



May 2011 Newsletter

## Company News

-Schedules will be handed out by May 15<sup>th</sup> from your Senior! Thank you to everyone for getting availability in before the due date!

-Even though the weather is turning warmer, please continue to wash your hands or use sanitizer when entering each house. If anyone would like hand sanitizer for a house, stop into the office for one to take.

-If you are interested in being on a list for families to call when in need of a babysitter please contact Char ([cgeissman@hotmail.com](mailto:cgeissman@hotmail.com)) or Lindsay ([lhofmann1@wi.rr.com](mailto:lhofmann1@wi.rr.com)).

-Anyone interested in extra hours that wants to be a floater please let your Senior know! If you currently are a floater, please let your Senior know your updated availability.



## Happy Birthday!

*5/7 Dana Moldenhauer*

## Call-Ins

-When calling in you need to make 5 phone calls!

1. Call your team members to see if anyone can cover your shift.
2. Call any floater(s) with matching availability to cover your shift.
3. Call your Senior to let them know of the missed shift.
4. Call the family to let them know of the missed shift and to set up a make-up time if needed.
5. Call the Sonnenberg Consultants office at 262-514-4ABA and leave a message with your name, the date, and the client's name.

Also, remember that if no one is able to cover your shift, you need to make those hours up. If you said you will fill in someone's hours and then cancel, you are responsible for making them up.

If you miss any more than 3 days in a month, a warning may be given.

If you miss 3 consecutive days you need a written doctor's note for yourself (or your child if they were the one sick).

Remember every shift, every hour is important to every child!



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### ***MILWAUKEE AUTISM & ASPERGER'S SYNDROME CONFERENCE***

May 20, 2011

Wyndham Milwaukee Airport Hotel & Convention Center

"*THE WAY I SEE IT*" Dr. Temple Grandin has served as inspiration and role model to hundreds of thousands of families and persons with autism. "*NO MORE MELTDOWNS*" Having earned his MA and Ph.D. in clinical psychology from the University of Albany, Dr. Jed Baker is a behavioral consultant for several New Jersey school districts where, nearly two decades ago, he organized a group to help children with social communication problems.

<http://www.fhautism.com/Conferences/MilwaukeeAutismAspergersSyndromeConference/tabid/282/Default.aspx>

### **Using the well baby checkup to screen for autism April 28, 2011**



by Autism Speaks' Staff bloggers  
Alycia Halladay, Ph.D., Director of Environmental Science and Geri Dawson, Ph.D., Chief Science Officer

<http://blog.autismspeaks.org/2011/04/28/using-the-well-baby-checkup-to-screen-for-autism/>

In 2007, the American Academy of Pediatrics published guidelines recommending that all children be screened for autism at their 18 and 24 month well baby checkups. While these recommendations have not been universally implemented in clinical practice, these guidelines are a positive step forward. New research from the Baby Siblings Research Consortium suggests that signs of autism can be

detected as early as 6-12 months. Early detection and subsequent early intervention provide hope of changing the developmental trajectories of children with ASD to improve their outcome.

A recent study published in the *Journal of Pediatrics*, and supported by Autism Speaks, aims to address each of these challenges by utilizing a checklist called the Communication and Symbolic Behavior Scales Developmental Profile Infant-Toddler Checklist. Lead author Karen Pierce, Ph.D. of UCSD asked pediatricians to use this instrument as part of a well-baby checkup. This checklist was developed by Amy Wetherby, Ph.D., who was instrumental in creating the Autism Video Glossary. The instrument is also available online at [www.firstsigns.org](http://www.firstsigns.org).

The researchers took a multi-phase approach. They first provided training to pediatricians on the signs and symptoms of autism. Such an approach has been used successfully before by a group at Vanderbilt University. However, this study screened infants as early as 12 months of age and conducted the 1 year screening in pediatricians' offices, which had not been done before. Next, parents were asked to fill out the questionnaire in the waiting room, and the questionnaire was scored by the time the parent met with the physician. The checklist responses from parents then were reviewed by participating pediatricians, and children who were flagged by the questionnaire were referred to a UCSD clinic for further evaluation. About 12% of children who were screened were referred to the clinic for an evaluation. Of those, about half were followed to 3 years of age and 17% were later diagnosed with an ASD. Other diagnoses included learning disabilities and developmental disabilities.

This study is important for several obvious and some not so obvious reasons. First, and perhaps most importantly, this study shows that it is feasible for pediatricians to become actively engaged in an easy-to-implement early screening program for ASD for children as young as 12 months of age. Also important, all families who were interested were able to obtain the services of a clinician very early in their child's development. For those that were later diagnosed with an ASD, 100% received treatment by 17 months.