**What is TEAP?**

- The Theiss Early Autism Program (TEAP) services young children between the ages of 2-5 years of age, diagnosed with autism spectrum disorder. This intense center-based preschool program, runs for 12 months a year, M-F from 8:30 AM to 2:30 PM, utilizes Applied Behavior Analysis to target a child’s cognitive and language skills, self-care and adaptive behavior, and social-emotional development within a preschool routine. Although transportation is not always available, families can enroll in MATP (Medical Assistance Transportation Program) for reimbursement for travel. It is also possible to have transportation written into your child’s IEP if they are at least 3 years old and live within the Pittsburgh Public school district. The program is located at the Hill House Association, 1835 Centre Avenue, WPIC Autism Suite 200, Pittsburgh, PA 15219.

**How do you provide treatment to my child?**

The Theiss Early Autism Program (TEAP) provides care for 7 children ages 2-5 years of age. The children follow an individualized program and receive one-on-one instruction through Applied Behavior Analysis, including Discrete Trial Teaching, Applied Verbal Behavior, and Natural Environment Teaching. Each individualized treatment program is designed to address a child’s cognitive and language skills, self-care and adaptive behavior, and social-emotional development. Daily activities also include circle time, gross motor, playground activities, pretend play, early language arts, art and sensory activities, early cooperative play in small groups, self-help activities, meal time (lunch and snack), and socialization activities (play opportunities with typically developing children from an adjacent child care facility twice a week).

**What would my child’s day look like?**

- Children arrive at TEAP between 8:30 and 9am. During this arrival period, there will be toys out and clinicians will engage in child-directed play with the children. At 9am, circle time begins. The children will transition to the circle time room where they will sing songs, learn about the calendar and learn about the weather. After circle time, the children transition to gross motor time which takes place outside on the playground (weather permitting) or inside in the gross motor room. During gross motor time, clinicians prompt the children through a variety of gross motor activities such as a game of follow the leader, duck duck goose, or navigating through an obstacle course. After this, the children are given a few minutes of child-directed play in which the children may explore the environment and choose which activities to engage in. After gross motor time, the children transition to snack time. We ask that parents pack a small snack item with the children’s lunches each day. After snack time, the children will rotate between independent work stations with activities like puzzles or sorting and discrete trial teaching (DTT) sessions. During DTT sessions, a clinician works one-on-one with the child on individualized programs to increase developmental skill areas in which the child has deficits. After DTT
rotations, the children will participate in art, fine motor, and sensory activities as a group. Art may include things like painting, coloring, or gluing tissue paper. Fine motor may include activities like stringing beads, placing coins in a piggy bank, or lacing shapes. Sensory time may include activities like playing in sand, swinging or blowing bubbles. After these activities, the children eat lunch. Following lunch is relaxation time in which the children lay on mats and are given the opportunity to sleep for one hour, if they choose to do so. If the child does not fall asleep within 15 minutes, clinicians will engage in quiet, independent activities such as looking at books, sorting, or coloring. After relaxation time, the children have the opportunity to work on functional play skills or social skills with their peers such as sharing and taking turns. Parents arrive between 2:00 and 2:30pm to pick up their children.

Isn’t a full 6 hour day too intensive for my young child?

- Although it is a long day, the children are engaged in fun, exciting activities throughout the day and are also given the opportunity to rest for an hour. If a child is having a difficult time remaining focused and compliant, clinicians may add sensory breaks into that child’s schedule. For example, a child who has a difficult time may work at the table for 3 minutes and then be given a 2-minute break in the sensory swing. The goal would be to gradually increase the amount of time they are able to work before receiving a break. This prepares them for the time that they will eventually be expected to work in a typical preschool or kindergarten.

Isn’t it better to have my child in a typically developing early education center? Are there any typically developing children at TEAP?

- Many children with autism have significant skill deficits and/or challenging behaviors. This means that they might not be able to function independently in a typically developing early education center. While at TEAP, clinicians will work with the child to increase skills and reduce or eliminate challenging behaviors using applied behavior analytic methods. This will eventually allow the child to become more independent and the child may then be able to function in a typical preschool or kindergarten setting.

- While there are no typically developing children at TEAP, clinicians will work with you and your child to develop an individualized treatment plan to target social skills and functional play skills. Developing these skills can lead to future successes with peer interactions in typical social settings. In addition, the social worker will work with your family to identify opportunities to interact with typical peers in the community.

Can I get community based services such as wraparound in addition to TEAP?

- Not usually, but it is possible. Having both TEAP and traditional wraparound services is only approved in specific situations in which the child’s behaviors are severe enough to warrant both services. If the child does receive community based services, the clinicians in the TEAP classroom will communicate with the community based clinicians to ensure that the child is receiving consistent treatment.

Does TEAP provide transportation?
- TEAP does not provide transportation. However, through Medical Assistance, parents can be reimbursed for the mileage used to bring their child to and from TEAP. It is also possible to have transportation written into your child’s IEP if your child is at least 3 years old and lives in the Pittsburgh Public school district.

**Won’t my child copy undesired behaviors that other children in the program might be showing?**

- This is always a possibility in a group setting. However, each child will have an individualized behavior plan designed to reduce inappropriate behaviors and increase appropriate behaviors. This plan is consistently followed by all clinicians in the classroom and also shared with parents and caregivers.

**How long will my child stay in the program?**

This depends on the child and how they respond to interventions, the skills the child had before entering TEAP, the rate at which they acquire skills, and a variety of individual factors. When the child is ready to transition to a less restrictive placements, TEAP clinicians will discuss this with parents, help them choose a new placement, and support them in the transition.

**It seems like there are a lot of extra meetings...how will I be sure that these meetings will be work the time that I need to set aside?**

TEAP clinicians will work with parents to ensure meetings are at the times that work best with their schedule. We also can schedule meetings in advance so parents/guardians have time to take off or make arrangements.

**Do I have to accept home visits?**

You do not have to accept home visits; however, we encourage family to participate because we believe working with families in the home will increase the outcome of success for the children at TEAP.

**Is there a nurse on duty?**

No, we do not have a nurse on duty. TEAP clinicians do have an illness policy that is given to families during intake. Since TEAP is a therapeutic classroom, if a child has atypical behaviors (crying for long periods of time, falling asleep during treatment etc.) then families will be contacted to bring their child home. TEAP clinicians may also ask that parents either consult with their pediatrician or take their child to the pediatrician to make sure they are ready to come back to TEAP.

**Do you teach toilet training?**

Yes, if a child is ready to begin toilet training, we are able to teach toilet training in the classroom, but it is always important that toilet training procedures are being implemented in the home as well.
Are meals provided?

- Meals are not provided. Parents send their child with a packed lunch. TEAP has a kitchen area with a refrigerator and microwave.

What is my child has special circumstances such as dietary restrictions?

TEAP will work with all families to ensure dietary restrictions are met. TEAP does not provide food to children unless there are special events. In those cases, TEAP always contacts families to let them know and will make sure there are snacks available for those children who have dietary restrictions.

Is my child too young or too old to attend TEAP?

TEAP clinicians will determine eligibility based on the level of functioning of your child. Decisions are also based on the children currently enrolled at TEAP. TEAP clinicians will work with families to determine if TEAP is the best placement for children or if we feel there are other options that are more appropriate.

Can I come observe my child while he or she is at TEAP?

Families are welcome to observe their child at TEAP. TEAP clinicians will also video record children who may have difficulties performing with parents present, so they can see what their child does throughout the day.

How do you determine if TEAP is the best treatment option for my child?

TEAP clinicians ask that families bring their child in when they observe TEAP so TEAP clinicians can interact and assess if a child is appropriate for TEAP. If TEAP clinicians are not sure of the skill level of a child, they will ask your child to come back in for further assessment using different skill areas of the Verbal Behavior Milestones Assessment and Placement Program (VB MAPP). TEAP clinicians will work with families to then determine what the best setting is for their child.