
SCHOOL (Teacher)

At school, the student can:	Independent	Usually	Sometimes	Rarely
comply with rules and follows adult directions	0	0	0	0
accepts no for an answer	0	0	0	0
have appropriate use of hands and/or body	0	0	0	0
be safe and not engage in self-injurious/aggressive behaviors.	0	0	0	0
wait patiently	0	0	0	0
avoid elopement	0	0	0	0

In-Home Observation:

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Routines

HOME (Parent/Guardian)

Compared to your child's performance at school, at home your child can:	Independent	Usually	Sometimes	Rarely
tolerate changes to routine	0	0	0	0
transition to new tasks when prompted	0	0	0	0
follow a home routine/schedule	0	0	0	0
get ready for bed independently	0	0	0	0
start a task when directed	0	0	0	0
keep materials organized	0	0	0	0

SCHOOL (Teacher)

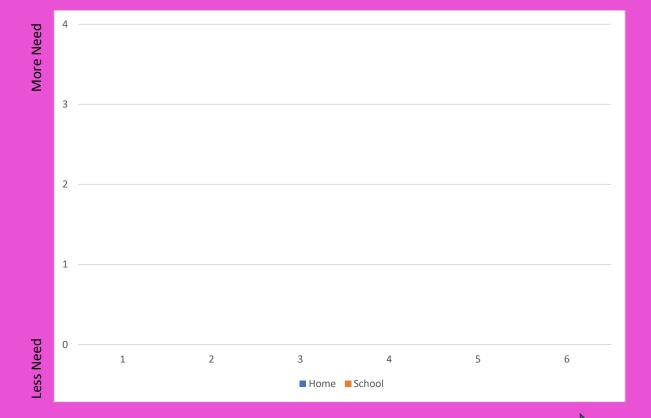
At school, the student can:	Independent	Usually	Sometimes	Rarely
tolerate changes to routine	0	0	0	0
transition to new tasks when prompted	0	0	0	0
follow a class routine/schedule	0	0	0	0
get ready for class independently	0	0	0	0
start a task when directed	0	0	0	0
keep materials organized	0	0	0	0

In-Home Observation:

m-nome observation.

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Parent Interview

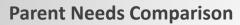
Parent Interview





1.	What does your child like? (Ex: food, activities, stimulating objects, toys, games, TV shows)?
2	How does your child communicate with you?
۷.	now does your china communicate with you:
3.	How does your child do in the area of self- help? (eating, bathing, grooming, etc.)
	December of the following and different times are askedule at home?
4.	Does your child follow a specific routine, or schedule at home?
5.	What are the specific behaviors that interfere with your family life?
_	
6.	What happens before your child exhibits inappropriate behavior? (ex: temper tantrums, hitting, screaming)?
7.	What has worked for you to get your child to do what you want him/her to do? What has not worked?

8.	What system of rewards and consequences do you use?
9.	What are some things your child does at school that you don't see them do at home or in the community? Vise-versa?
	0.7.
10	NAME A SIGNA COLUMN AND A COLUM
10.	What skills could your child learn that would most benefit your family?
11.	What is your family routine? Am/PM/Weekend?
12.	What do you want to know more about?
	I need to know about self-care skills.
	I need information about behavior.
	I need help with social skills for my child.
	I need to know how to help my child develop better communication skills.
	I need to know more about my child's disability.
	I need to know more about resources for my child and myself.
	I need help with future planning for my child.
	I need help decreasing self-stimulatory behaviors.
	Other:



**The graph on this tab represents the needs according to the parent(s)'s answers/responses on the IHT assessment.

■ Communication - Home

■ Self-Help - Home

■ Community - Home

■ Behavior - Home

■ Routines - Home





Return to the Main Navigation



In-Home Training Eval	**this text can be deleted** Add Your		
Student Nar	me:		District/Charter Logo Here
Campus:		Date:	
Person com	pleting evaluation:		
Records Review			
Records Review ☐ IEP			
	ntion data/graphs		
□ Other:			
Records	s Review Summary		
	ation Summary ds in the area of Communication in the area of Communication (ations):
Self-Help Evaluation S	ummary		
	eds in the area of Self-Help		
□ Needs	in the area of Self-Help (briefly	describe recommendations)	:
Socialization Evaluation	on Summary		
	ds in the area of Socialization		
□ Needs i	n the area of Socialization (brie	efly describe recommendation	ns:):

Communi	ty Evaluation Summary
Į	No needs in the area of Community
[Needs in the area of Community (briefly describe recommendations):
Behavior I	Evaluation Summary
	No needs in the area of Behavior
	Needs in the area of Behavior (briefly describe recommendations):
	recess in the area of Behavior (streny describe recommendations).
Routines E	Evaluation Summary
[No needs in the area of Routines
]	Needs in the area of Routines (briefly describe recommendations):
Based on t	the IHT assessment:
]	IHT sessions are recommended
	Number of sessions and duration recommended:
	IHT sessions are NOT recommended
	ini sessions are NOT recommended
	Signature of District Personnel:

Parent Training Evaluation Summary

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Add Your

District/Charter Logo Here

Stu	dent Name:	0		_		District/Charter Logo Here
Car	mpus:	0		Date:	1/0/1900	
Per	rson completing	evaluation:	0			
Parent Interv	riew Summary:					
Based on the	Parent Intervie	ew:				
	Parent Trainin	g sessions are	recomm	ended		
	Number o	f sessions and	duration	recommended	:	
а	Parent Trainin	g sessions are	NOT rec	ommended		
	Signature of D	oistrict Personn	el:			