Çocuk değerlendirmesi

1. Bireysel Eğitim Planı (BEP)

2. Eğitim ve öğrenim hakkının sağlanması amacıyla belirli bir süre için engelli bir öğrenci için hazırlanan entegre ve dengeli müdahaleleri tanımlayan belge. Fonksiyonel Teşhis ve Fonksiyonel Dinamik Profilden elde edilen veriler temelinde, mevcut okul yılı için kendi lehine hazırlanan müdahaleler arasındaki bağın delili olarak hazırlanmıştır. Propositif müdahaleler, öğrencinin engelliliğine ilişkin nihai bir taslak hazırlamaya, sonuç olarak ortaya çıkan zorluklara ve mevcut durumda öğrencinin potansiyeline varmak için birbirleriyle bütünleştirilmiştir. BEP eğitimin tüm aşamalarınıngerekçeli bir haritası olarak yapılandırılmıştır: Eğitim-öğretim, rehabilitasyon, sosyalleşme, okul içi-okul dışı arasında bağ kurma

3. Örnek (ek)

4. Düzenlenebilir ve yazdırılabilir belge. Doc / docx

# PERSONALIZED EDUCATIONAL PLAN

School year

Student:

Birth place:

Registered residence:

School:

Support teacher/weekly hours:

Cultural Educational Assistant (CEA):

Schooling:

Family framework:

(father)

(mother)

(sister)

(brothers and sisters)

Teaching staff				
Surname	Name			
		Support teacher		
	Teacher			
Teacher				
CEA				

### ANAMNESIS

HANDICAP TYPE:

DIAGNOSTIC CODE:

PHYSICAL CHARACTERISTICS				
Good health	YES 🗆	NO 🗆		
Difficulty of speech	-	NO 🗆		
Good visual function	-	NO 🗆		
Good auditory function	-	NO 🗆		
Use of medical prosthese	es or techn	ical aids	YES D NOD	
Rehabilitation treatments			YES NO 🗆	
if yes, which:				
Therapies take place		during sc	hool time 🛛	out of school time $\Box$
Pharmacological treatme	nts YES		I	
	BEH	AVIORAL	CHARACTERIST	TICS
Aggression	YES 🗆	NO 🗆	IN PART 🗆	
Dependence	YES 🗆	NO 🗆	IN PART 🗆	
Participation	YES 🗆	NO 🗆	IN PART 🗆	
Acceptance rules	YES 🗆	NO 🗆	IN PART 🗆	
He/she attends willingly	YES 🗆	NO 🗆	IN PART 🗆	
Autonomy	YES 🗆	NO 🗆	IN PART 🗆	
Emotional management	YES □	NO 🗆	IN PARTE 🗆	
	Р	SYCHOM	OTOR FUNCTION	1
Good general motor coordination YES D NO				
Side dominance: Right Left Cross Not acquired X				
Good fine motor skills YES NO D				
Good space-time coordin	iation YES	So NO o		

# WEEKLY TIMETABLE OF THE STUDENT

Day	TIME OF ENTRY	EXIT TIME	THERAPY
Monday			
Tuesday			
Wednesday			
Thursday			
Friday*			

Weekly school attendance: 32 h

## **DESCRIPTION OF THE CLASS**

#### ANALYSIS OF THE STARTING SITUATION

AREA OF AUTONOMY

SOCIO-AFFECTIVE AREA

LINGUISTIC AREA

PERCEPTIVE SENSE AREA AND SPACE-TIME ORIENTATION

**PSYCHOMOTOR AREA** 

NEUROPSYCHOLOGY

# SUMMARY OF EDUCATION-TEACHING PROGRAM

The pupil's schedule will be: equal to the class: YES □ NO □	
DIFFERENT FOR	The content differentiation is characterized by:
<ul> <li>GOALS</li> <li>METHODOLOGY</li> <li>CONTENT</li> <li>STRATEGY</li> <li>SPACE</li> <li>TIMING</li> </ul>	<ul> <li>SEMPLIFICATIONS</li> <li>SOBSTITUTIONS</li> <li>INTEGRATIONS</li> <li>RIDUCTIONS</li> </ul>

# INDIVIDUAL TEACHING PROGRAM

#### SOCIO-AFFECTIVE AREA

General objectives	Specific goals

#### AREA OF AUTONOMY

General objectives	Specific goals
Reinforce the basic autonomy	

### LINGUISTIC AREA

General objectives	Specific goals

#### MATHEMATICAL LOGICAL AREA

General objectives	Specific goals

#### **PSYCHOMOTOR AREA**

General objectives	Specific goals

### NEUROPSYCHOLOGICAL AREA

General objectives	Specific goals	

### METHODOLOGY AND TOOLS

Instruments:

CHECK MODES

Rome,

#### SIGNATURES OF SETTERS

Position	Name Surname	Signature
PRINCIPAL		
COORDINATOR		
SUPPORT TEACHER		
TEACHERS		
CED COORDINATOR		
CED		
PERSONALE ASL		
PUBBLIC CENETR		
PRIVATE THERAPYST		
PARENTS		
OTHERS:		

Teaching staff		
Surname	Name	
		Support teacher
		Teacher
		Teacher
		CEA

### ANAMNESIS

HANDICAP TYPE: Generalized Developmental Disorder Type Autism

DIAGNOSTIC CODE: F 84.0

PHYSICAL CHARACTER	RISTICS		
Good health YES x NO D			
<u>Difficulty of speech</u> YES x NO □			
Good visual function YES x NO □			
Good auditory function YES x NO			
Use of medical prostheses or technical aids: YES D NO 2	х		
Rehabilitation treatments YES x NO			
If yes, which: Cognitive behavioral therapy- Psychomotor	<ul> <li>Speech Thera</li> </ul>	apy (privat	ely)
Therapies take place during school time x	out of school	time 🛛	
Pharmacological treatments YES  NO x			
BEHAVIORAL CHARACTE	ERISTICS		
Aggression	YES 🗆	NO x	IN PART 🗆
Dependence	YES x	NO 🗆	IN PART 🗆
Participation	YES 🗆	NO x	IN PART 🗆
Acceptance rules	YES 🗆	NO x	IN PART 🗆
He/she attends willingly	YES x	NO 🗆	IN PART 🗆
Autonomy	YES 🗆	NO x	IN PART 🗆
Emotional management	YES 🗆	NO x	IN PARTE 🗆
PSYCHOMOTOR FUNC	CTION		
Good general motor coordination YES x NO			
Side dominance: Right Left C		lot acquire	x be
<u>Good fine motor skills</u> YES D NO x		or acquire	
Good space-time coordination YES NO x			

# WEEKLY TIMETABLE OF THE STUDENT

Day	TIME OF ENTRY	EXIT TIME	THERAPY
Monday	10.20	16.20	Х
Tuesday	9.20	16.20	Х
Wednesday	8.20	11.20	Х
Thursday	8.20	16.20	
Friday*	8.20	16.20	

Weekly school attendance: 32 h

### **DESCRIPTION OF THE CLASS**

A. attends the second year of kindergarten. The class group in which it is inserted is heterogeneous by age and consists of 21 children, including 9 males and 12 females. There are no other students in a situation of handicap; only one child follows cognitive behavioral therapy during school hours. The classroom climate is cooperative, peaceful and positive. In class A. shows to be at ease and, immediately, has accepted the constant presence of the support teacher. He is a child much loved by his companions and receives many demonstrations of affection. Everyday the classmates try to establish with A. behavior of verbal and gestural contact (kiss, caress, take by the hand) or sharing the game. They often intervene on A. imitating the teacher's modality. A. does not always allow himself to be "guided" by his companions and interact with them, but it shows annoyed by removing the other or crying.

#### ANALYSIS OF THE STARTING SITUATION

#### AREA OF AUTONOMY

A. does not present difficulties of separation from the parental figures. In personal autonomy, the child collaborates with the adult in dressing; on the contrary, sphincter control is not achieved. At the table, he recognizes the table of his section and sits down. If not suggested, he tends to eat with his hands. In both eating and hand washing, a physical prompt is required to perform the various steps correctly.

#### SOCIO-AFFECTIVE AREA

His relationship with adults is certainly preferable compared to that with peers, which initially seems to be absent. He likes the demonstrations of affection, but his emotional reactions are often accompanied by an excess of body heat (he throws himself on others, he bites, etc.). Following the directions it is often delayed, and the request must be repeated several times. The eye contact remains alternating and little integrated; gaze triangulation is absent. The child turns to his name after repeated calls. It has variable participation skills: the child demonstrates participation skills that vary significantly depending on his interests.

#### LINGUISTIC AREA

The language is characterized by vocalizations and pseudo-languages that accompany spontaneous activity; sporadically produces single words ("mum", "turns").

He expresses rejection of things or people by pushing with his hand and making it clear that what is offered to him annoys him. He expresses the emotions of happiness smiling and looking for physical contact with the adult, instead when tired or nervous tends to jump on the ground, to jump nervously or to give screams of disapproval. He has recently begun to take the teacher's hand by pulling the latter to the desired place (example: lead the teacher in front of the table where the water jug is placed to express the will to drink) and to offer his hand for say "give".

#### PERCEPTIVE SENSE AREA AND SPACE-TIME ORIENTATION

A. is very sensitive to musical language: he moves swinging in time to music. When free, repeat some activities in a continuous manner (e.g. bring objects to the mouth, throw yourself on the ground...).

#### **PSYCHOMOTOR AREA**

A. maintains all postures and performs all postural steps independently. There are motor stereotypes (swinging, walking with the legs extended, bringing objects to the mouth) especially in moments of fatigue or unstructured activity. He tends to leave the classroom. He is learning to manipulate and use the most diverse materials (salt paste, finger paints...). A. has just learned to perform simple interlocking games.

#### NEUROPSYCHOLOGY

Understanding of simple orders is present. A. shows little interest in graphic activity. The manipulation of objects is not always functional; the child picks up the toy and fixes it, touches it, shakes it, shakes it, slams it, brings it to his mouth. A. plays alongside his classmates but nevertheless does not take part in-group play.

# SUMMARY OF EDUCATION-TEACHING PROGRAM

The pupil's schedule will be:				
Equal to the class: YES □ NO x				
DIFFERENT FOR		The c	ontent differentiation is char	racterized by:
<ul> <li>GOALS</li> <li>METHODOLOGY</li> <li>CONTENT</li> <li>STRATEGY</li> <li>SPACE</li> <li>TIMING</li> </ul>	× × × × × ×	•	SEMPLIFICATIONS SOBSTITUTIONS INTEGRATIONS RIDUCTIONS	x × x x

# INDIVIDUAL TEACHING PROGRAM

#### SOCIO-AFFECTIVE AREA

General objectives	Specific goals Increasing the appearance of communicative gestures
Improving socialization	Developing the eyes contact
	Increasing the play activity (the functional game, the wait for the turn)

#### AREA OF AUTONOMY

General objectives	Specific goals
Reinforcing the basic autonomy	Absolve small charges in the group (tasks such as the waiter)
	Autonomy in eating and hand washing
	Task analysis:
	(In the bathroom) stand in front of the sink, pull up the sleeves, open the tap, take the soap and dose

it, soap and rub your hands repeatedly, rinse, close the tap, dry your hands, throw the paper towel into the trash;
(In the canteen) use the fork and the spoon until the end of the lunch, clean the mouth with the napkin, stay seated for the duration of the lunch.
The goal will be achieved when A. will be able to perform the sequence of operations in total autonomy.
Completing the activities undertaken
Organize and store teaching material in its place
Acquire sphincter control

#### LINGUISTIC AREA

General objectives	Specific goals
	Increasing gestural imitation
	Indicating or delivering items or images nominated by the teacher
Improving verbal and non-verbal communication	Making spontaneous requests
	Acquiring new words
	Making verbal deliveries related to the various actions of school life

### MATHEMATICAL LOGICAL AREA

General objectives	Specific goals

perception	Matching figures / shake
	Classifying objects by shape-colour-size
	Discriminating and naming the colour red, yellow and blue.
	Discriminating tactile qualities: smooth-rough

#### **PSYCHOMOTOR AREA**

General objectives	Specific goals
	Improving hand-eye coordination
	Refining the "small movements of the hand" (e.g., threading pearls, unscrewing and screwing bottle caps, tearing, using glue, etc.)
	Inserting interlocking elements
Developing fine and global	Using the awl
Developing fine and global motor skills	Gripping the graphic tool correctly
	Manipulating different materials
	Imitating with the body the positions taken by the teacher (clap, raise arms, jump, touch the parts of the face and body, etc.)
	Performing passages with the ball, throw it to hit a target, kick it towards one direction, etc.
Consolidating the knowledge of the body schema	Recognizing the main parts of the body

#### **NEUROPSYCHOLOGICAL AREA**

General objectives	Specific goals
Strengthen span of attention and concentration	Paying visual attention to the activity that is taking place

#### METHODOLOGY AND TOOLS

We will work with an individual relationship, favouring integration in every possible occasion. You will use motivating material for the child and emotional partner reinforcements such as positive encouragement and dynamic reinforcements that will allow the child to do something nice only after finishing the activity.

You will need to be firm in the controls and make sure that they are executed. Verbal overloading will be avoided and the sources of auditory and visual distractions will be reduced to a minimum. To communicate with the student it will be appropriate to modulate the language and speak in first person, using few words and well marked: capture the child's gaze and accompany the words with redundant gestures compared to the same communication, for example: 1) I take 2) I put inside 3) close.

Reassuring and stable relationships will be proposed in an ordered and highly structured context. A. will have small tasks in the class group how to serve the snack or distribute the bags, rewarding tasks that enhance the value of others and their own.

At the same time, to facilitate and allow learning, tools such as the Montessori material present in the classroom and the material prepared by the teacher will be used.

We will work above all to promote socialization, communication and refine fine motor skills. It is necessary to ensure that A. can consolidate and refine the skills already possessed and acquire new ones. It is appropriate to structure the activities using the model's strategy, first in a 1: 1 ratio with the teacher (better if positioned in front of the child and not on the side) and, subsequently, extending the social range through small group work.

Instruments: Prepared material: tacks, clothes pegs, sponges, etc. Contact games Structured and non-structured material User-friendly material Sensory material Motivating and pleasing material for A. (plastic animals, toy car, etc.) Use of images, tags

#### **CHECK MODES**

The pupil's learning will be guided by the Montessori material present in the classroom and the material prepared by the teacher: the same materials will be used to report the mistakes made to the child and the teacher. The verifications will then focus on direct observation and will be carried out gradually.

Attention will be given to feedback from the pupil, parents and therapist.

Rome,

#### SIGNATURES OF SETTERS

Position	Name Surname	Signature
PRINCIPAL		
COORDINATOR		
SUPPORT TEACHER		
TEACHERS		
CED COORDINATOR		
CED		
PERSONALE ASL		
PUBBLIC CENETR		
PRIVATE THERAPYST		
PARENTS		
OTHERS:		