FAMILIES / SCHOOLS / THERAPISTS

School and therapy access profile

A concise, shareable profile for documenting everyday functioning, early change signals, supports, and recovery across settings.

USE THIS WHEN

Access or support needs vary across settings.

TIME NEEDED

15 minutes; reuse the event page.

TAKE OR SHARE

Share the minimum necessary pages.

Document access, not intent.

Write what was observable before using words such as refusal, avoidance, defiance, or motivation. The same skill may be harder to access under pain, fatigue, sensory demands, illness, or communication mismatch.

01 / ACCESS PROFILE

How this learner communicates and participates

Describe reliable access and preferred support. This page is not a list of deficits; it is a practical map for participation.

COMMUNICATION

How the learner understands, answers, chooses, asks for help, and communicates pain or distress.

MOVEMENT AND POSITIONING

Mobility, seating, endurance, motor planning, fine-motor access, and safe assistance.

SENSORY ENVIRONMENT

Sound, light, touch, movement, crowding, transitions, and supports that improve access.

PROCESSING AND TRANSITIONS

Wait time, previewing, visual supports, pacing, and response to unexpected change.

PARTICIPATION STRENGTHS AND INTERESTS

Activities, people, topics, and contexts that support connection and learning.

02 / PRACTICAL SUPPORTS

Daily functioning, physical needs, and supports

A behavior-only description can miss pain, fatigue, bowel burden, hunger, thirst, or a loss of communication access.

EATING AND DRINKING

Usual support, safety considerations, pace, positioning, and observable changes.

TOILETING AND BOWEL PATTERN

Routine, communication, privacy, and signs that support is needed.

PAIN AND DISTRESS COMMUNICATION

Words, gestures, movement, facial expression, shutdown, agitation, or other reliable signals.

REST AND REGULATION

Breaks, quiet space, movement, deep pressure, pacing, or other agreed supports.

MEDICATION, NURSING, OR HEALTH-PLAN NOTE

Reference the approved school plan; do not recreate private clinical details here.

Use the least stigmatizing accurate language.

Describe what changed, what was observable, what support was offered, and what happened next before assigning intent.

03 / SHARED RESPONSE PLAN

Plan before access changes

Agree in advance on first supports, notification thresholds, and where the emergency plan is stored.

RELIABLE BASELINE

What is usually accessible in this setting?

EARLY CHANGE SIGNALS

What observable changes tend to appear first?

WHAT USUALLY HELPS

Reduce demand, communication support, quiet space, movement, food, hydration, toileting, rest, or another agreed action.

WHAT CAN WORSEN ACCESS

Environmental, timing, communication, pain, fatigue, or other known factors.

WHEN TO NOTIFY FAMILY OR GUARDIAN

Use concrete, agreed thresholds.

WHEN TO INVOLVE NURSING OR EMERGENCY RESPONSE

Reference the approved plan and setting policy.

04 / REUSABLE LOG

One-event observation record

Complete one page per meaningful event. A single wide row is difficult to write in; this vertical format preserves the sequence and usable writing space.

DATE, TIME, CLASS, OR SETTING

OBSERVER AND ROLE

BASELINE IMMEDIATELY BEFORE

OBSERVABLE CHANGE

Avoid intent labels. Record communication, movement, attention, breathing, color, pain signals, and safety concerns.

CONTEXT / ACTIVE FACTORS

What else was happening before or during the change?

SUPPORT TRIED

RECOVERY AND TIME

05 / TEAM REVIEW AND OWNERSHIP

Review the pattern and keep the plan current

Repeated observations can identify support opportunities or clinical questions. They do not establish mechanism, and the resulting plan still needs clear owners, review dates, and privacy boundaries.

SAME FUNCTION ACROSS SETTINGS?

Compare school, therapy, home, and recovery.

CONSISTENT CONTEXT OR ACTIVE FACTOR?

Record matches and exceptions.

SUPPORT THAT RESTORES ACCESS

Note timing and repeatability.

RECOVERY PATTERN

Complete, delayed, or a new baseline?

WHAT SHOULD BE SHARED WITH THE MEDICAL TEAM?

Use observable facts and the minimum necessary private information.

PRIMARY FAMILY OR GUARDIAN CONTACT

SCHOOL OR PROGRAM LEAD

APPROVED HEALTH OR EMERGENCY PLAN LOCATION

NEXT REVIEW DATE

Use pattern review for support - not discipline.

Ask what changed and what support or evaluation is needed. Share only what is necessary for support and safety, and store this profile under the setting's privacy rules.