Increasing Quality of Life: Providing Education and Resources for Parents of Children with Autism Spectrum Disorder

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Increasing Quality of Life: Providing Education and Resources for Parents of Children with Autism Spectrum Disorder

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Occupational Therapy Doctoral Program, Western Michigan University

OT 7202: Capstone Experience & Project

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April 21, 2023
Abstract

This 14-week capstone project aimed to develop and implement meaningful modifications to an early intensive behavioral intervention center from an occupational therapy (OT) perspective. An evidence-based evaluation of the existing program was conducted, and it was identified that parents of children 18 months to 6 years old with autism lacked the awareness of available resources to support their overall quality of life. A new process was developed and implemented for parents to get connected with resources that met their current needs, resulting in a total of 18 different categories of resources. Parents also received education regarding caregiver burnout and developmental milestones in the form of newsletters and blog posts. The program resulted in decreased depression and anxiety, improved satisfaction with life, improved felt control, and improved sense of involvement and support from the community for parents. Board certified behavior analysts (BCBAs) received training on parent resources and education for sustainability. BCBAs also received education on OT’s scope of practice to increase future collaborations. Results showed that the program improved BCBAs confidence levels and satisfaction levels regarding the available resources for parents. Overall, this capstone project helped spread awareness on how OT can benefit parents of children with autism and BCBAs.
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Introduction

This project concentrated on program development at Wedgwood Christian Services’ Autism Center for Child Development (ACCD) in Kent County. This center provided comprehensive early intensive behavioral intervention for children aged 18 months to 6 years with autism spectrum disorders (ASDs). Therapy was based on the principles of applied behavioral analysis (ABA) and was individualized for each child. Wedgwood’s ACCD offered many services for the children and family. Specialized programs were designed for children and their families’ needs. Classroom-like settings promoted social skills and prepared children for school. Main staff included Board Certified Behavior Analysts (BCBAs) and Registered Behavior Technicians (RBTs). BCBAs held small caseloads to dedicate more time to treating the children. Wedgwood’s ACCD focused on developing and building skills, such as communication, toilet training, dressing and self-care skills, feeding skills and food variety, social skills and group learning, reducing problem behavior, and teaching coping skills. Wedgwood’s ACCD also offered services for parents, such as observation sessions and training in the clinic, home visits from BCBAs, weekly face-to-face contact with child’s BCBA, and daily review of child’s progress by the BCBA. Focus was placed on the parents of the children with ASD when developing and implementing the program at the center. Dr. Candice Lake and Keili Scott provided mentorship for the capstone project concentrated on program development. Dr. Candice Lake served as the director of Wedgwood’s ACCD and president at Michigan Behavior Analysis Providers Association (MiBAP). Her educational background included a doctorate in psychology: applied behavior analysis, master’s in clinical psychology, and bachelor’s in psychology. She was a Board Certified Behavior Analyst - Doctoral (BCBA-D), Licensed Behavior Analyst (LBA), and Limited License Psychologist (LLP). Keili Scott served as the clinical supervisor of early intervention and after-school programs of Wedgwood’s
ACCD. Her educational background included a master’s in Applied Behavioral Analysis. She held the titles of BCBA and LBA as well.

**Literature Review**

Autistic spectrum disorder (ASD) is a neurodevelopmental disorder distinguished by differing levels of impairment of social communication and interaction, and restricted repetitive patterns of behavior, interest, and activity from an early period of life (APA, 2013). Epidemiological data approximate the global prevalence of ASD to be 1 in 54 children and studies find higher prevalence among socioeconomically advantaged groups (Meanner et al., 2020). Parenting a child with ASD comes with many challenges that can be physically and emotionally draining. The first stressor parents encounter is receiving the initial diagnosis (Turnage & Conner, 2022). Following the diagnosis, additional stressors include daily care, coordinating medical care and therapies, behavioral problems of the child, missed time from work, and financial strain (FCA, 2022). The stress can build up over time to have a negative impact on the parent’s quality of life (Turnage & Conner, 2022). Quality of life is considered to be a subjective evaluation of one’s perception of their reality relative to their goals as observed through the lens of their culture and value system (Turnage & Connor, 2022). Quality of life consists of six domains identified by the World Health Organization (WHO) as physical health, psychological health, level of independence, social relationships, environment, and spirituality (WHO, 1997). Caring for a child with ASD takes up a large amount of time, causing parents to have little time to participate in health promotion activities (Turnage & Conner, 2022). These activities are important to keep parents healthy, such as routine medical appointments, screening tests, exercise, and healthy meal planning (FCA, 2022). Parents of children with ASD have been shown to have a lower quality of life in the physical, psychological, social, environmental, and
spiritual domains as compared with adults who are not parents of children with ASD (FCA, 2022). Parents of children with ASD have a greater risk for depression, cardiovascular disorders, and chronic illnesses when compared with parents of children without ASD (FCA, 2022). Occupational therapists (OTs) are distinctly qualified to support productive and meaningful participation in community activities that enhance quality of life for individuals with autism and their families (Crabtree et al., 2018). OTs can support families by discussing typical developmental milestones, promoting engagement in age-appropriate activities, and providing community resources that support participation (Crabtree et al., 2018). It is important to explore interventions to promote quality of life in parents of children with ASD. In doing so, it may aid in preventing chronic illnesses and depression and may also improve the health and quality of life of children with ASD (Turnage & Conner, 2022).

Social Support

Social support for caregivers can be divided into formal or informal support (Wang et al., 2022). Formal support refers to support that is paid for, such as from health care institutions and rehab centers (Wang et al., 2022). Informal support refers to the support obtained without compensation, such as from friends and family (Wang et al., 2022). McGrew & Keys (2014) discovered that perceived social support can buffer the impact of stress on individuals, reduce the burden and depression level of caregivers of ASD, and improve their health-related quality of life and well-being. A study conducted by Marsack-Topolewski (2019) examined perceptions of caregivers of children with ASD on the use and satisfaction with social support networks (Marsack-Topolewski, 2019). Findings indicated that the largest group of caregivers indicated using professional mental health services followed by financial support (Marsack-Topolewski, 2019). It was observed that caregivers were somewhat satisfied with the support they received,
while generally reported higher satisfaction with formal support than informal support (Marsack-Topolewski, 2019). Caregivers and their children with ASD often experience difficulty in obtaining needed services, depending on geographical location and financial positions (Marsack-Topolewski, 2019). Although, findings from the study conducted by Wang et al. (2022) indicated that caregivers can obtain more social support from the outside world through positive strategies, such as actively seeking help and cognitive reconstruction, which aids in them perceiving the availability and usefulness of the support they receive. In addition, the results showed that positive coping can increase caregivers’ social support and improve their quality of life (Wang et al., 2022). Providing social support for caregivers is within OT’s scope of practice. OTs should keep themselves informed of available social support services to help caregivers find needed services. By identifying what directly impacts social support, OTs can provide more specific care and provide caregivers with essential support (Polito & Golden, 2017).

**Behavioral Management Strategies**

Behavioral skills training (BST) consisted of instructions, modeling, rehearsal, and feedback (Hassan et al., 2018). Matson et al. (2009) reviewed literature that indicated training parents on behavioral procedures led to positive treatment effects in the domains of communication, early intervention, and the treatment of specific fears. Hassan et al. (2018) examined the efficacy of BST with, and without in situ training, for teaching caregivers how to use BST to support their child’s context-specific social skills. In situ training involves performing a skill in the natural environment, rather than a contrived setting (Hassan et al., 2018). Results indicated that although caregivers met mastery criterion within BST sessions, their skills didn’t generalize to the natural environment (Hassan et al., 2018). A different study involved caregiver outcomes of parent training versus psychoeducation in children with ASD.
and disruptive behavior (Iadarola et al., 2017). The findings indicated superiority of parent training on reducing child disruptive behavior, improving child adaptive behavior, decreasing parental stress and strain, and improving parental sense of competence (Iadarola et al., 2017). Occupational therapists address behavior in children with autism by identifying the underlying reasons for it. For instance, The Iceberg Theory demonstrates that there are many things that influence the way children behave, such as their sensory processing, social skills, self-esteem, and developmental level. OTs can educate caregivers on the Iceberg Theory as it relates to children’s behaviors, which would combine parent training with behavior skills training. Doing so may help reduce negative behaviors and, in turn, reduce stress in caregivers.

**Mindfulness-Based Interventions**

Mindfulness is the practice of purposely focusing attention on the present moment without judgment (Hartley et al., 2021). Mindfulness is achieved through formal or informal meditation practices, such as using the body to develop awareness through yoga (Hartley et al., 2021). Singh et al. (2020) evaluated the comparative effects of a mindfulness program, psychoeducational program, and in-service training-as-usual on the quality of life of caregivers who provide services to individuals with ASD. The findings indicated that a three-day training in mindfulness meditations and associated contemplative practice provides a better basis for enhancing caregivers’ quality of life than psychoeducation or in-service training-as-usual (Singh et al., 2020). Another study gathered caregivers’ reflections of mindfulness and acceptance-based therapies, including potential barriers and facilitators (Hartley et al., 2021). Caregivers emphasized a need to adapt the length and frequency of daily mindfulness practice around busy lifestyles (Hartley et al., 2021). Findings also suggested that mindfulness and acceptance-based therapies can enhance an individual’s self-awareness and self-regulation, thereby reducing
distress (Hartley et al., 2021). Hartley et al. (2021) highlighted a need to explore creative and flexible ways to help caregivers engage in mindful home practice over time. Mindfulness-based interventions and occupational therapy practice fit well together, as both have strong emphasis on holism (Dale et al., 2002).

Positive Psychology Interventions

Caregivers have numerous ways of coping with their challenging circumstances, such as using distraction, avoidance, social support, and problem-focused coping (Lancastle, 2022). The Positive Reappraisal Coping Intervention (PRCI) consisted of ten generic statements that promote positive reappraisal coping (Lancastle, 2022). A study by Lancastle et al. (2022) was conducted to establish whether positive reappraisal coping was used by caregivers and associated with psychological wellbeing, as well as to assess whether a PRCI was appropriate for caregivers of ASD. Findings from the study suggest that most caregivers of ASD use positive reappraisal strategies that are associated with positive psychological outcomes (Lancastle et al., 2022). Caregivers who reported negative responses were associated with lower resilience, less positive emotions, and a greater sense of caregiver burden (Lancastle et al., 2022). Given the results of this study, the development of PRCI to support caregivers in effective coping strategies would be valuable in supporting their wellbeing (Lancastle et al., 2022). A study conducted by Bekhet & Villarreal (2018) investigated the mediating effects of positive thinking among caregivers of ASD. The results of the study indicated that positive thinking had mediating effects on personal resourcefulness and that depression had a negative correlation (Bekhet & Villarreal, 2018). Positive psychology is congruent with the central assumptions of occupational therapy, since it accentuates the importance of people’s subjective resources (Moller, 2016). However, there is a lack of research on occupational therapists using positive psychology with their clients.
Psychoeducation Interventions

Psychoeducation interventions provide access to quality information and guidance about autism and related effectiveness, behaviors, and conducts (Decroocq, 2020). Hemdi & Daley (2017) conducted a study to evaluate the effectiveness of a psychoeducation intervention created to support mothers of children with ASD. Results of this study indicated that psychoeducation intervention was effective in reducing maternal stress, depression, parent reported ASD symptoms, child behavior problems, and increasing maternal happiness in mothers of children (Hamdi & Daley, 2017). However, it was reported that it may need to be augmented with other forms of support for mothers of children with ASD, such as more condensed sessions on stress and interventions for targeting anxiety (Hamdi & Daley, 2017). A similar study found that caregiver psychoeducation intervention on ASD decreased stress and improved knowledge about ASD (Patra et al., 2015). Patra et al. (2015) stated that psychoeducation interventions are feasible and an acceptable way of caregiver empowerment. Occupational therapists are responsible for providing education to all of their clients, as well as the client’s caregivers when appropriate. Therefore, occupational therapists can provide psychoeducation to caregivers of ASD that may benefit the caregiver and the client with ASD.

Conclusion

As reviewed, there are a wide range of interventions that support and benefit caregivers of individuals with ASD. Reviewed studies revealed that the following interventions for caregivers of ASD reduced stress levels: social support, behavior management training, mindfulness-based, and psychoeducation. The following interventions for caregivers of ASD were proven to reduce depression levels: social support, positive psychology, and psychoeducation. The overall well-being of caregivers of ASD improved by utilizing the
following interventions: social support, behavior management training, mindfulness-based, positive psychology, and psychoeducation. Every study that was reviewed indicated specific interventions that were beneficial for caregivers of ASD. It remained unclear as to what interventions for caregivers of ASD are the most effective in reducing caregiver burden. However, parent training and mindfulness were proven to be more beneficial than psychoeducation for caregivers of individuals with ASD. None of the research reviewed, regarding interventions for caregivers of individuals with ASD, directly involved occupational therapy. Even though occupational therapists have a holistic approach that encompasses many of the concepts discussed in the interventions for caregivers of ASD, there is a lack of research to support it. An occupational therapy perspective can help bridge the gap between single intervention programs for caregivers of individuals with ASD and incorporate a multi-modal intervention technique. Utilizing occupational therapy-based skills to perform a systematic process of identifying the needs of caregivers of ASD and designing an evidence-based program to meet their needs are recommended. The program must be adaptable to meet every caregiver’s individual needs and abilities. The program is aimed to improve the caregivers’ quality of life, which is likely to positively impact outcomes of their children with ASD. Future research is also recommended on caregivers of ASD receiving multi-modal interventions delivered by an occupational therapist.

**Needs Assessment**

Semi-structured interviews with six employees were completed to conduct a thorough needs assessment of Wedgwood’s ACCD. Employees were chosen based on the capstone site mentors’ guidance, which consisted of a director, clinical supervisor, department assistant, behavior technician trainer, and two RBTs. The same 10 questions included in the semi-
structured interview were pre-determined for each employee. Each semi-structured interview was conducted in under 20 minutes by the same interviewer, the occupational therapy student. Parents of children with ASD that received services were not available to be interviewed at that time. Perspectives from the employees were gained and included strengths, weaknesses, opportunities, and threats at Wedgwood’s ACCD.

**Strengths**

There were six BCBAs staffed at the center. BCBAs had small caseloads to dedicate more time to each family and client, which helped connect each family with external resources and supported their needs. A total of 24 children were being served at the center, which also meant 19 families. BCBAs talked to families daily and provided opportunities for observation, in-center training, and in-home visits as often as needed. The strict attendance policy for parents held them accountable for attending all training and meetings. An extensive training process was provided for those working with each child, which included staff obtaining their RBT credential. There were 30 RBTs and four department assistants staffed at the center as well.

**Weaknesses**

Most staff lacked awareness of the resources that were available for parents. For the staff that knew of some available resources, there was no process in place that provided structure and organization. Staff were also unaware of occupational therapy’s scope of practice, which created a barrier for collaboration. Connection with supports, coordinators, or other services were slow with long wait lists, resulting in delayed services. Understaffing had been an issue, as well as COVID barriers. Financial resources limited possibilities to have new materials and build in the environment, which impacted the ability and efficiency in providing additional resources to
families. In-house support was not available, such as speech therapy services and diagnostic testing for autism. Competitors tended to offer higher wages than the center was able to provide.

Opportunities

Finding a way to help with testing would have been beneficial to reduce potential delayed services for children. Social media tactics could have been used to reach out to the community about services they provide and improve the image surrounding ABA services. Financial resources could have opened possibilities for new materials and increased the ability and efficiency in providing additional resources to families. RBTs had opportunities to chat with parents during drop off and pick up time with any concerns. Staff were willing and eager to learn about existing resources for caregivers. Staff were also willing to learn about occupational therapy’s scope of practice to increase collaboration. Parents expressed a desire to be connected to additional resources/supports in the past. BCBAs had direct contact with the parents for a minimum of two hours every month, which created opportunities for parents to express their needs and seek out additional support.

Threats

Understaffing took away supervision hours and BCBA time, which increased burnout. When clients were put on hold due to understaffing, it disrupted services and families' lives. COVID played a part in client and staff attendance, which tied into description of services, family life, and overall success. Sometimes caregivers were reported to not know how to get the care their children need or take their care as seriously as it needed to be. A bad image occurred about ABA therapy previously, which painted a negative picture and deterred families from receiving services. There were no occupational therapists currently employed at the center.
Objectives Achieved

There were 14 objectives that were achieved by the capstone project and experience. Five of those objectives were: (a) Student will advocate for the distinct value of occupational therapy to clients, to team members, and to community members throughout participation in the doctoral capstone experience (DCE) and by dissemination of doctoral capstone project; (b) student will collect data from pre-surveys and questionnaires from at least two staff and five caregivers of ASD within 8 weeks; (c) student will create a program for caregivers of ASD based on information gathered from completed surveys and interviews within 7 weeks; (d) student will begin implementation of the program to at least 5 caregivers of ASD within 8 weeks; (e) student will collect data from post-surveys and questionnaires from at least two staff and five caregivers of ASD within 12 weeks. The objectives and associated learning activities for each are discussed in depth below and are simplified in Table 1.

Objective (a) was addressed from the very beginning of the capstone experience by completing orientation of the site in the first week. A tour of the building was provided to gain a better understanding of the environment. Introductions were exchanged with the current staff, where there were opportunities to explain the student’s occupational therapy role. Observations of multiple ABA sessions were accomplished to gain perspective on the services the site provided. In every interaction with a staff member or parent during the capstone experience, the distinct value of occupational therapy was portrayed and modeled. Through conversations with staff, it was discovered that occupational therapy’s scope of practice was not well known. To learn more about how to advocate for occupational therapy within the site, a podcast called “Advances in Managing Behaviors in Children with ASD: Facilitating ABA and Sensory
Integration Collaboration” by Dr. Watling (2016) was listened to and studied. Strategies were identified for occupational therapists and educators to promote collaboration with BCBA members. Through investigation of evidence-based research, additional ideas to advocate for OT were discovered, such as providing education on caregiver burnout and developmental milestones. Newsletters were developed on both topics to advocate the distinct value of OT and were later also converted to blog posts published on Wedgwood’s website. Training on OT’s scope of practice and the discovered resources was created and conducted for the staff on-site as well. The training helped bridge the gap of the staff’s knowledge of OT to increase future collaborations and informed staff on available resources for caregivers. This paper and a presentation to site representatives and stakeholders also served as opportunities to advocate for OT.

For objective (b), questions in the pre-survey for staff and parents were formulated based on many factors. One factor was holding meetings with site mentors to gather baseline information about the center and how the parents were currently being supported. Self-directed research was conducted to explore available resources that were relevant to the population and influenced the types of questions created. Review of the needs assessment was also helpful in formulating the questions. The pre-survey for staff had 13 questions and the pre-survey for parents had 12 questions. Question types included multiple-choice, multi-select, Likert scale, and open-ended. The quality-of-life questionnaire for parents was discovered from investigating previous research regarding parents of children with autism. Contact was made with the authors and permission was given to utilize the quality-of-life questionnaire. The questionnaire used 48 Likert scale type questions. Informed consent form for parents was created and distributed to all parents once approval from the research committee was obtained.
Semi-formal interviews with four BCBAs were scheduled and conducted. Five parents signed and returned their informed consent form. A semi-formal interview for one parent was scheduled and conducted. The remaining four parents chose to complete the pre-survey and questionnaire on their own and return once completed. Data collected from both the staff and parents’ pre-surveys and questionnaires served as baseline information to identify opportunities that would help fulfill the need for supporting caregivers of ASD.

Objective (c) was achieved by first analyzing the data collected from the pre-surveys and questionnaires. Increased understanding of the staff’s perspective and parent’s perspectives were accomplished, which guided the types of resources to investigate. Seven categories of resources were identified to be previously offered to parents. However, there was no system in place to find and offer those resources to parents. There was a large need to organize existing resources and discover additional resources to offer parents. In addition, a need to educate staff on available resources was established. Criteria for the search of resources to offer parents were determined, which included close proximity to Kent County, directly involved parents and/or children aged 18 months to 6 years with ASD and helped close the existing gap within the center. Possible resources were confirmed worthy by investigating their website or communicating through email/phone to identify if all criteria were met. A total of 18 different categories of resources were deemed to fit the criteria, which consisted of: advocacy and information, approved autism evaluation centers, car seat services, childcare services, clothing services, community events, dental services, diaper services, financial services, food services, legal services, pediatricians, psychiatric and psychological services, school services, social support services, therapeutic services, therapeutic toys and products, and transportation services. Each resource included their name, description, and contact information. Resources
were organized and stored digitally on Google Docs. Paper copies of the resources were also filed on-site.

For objective (d), two online outcome quiz platforms (e.g., Type Form and Qualtrics) were explored as options to assist with creating personalized resource packets for parents. However, both were established to be unsustainable for the center. After collaboration with the site mentors, a paper form was created as a solution to identify the parents’ current areas of need. This form was one-page in length and served to create personalized resource packets for each of the five parents. All 18 categories of resources were listed as a checklist on the form. Parents were provided with the one-page form during week eight of the project, following competition of the pre-survey and questionnaire. Only the categories of resources that were marked by the parents were provided in their packets, as well as information regarding caregiver burnout and developmental milestones. By offering resources that were self-identified to meet the parent’s needs, it removed the barrier of the parent having to initiate the conversation themselves. Parents got to decide how they’d like to receive their personalized resource packet, either digital or physical copies. One parent received their personalized resource packet digitally in an email. Four parents received their personalized resource packet in paper form. This program met the need of the center to have a formal process in place involving connecting parents with resources to meet their individual needs.

Objective (e) was accomplished through creating and conducting the post-surveys from staff and parents. Post-survey questions were created based on analyzed data from pre-survey and program implementation. The staff survey consisted of 13 questions, while the parent survey consisted of 10 questions. Question types for both were multiple-choice, multi-select, Likert scale, and open-ended. The same quality of life questionnaire that was provided with the
pre-surveys was utilized again for parents to measure any potential changes from participating in the program. Semi-formal interviews with staff were conducted at the center, using the post-survey questions. Each interview lasted no longer than 10 minutes and was conducted by the same interviewer, the occupational therapy student. Parents only had 14 days to review and utilize their personalized resource packets before they were asked to complete the post-survey and questionnaire. Parents chose to complete the post-surveys and questionnaires independently and returned physical copies once completed. A verbal reminder was required for parents to complete and return them in a timely manner. By gathering data from post-surveys and questionnaires, the effectiveness of the program was assessed to determine if the gap was met.

**Table 1**

*Timeline of Achieved Objectives and Learning Activities*

<table>
<thead>
<tr>
<th>Weeks</th>
<th>Learning Activities</th>
<th>Objectives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week one &lt;Jan 2-6&gt;</td>
<td>Orientation of the site. Researched quality of life assessments for caregivers of ASD. Began creating pre-surveys for staff and caregivers that support semi-formal interviews. Began creating informed consent forms.</td>
<td>A, B</td>
</tr>
<tr>
<td>Week two &lt;Jan 9-13&gt;</td>
<td>Explored current resources offered by the site for caregivers of ASD. Finalized pre-survey for staff &amp; for caregivers of ASD. Interviewed administrative staff and technician trainer. Interviewed BCBAs. Initiated independent research on outside resources for caregivers of ASD.</td>
<td>B, C</td>
</tr>
<tr>
<td>Week three &lt;Jan 16-20&gt;</td>
<td>Continued research on outside resources for caregivers of ASD.</td>
<td>B, C</td>
</tr>
</tbody>
</table>
| Week four  | Continued research on outside resources for caregivers of ASD.  
|           | Received approval for the project from the committee.  
|           | Modified project from online outcome quiz to personalized resource packet.  
|           | Began organizing discovered resources.  
|           | Continued collaboration with community members regarding resources.  
|           | Created post-surveys for staff.  
|           | Modified informed consent forms. | B, C |
| Week five  | Continued organizing discovered resources.  
|           | Talked with parents and provided informed consent forms.  
|           | Continued research on outside resources for caregivers of ASD.  
|           | Explored opportunities to advocate for OT at the site.  
|           | Explored additional opportunities to support caregivers. | A, C |
| Week six   | Scheduled & conducted semi-formal interviews with one parent.  
|           | Analyzed data from completed parent’s pre-survey and questionnaire.  
|           | Continued organizing discovered resources.  
|           | Began creating a caregiver burnout newsletter.  
|           | Began creating developmental milestones newsletter. | A, B, C |
| Week seven | Scheduled & conducted semi-formal interviews with remaining parents.  
|           | Analyzed data from completed pre-surveys and questionnaires from parents. | A, B, C |
| Week eight  | Collected remaining data from parent pre-surveys and questionnaires. Began meeting with parents to provide Identified Areas of Need form. Began implementation of a program for caregivers of ASD. Created a training presentation for BCBAs on OT’s scope of practice and discovered resources. | A, B, D |
| Week nine  | Continued meeting with parents to provide Identified Areas of Need form. Began providing personalized resource packets to parents. Continued implementation of a program for caregivers of ASD. Continued creating training presentations for BCBAs. Began filing physical copies of the discovered resources on-site. | A, D |
| Week ten   | Continued providing personalized resource packets to parents. Continued implementation of a program for caregivers of ASD. Continued creating training presentations for BCBAs. Conducted semi-formal interview using post-survey and questionnaire for one parent. Modified caregiver burnout newsletter and developmental milestones newsletter. Scheduled semi-formal interviews with staff. | A, D, E |
| Week eleven| Presented training to BCBAs on resources for caregivers and OT’s scope of practice. Conducted semi-formal interviews using post-survey for staff. Continued to conduct semi-formal | A, E |
interviews using post-survey and questionnaire for parents. Communicated with the marketing committee regarding blog posts.

| Week twelve <March 20-24> | Finalized and received approval to add Identified Areas of Need form into the parent's intake packet. Converted caregiver burnout newsletter into traditional paper for blog post. Analyzed per-post survey data from staff. Analyzed pre-post survey data from parents. | A, D |

| Week thirteen <March 27-31> | Began to create the manual regarding capstone projects and experience. Began to create presentations for site representatives and stakeholders. | A |

| Week fourteen <April 3-7> | Presented capstone to site representatives and stakeholders. Continued creating the manual about capstone project and experience. | A |

**Implications**

An occupational therapy student implementing a program for parents of children with ASD at Wedgwood's ACCD had several implications for the field of occupational therapy. First, it demonstrated the value of interdisciplinary collaboration and the benefits of incorporating occupational therapy into ABA parent education. Second, it promoted greater awareness of the role of occupational therapy in addressing the needs of children with ASD and their families. Finally, it may lead to the development of new and innovative approaches to occupational therapy intervention for children with ASD in the future.

From the outcomes of the capstone experience and project, Wedgwood’s ACCD became better equipped at providing additional support for parents of children with ASD. Staff were able
to learn about what resources are available for parents, as well as the scope of OT. The program that has been created has provided the structure the center needed. BCBAs previously struggled with dedicating time to find resources that parents need and the program has taken away that barrier. It also took away the barrier of parents having to initiate the conversation of having a need and requesting help by imbedding it into the intake process. The ability to personalize the resource packets for parents was valuable because it served to meet their current needs, rather than overwhelm them with all the resources available and leave it in their hands to decipher through them.

By staff feeling more confident and satisfied with the resources that were offered to parents of children with autism, it has several implications for the organization. First, it could lead to improved outcomes for children with autism, as parents would have better access to resources and support. Second, it could lead to increased job satisfaction and retention among staff, as they would feel more effective and fulfilled in their work. Finally, it could improve the reputation of the organization, as satisfied parents and staff may recommend the organization to others in their networks. Since BCBAs increased their knowledge of OT's scope of practice, it could lead to more comprehensive and effective treatment plans for clients with a range of needs. This could also improve collaboration and communication between professionals, leading to better outcomes for clients. Additionally, it could open up new opportunities for interdisciplinary research and innovation in the field.

By parents of children with autism receiving a personalized resource packet based on their identified areas of need, it could lead to improved outcomes for the child, reduced stress and caregiver burden for the parent, and increased satisfaction and confidence in their ability to care for their child. By parents of children with autism learning about caregiver burden, it could
lead to them seeking out more support and resources to help them cope with the challenges of caring for their child. This could result in improved mental and emotional well-being for the parents, as well as better outcomes for the child. Additionally, it could lead to increased awareness and understanding of the needs of families affected by autism, which could help reduce stigma and promote empathy and support in the wider community. By parents of children with autism learning about developmental milestones, it could lead to earlier diagnosis and intervention, which has been associated with better outcomes for children with autism. It could also empower parents to be more involved in their child's treatment and to advocate for their child's needs. This could result in improved outcomes for children with autism and increased satisfaction and confidence for parents.

Sustainability of the program at the center will be achieved by following several strategies. First, administrative staff and BCBAs received hands-on training on how to continue creating personalized resource packets for parents. Physical copies of all the contents for the resource packets have been filed and organized on-site. Digital files have been shared with site mentors for freedom to modify as needed in the future. Second, An intake packet for parents already existed and was provided to incoming parents. Therefore, one additional form was added to the intake packet that served to identify their areas of concern. Third, Administrative staff was assigned the role of analyzing that form and compiling the appropriate resources that would make up the parent’s personalized resource packet. Fourth, BCBAs were made aware of how to find the resources and planned on providing them as needed when parents express concern in one or more of the categories. Finally, every year, the parent’s needs will be monitored by mandating completion of the parent intake packet. In doing so, it will identify any chances to provide additional resources that they might not have needed previously.
Conclusion

Changes from the program were identified by comparing data from the pre and post surveys and questionnaires. BCBAs completed a pre-survey prior to implementation of the program and before any conducted training. Data from the pre-surveys completed by BCBAs revealed that knowledge of resources for parents of children with ASD varied between staff and that there was no process established for connecting parents to resources. On average, only one resource was reported to be offered to parents by BCBAs. The average confidence level for BCBAs in offering resources to parents was reported to be two and a half out of 10, which indicated low confidence. BCBAs reported an average satisfaction level of four and three fourths out of 10 regarding the offered resources to parents, which indicated low-moderate satisfaction.

BCBAs completed a post-survey after the program and after attending a training on OT’s scope of practice. Appendix C was provided to all BCBAs during the training. BCBAs also practiced creating personalized resource packets by reviewing mock completed appendix D and gathering appropriate documents from appendix A, B, and E. Data from the post-survey completed by BCBAs conveyed that, on average, BCBAs had a very high likelihood in recommending resources to parents and very high likelihood to collaborate with an occupational therapist in the future. The average confidence level of a BCBA was reported to be eight and a half out of 10 when offering resources to parents, which indicated high confidence. BCBAs reported an average satisfaction level of 9 and three quarters out of 10 offered resources to parents, which indicated high satisfaction.

Parents that chose to participate in the program completed the pre-survey and quality of life questionnaire prior to receiving their personalized resource packet. Most parents reported that they have not received any recommended resources from Wedgwood staff. On average,
parents reported a satisfaction level of five out of 10 with resources being offered from Wedgwood. Information regarding autism was the most requested type of resource reported by parents. The mode of each response from parents was determined from the quality-of-life questionnaire and reported in Table 2. Parents completed the one-page form from appendix D and their responses were reviewed to create their personalized resource packets. All parents received forms from appendix A and B in their packet, as well as the types of resources indicated on their completed “Identified Area of Need” form. An average of seven categories of resources were requested from parents using appendix D. Advocacy and information resources were requested from four parents. Approved autism evaluation center resources were requested from one parent. Three parents requested childcare resources. Community event resources were requested from three parents. One parent requested financial resources. Pediatrician resources were requested from three parents. Psychiatric and psychological resources were requested from four parents. School resources were requested from four parents. Social support services were required from three parents. Resources regarding therapeutic interventions were requested from two parents. Toys and therapy product resources were requested from three parents. Lastly, transportation resources were requested from three parents. Appendix E contains all the resources that were available to parents.

Post-survey and quality of life questionnaires were completed by parents after receiving their personalized resource packets. One parent had 18 days to review and utilize their packet prior to filling out the post-survey and quality of life questionnaire, whereas the other four parents had 14 days. According to the post-survey results, parents reported receiving eight or more resources from Wedgwood. Parents reported an average satisfaction level of eight out of 10 for resources received from Wedgwood. Most parents reported utilizing resources regarding
advocacy and information on autism. Review Table 2 to understand the data from the completed post quality of life questionnaires. Parents rated their overall quality of life on a zero to 10 scale, zero being not at all satisfied and 10 being extremely satisfied. Their overall quality of life only slightly improved from participation in the program from six point one zero out of 10 to six point six zero out of 10. On average, 10 out of 28 questions showed improvement based on the parents' report on the questionnaire, 13 out of 28 showed no change, and 5 out of 28 showed decline. Major improvements that were shown from the majority of parents were decreased depression or anxiety, improved satisfaction with life, improved felt control in their own life, improved set and achieved goals in their life, improved sense of community, and improved support from the community. Major no changes that were shown were feelings of happiness and content, satisfaction with close relationships, and satisfaction with financial situations. Average declines were shown for feelings of guilt.

Table 2

Quality of Life in Autism Questionnaire Results

<table>
<thead>
<tr>
<th>Questions</th>
<th>Pre-Mode</th>
<th>Post-Mode</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am satisfied with my life</td>
<td>Moderately (2), Quite a bit (2)</td>
<td>Quite a bit (3)</td>
</tr>
<tr>
<td>I feel stressed</td>
<td>Quite a bit (2)</td>
<td>Slightly (2)</td>
</tr>
<tr>
<td>I feel happy and content</td>
<td>Moderately (3)</td>
<td>Moderately (2), quite a bit (2)</td>
</tr>
<tr>
<td>I feel depressed or anxious</td>
<td>Moderately (2), Quite a bit (2)</td>
<td>Moderately (2)</td>
</tr>
<tr>
<td>I feel good about myself as a person</td>
<td>Moderately (2), Quite a bit (2)</td>
<td>Quite a bit (2), very much (2)</td>
</tr>
<tr>
<td>I am satisfied with my close relationships</td>
<td>Moderately (2), Quite a bit (2)</td>
<td>Moderately (2), very much (2)</td>
</tr>
<tr>
<td>People are there for me when I</td>
<td>Very much (2)</td>
<td>Very much (3)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------------------------------------------------</td>
<td>---------------------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>I need them</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am satisfied with my social life</td>
<td>Slightly (2), not at all (2)</td>
<td>Moderately (3)</td>
</tr>
<tr>
<td>I am satisfied with my family life</td>
<td>Moderately (2)</td>
<td>Moderately (2), quite a bit (2)</td>
</tr>
<tr>
<td>I am satisfied with my financial situation</td>
<td>Moderately (2), Quite a bit (2)</td>
<td>Moderately (2), quite a bit (2)</td>
</tr>
<tr>
<td>I am satisfied with where I live</td>
<td>Quite a bit (2)</td>
<td>Very much (2)</td>
</tr>
<tr>
<td>I have enough money to meet my needs</td>
<td>Quite a bit (4)</td>
<td>Moderately (2), quite a bit (2)</td>
</tr>
<tr>
<td>I am satisfied with my achievements</td>
<td>Moderately (4)</td>
<td>Moderately (2), quite a bit (2)</td>
</tr>
<tr>
<td>I am satisfied with my general health</td>
<td>Moderately (2), very much (2)</td>
<td>Moderately (2), quite a bit (2)</td>
</tr>
<tr>
<td>I have a healthy lifestyle</td>
<td>Moderately (3)</td>
<td>Moderately (2), quite a bit (2)</td>
</tr>
<tr>
<td>I am satisfied with my leisure activities</td>
<td>Not at all (2)</td>
<td>None</td>
</tr>
<tr>
<td>Health problems stop me doing things that I want to do</td>
<td>Moderately (3)</td>
<td>Not at all (4)</td>
</tr>
<tr>
<td>I feel in control of my life</td>
<td>Moderately (2)</td>
<td>Quite a bit (2)</td>
</tr>
<tr>
<td>I set and achieve goals in my life</td>
<td>Moderately (4)</td>
<td>Moderately (2), very much (2)</td>
</tr>
<tr>
<td>I can make a plan of action and follow it</td>
<td>Quite a bit (4)</td>
<td>Moderately (2), very much (2)</td>
</tr>
<tr>
<td>I make my own decisions</td>
<td>Moderately (2), very much (2)</td>
<td>Very much (3)</td>
</tr>
<tr>
<td>I feel guilty</td>
<td>None</td>
<td>Slightly (2), moderately (2)</td>
</tr>
<tr>
<td>I am part of a community</td>
<td>Slightly (2), Not at all (2)</td>
<td>Very much (2)</td>
</tr>
<tr>
<td>I can get the support that I need from the community</td>
<td>Not at all (2)</td>
<td>Very much (2)</td>
</tr>
<tr>
<td>I am able to get to where I</td>
<td>Very much (3)</td>
<td>Very much (4)</td>
</tr>
</tbody>
</table>
need to

<table>
<thead>
<tr>
<th>I feel safe in my everyday life</th>
<th>Quite a bit (2), very much (2)</th>
<th>Very much (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel respected in my everyday life</td>
<td>Moderately (2), very much (2)</td>
<td>Very much (3)</td>
</tr>
<tr>
<td>I am satisfied with the availability of health services</td>
<td>Moderately (2), very much (2)</td>
<td>Very much (3)</td>
</tr>
</tbody>
</table>

One major limitation was the short amount of time that parents had to review and utilize the resources that were given. It is believed that a more accurate picture regarding the effectiveness of the program would have been identified by increasing the amount of time parents had with their personalized resource packets. Also, better representation would have been available on how the resources may have impacted their quality of life if more time was allowed. It is expected that their quality of life will continue to improve as they utilize the resources provided. Another limitation was the subjective nature in the data collected due to quality of life being measured by an individual’s own perception of their reality relative to their goals as observed through the lens of their culture and value system.

For future work at the center, support groups for parents of children with autism are recommended to further increase their sense of community and improve their quality of life. Opportunities to implement regulation strategies, such as emotional regulation and sensory processing activities from an occupational therapy perspective may be beneficial in reducing children’s challenging behaviors. An investigation on how the BCBAs at the center collaborate with outside OTs can identify potential areas in need of improvement for a better understanding of how these two professions can work together. Lastly, grant writing for supplies that the center may need to help support the children in reaching their goals is recommended in the future.
Overall, the program served to benefit the BCBAs by increasing their knowledge of OT and likelihood of future collaborations. BCBAs were pleased with their immediate access to 18 different categories of resources to offer parents. Their confidence level increased by six points, making BCBAs more likely to recommend resources to parents. Their satisfaction levels increased by five points, which may increase the BCBAs motivation levels to explore the resources that are offered. As a result of the program, parents were offered significantly more resources to support their overall quality of life. Satisfaction levels of parents increased by three points, which may lead to them seeking out additional support in the future. By the parents utilizing their requested resources, it may lead to improved confidence in their ability to care for their child. Lastly, connecting parents with resources that fit their identified needs showed an average improvement in 35.7% of the areas in their quality of life.
Appendices

Appendix A: Caregiver Burnout

**Action Steps**

**Understand Fatigue**
- Take time to reflect on your level of exhaustion/fatigue by asking yourself the following questions:
  - Do you feel excessively tired throughout the day?
  - Did you have a restless night’s sleep?
  - Did you sleep enough to deal with daily life responsibilities?
- Create a plan of care for yourself if the answers to these questions indicate fatigue.

**Determine Causes of Stress**
- Make a list of every situation that has caused you anxiety.
- Break each item on the list down, laying out a flow chart of cause and effect.
- When the root cause of the stress is laid out in front of you, it is easier to find a solution.

**Determine Quality of Spirituality**
- Do you make time to indulge in something you appreciate, such as painting or crafting, growing vegetables, a pastime, or even a daily diary?
- Do you go to a sanctuary, regularly meditate, or find a different way to express your religious views freely?
- Are you able to incorporate laughter into your daily life?
- Do you manage to spend quality time outside?

**Determine Emotional Self-Care**
- Do you have healthy coping mechanisms that allow you to replenish?
- Do you include practices in your daily life that allow you to replenish?

(Churchill & Ross, 2022)
Parenting a child with ASD involves providing them with the best version of yourself, by taking care of your body and your mind. Finding enough time to care for yourself is hard when caring for a child with ASD. Decide on at least one self-care activity every day. Then, aim to implement more and more as time goes on.

**Self-Care Strategies**

**Ask for Help**
- This is the hardest step.
- Caregivers often feel they must do things on their own. Please do not believe this.
- There are many resources available to assist caregivers.
- People genuinely care and want to help.

**Learn Behavior Management Strategies**
- To reduce child disruptive behavior, improve child adaptive behavior, decrease parental stress and strain, and improve parental sense of competence (Ladarola et al., 2017).
- By participating in trainings that are offered every month to parents by Board Certified Behavior Analysts through Wedgwood Christian Services.

**Practice Mindfulness**
- To enhance self-awareness and self-regulation, leading to reducing distress (Hartley et al., 2021).
- By participating in guided meditation, guided imagery, visualization, or other exercises that can be practiced anywhere, anytime. Many exercises are available online and on apps (e.g., Headspace).

**Eat Well-Balanced Meals**
- To increase energy levels, improve mood, and reduce symptoms of anxiety and depression (Brownn, n.d.)
- By cooking more meals at home and prioritizing fresh meat, vegetables, and fruit. Meal planning can be made easier by using apps, such as Mealime or Yummly.
Self-Care Strategies

Move Your Body
- To improve your mental health and mood, as well as take time for yourself (Brown, n.d.).
- By taking a walk, being active at home, joining a fitness center, class, or exercise program.

Get Quality Sleep
- To improve both your physical and emotional health (Brown, n.d.).
- By creating a comfortable sleeping environment and practicing good sleep hygiene. Aim for 6-8 hours of sleep every night.

Connect With Nature
- To increase relaxation and emotional and physical well-being and decrease stress, worry, and depression (Aarp, 2022).
- By spending at least a few times each week outside, such as relaxing in the backyard, hiking, swimming, or having a picnic.

Stay Informed
- To decrease stress and improve knowledge about ASD (Patra et al., 2015).
- By reading evidence-based books/articles, communicating with health care professionals, and self-directed research.

Seek Out Social Support
- To buffer the impact of stress, reduce burden and depression levels, and improve quality of life (McGrew & Keys, 2014).
- By formally joining a social support group (online or in-person) and/or by keeping communication open with family and friends.

By applying these strategies, ASD caregivers will be able to better manage and preserve their mental health. By doing so, they will succeed in providing the best level of care possible for their loved ones. This is a process that can take months, even years, so give yourself time to adjust.

(Churchill & Ross, 2022)
References


Appendix B: Developmental Milestones

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# Developmental Milestones

<table>
<thead>
<tr>
<th>Movement/Physical Development</th>
<th>Cognitive (learning, thinking, problem-solving)</th>
<th>Language/Communication</th>
<th>Social/Emotional</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Lifts head 45 degrees while prone (lying on tummy)</td>
<td>• Watches you as you move</td>
<td>• Makes sounds other than crying</td>
<td>• Calms down when spoken to or picked up</td>
</tr>
<tr>
<td>• Opens and closes hands</td>
<td>• Follows a toy with eyes from side to side</td>
<td>• Reacts to loud sounds</td>
<td>• Looks at your face</td>
</tr>
<tr>
<td>• Brings hands together toward middle of body</td>
<td>• Startles at loud noises</td>
<td>• Makes eye contact with you</td>
<td>• Seems happy to see you when you walk up to them</td>
</tr>
<tr>
<td>• Attempts to reach for toy</td>
<td></td>
<td></td>
<td>• Smiles when you talk to or smile at them</td>
</tr>
<tr>
<td>• Breastfeeds or drinks from a bottle without choking, coughing or gagging</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2-3 Months

It is important to note that all children are unique in their development. The guidelines can help you identify the need for a referral from a physician.
Developmental Milestones

4-6 Months

It is important to note that all children are unique in their development. The guidelines can help you identify the need for a referral from a physician.

- Rolls belly to back (both to right and left sides)
- Rolls back to belly (both to right and left sides)
- Hits at dangling toys with hands
- Lifts head to 90 degrees while prone (lying on tummy)
- Holds head steady without support when holding them
- Raises entire chest when on stomach and bears weight on hands
- Brings hands to mouth
- If hungry, opens mouth when seeing breasts
- Looks around at things
- Reaches for toys and brings to mouth
- Watches faces and looks at your face while feeding
- Makes sounds like "ooh", "aahh" (cooing)
- Makes sounds back when being talked to
- Turns head towards the sound of your voice
- Copes some of the gestures you make, like waving, pointing, or clapping
- Smiles on their own to get your attention
- Chuckles when you try to make them laugh
- Looks at you, moves, or makes sounds to get or keep your attention

6 Months

It is important to note that all children are unique in their development. The guidelines can help you identify the need for a referral from a physician.

- Begins to sit using hands for support
- Transfers toys from hand to hand
- Reaches with increased control for a toy
- Shakes and bangs toys
- Pushes up with straight arms when on tummy
- Closes lips to show they don't want more food
- Reaches to grab a toy they want
- Puts things in their mouth to explore them
- Looks around at things
- Takes turns making sounds with you
- Blows "raspberries" (sticks tongue out and blows)
- Makes squealing noises
- Points at things
- Knows familiar people
- Likes to look at themselves in a mirror
- Makes sounds to express happiness or displeasure
- Enjoys playing with others, especially family
- Responds to other people's emotions and often seems happy


Developmental Milestones

7-9 Months

It is important to note that all children are unique in their development. The guidelines can help you identify the need for a referral from a physician.

Movement/Physical Development
- Sustained sitting without using their arms for support
- Crawls on hands and knees with stomach off the floor (9 months+)
- Feeds self finger foods (6 months+)
- Moves into sitting position independently
- Eats mashed table food

Cognitive (learning, thinking, problem-solving)
- Looks for objects when dropped out of sight
- Watches object as it falls
- Plays peek-a-boo
- Puts things in mouth

Language/Communication
- Imitates simple play such as “peek-a-boo”
- Makes different sounds like “mamamama” and “babababa”
- Lifts arms up to be picked up
- Points at things

Social/Emotional
- Shy, clingy, or fearful around strangers
- Shows several facial expressions, like happy, sad, angry, and surprised
- Looks when you call their name
- Reacts when you leave (looks, reaches for you, or cries)
- Smiles or laughs when you play peek-a-boo

1 year

It is important to note that all children are unique in their development. The guidelines can help you identify the need for a referral from a physician.

Movement/Physical Development
- Pulls off socks and shoes
- Pulls up to stand
- Walking (1-2 steps alone)
- Drinks from a cup without a lid, as you hold it
- Cooperates with dressing (helps to pull off clothing; extends arms and legs to assist with dressing)
- Scribbles on paper
- Uses thumb and pointer finger to pick up small objects

Cognitive (learning, thinking, problem-solving)
- Puts something in a container, like a block or a cup
- Looks for things they see being hidden, like a toy under a blanket
- Bangs two things together
- Looks at the correct picture when named
- Follows simple directions, such as “pick up your book”
- Lets things go without help

Language/Communication
- Waves “bye-bye”
- Calls a parent “mama” or “dada” or another special name
- Makes sounds, looks excited or goes quiet when you talk with them or say their name
- Coos and laughs
- Responds to their own name by looking, widening their eyes, listening or smiling

Social/Emotional
- Prefers certain people and toys
- Imitates sounds, gestures, or actions to get your attention
- Cries when you leave and is shy around strangers
- Enjoys playing games like “peek-a-boo” and “pat-a-cake”
- Shows affection with familiar people
## Developmental Milestones

### Movement/Physical Development
- Walks well with infrequent falls
- Eats a variety of soft, chopped table food
- Drinks from a sippy cup independently
- Squats to pick up an object and stands up again without falling

### Cognitive (learning, thinking, problem-solving)
- Stacks 2 blocks
- Tries to use things the right way, like a phone, cup, or book

### Language/Communication
- Tries to say one or two words besides "mama" or "dada", like "ba" for ball or "da" for dog
- Looks at a familiar object when you name it
- Follows directions given with both a gesture and words
- Points to ask for something or to get help

### Social/Emotional
- Copies other children while playing, like taking toys out of a container when another child does
- Shows you an object they like
- Claps when excited
- Hugs stuffed dolls or other toys
- Shows affection (hugs, cuddles, or kisses you)

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### 15 months

It is important to note that all children are unique in their development. The guidelines can help you identify the need for a referral from a physician.
### Developmental Milestones

<table>
<thead>
<tr>
<th>Movement/Physical Development</th>
<th>Cognitive (learning, thinking, problem-solving)</th>
<th>Language/Communication</th>
<th>Social/Emotional</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>18 months</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Walks without holding on to anyone or anything</em></td>
<td><em>Copies you doing chores, like sweeping with a broom</em></td>
<td><em>Tries to say three or more words besides “mama” or “dada”</em></td>
<td><em>Moves away from you, but looks to make sure you are close by</em></td>
</tr>
<tr>
<td><em>Scribbles</em></td>
<td><em>Plays with toys in a simple way, pushing a toy car</em></td>
<td><em>Follows one-step directions without gestures, like giving you the toy when you say, “Give it to me”</em></td>
<td><em>Points to show you something interesting</em></td>
</tr>
<tr>
<td><em>Drinks from a cup without a lid and may spill sometimes</em></td>
<td><em>Points to at least one body part</em></td>
<td><em>Knows that common objects are for, such as a phone, brush, or spoon</em></td>
<td><em>Puts hands out for you to wash them</em></td>
</tr>
<tr>
<td><em>Feeds themselves with their fingers</em></td>
<td><em>Tries to use a spoon</em></td>
<td><em>Looks at a few pages in a book with you</em></td>
<td><em>Helps you dress them by pushing arm through sleeve or lifting up foot</em></td>
</tr>
<tr>
<td><em>Tries to use a spoon</em></td>
<td><em>Climbs on and off a couch or chair without help</em></td>
<td><em>Will understand the purpose of a toy and can operate it according to the function</em></td>
<td></td>
</tr>
<tr>
<td><em>Throw/kicks balls</em></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Movement/Physical Development</th>
<th>Cognitive (learning, thinking, problem-solving)</th>
<th>Language/Communication</th>
<th>Social/Emotional</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2 years</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Kicks a ball</em></td>
<td><em>Hold something in one hand while using the other hand; for example, holding a container and taking the lid off</em></td>
<td><em>Points to things in a book when you ask, like “where is the bear?”</em></td>
<td><em>Notices when others are hurt or upset, like pausing or looking sad when someone is crying</em></td>
</tr>
<tr>
<td><em>Runs</em></td>
<td><em>Tries to use switches, knobs, or buttons on a toy</em></td>
<td><em>Says at least two words together, like “more milk”</em></td>
<td><em>Looks at your face to see how to react in a new situation</em></td>
</tr>
<tr>
<td><em>Walks up a few stairs without help</em></td>
<td><em>Plays with more than one toy at the same time, like putting toy food on a toy plate</em></td>
<td><em>Points to at least two body parts when you ask them to show you</em></td>
<td><em>Plays briefly beside other children, gets excited when with other children</em></td>
</tr>
<tr>
<td><em>Eats with a spoon</em></td>
<td><em>Begin to sort shapes and colors</em></td>
<td><em>Uses more gestures than just waving and pointing, like blowing a kiss or nodding yes</em></td>
<td><em>Imitates others, especially adults and older children</em></td>
</tr>
<tr>
<td><em>Snips with scissors</em></td>
<td><em>Follows two-step directions, such as “pick up your truck and put it on the shelf”</em></td>
<td></td>
<td><em>Shows more independence</em></td>
</tr>
<tr>
<td><em>Imitates horizontal lines, vertical lines and circular marks</em></td>
<td></td>
<td></td>
<td><em>Beginning to play with other children, as in chasing one another</em></td>
</tr>
<tr>
<td><em>Removes elastic waist pants</em></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Builds at least a 6 block tower</em></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Pushes, pulls or carries toys while walking</em></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Developmental Milestones

## Movement/Physical Development
- Uses hands to twist things, like turning doorknobs or unscrewing lids
- Takes some clothes off by themselves, like loose pants or an open jacket
- Jumps off the ground with both feet
- Turns book pages, one at a time, when you read to them.
- Pedals a tricycle
- Catches a large ball thrown gently from very close
- Runs well without falling (2.5 years)
- Drinks from an open cup

## Cognitive (learning, thinking, problem-solving)
- Uses things to pretend, like feeding a block to a doll as if it were food
- Shows simple problem-solving skills, like standing on a small stool to reach something
- Follows two-step instructions like “Put the toy down and close the door.”
- Shows they know at least one color, like pointing to a red crayon when you ask, “Which one is red?”

## Language/Communication
- Says about 50 words
- Says two or more words, with one action word, like “doggie run”
- Names things in a book when you point and ask, “what is this?”
- Says words like “I, me, or “we”

## Social/Emotional
- Plays next to other children and sometimes plays with them
- Shows you what they can do by saying, “Look at me!”
- Follows simple routines when told, like helping to pick up toys when you say, “It’s clean-up time.”

---

# Developmental Milestones

## Movement/Physical Development
- Cuts straight lines
- Buttons large buttons
- Throws tennis ball 5-7 feet overhand with one hand
- Catches large ball thrown from 5 feet away
- Uses a fork
- Puts on some clothes by themselves,
- Strings items together, like large beads or macaroni
- Holds writing utensil with thumb, index and middle fingers while hand moves as a unit

## Cognitive (learning, thinking, problem-solving)
- Copies vertical, horizontal lines and circles
- Does puzzles with three or four pieces
- Knows what “two” means
- Knows common colors
- Avoids touching hot objects, like a stove, when you warn them
- Plays make-believe with dolls, animals, and people
- Uses imagination to create stories or play

## Language/Communication
- Talks with you in conversation using at least two back-and-forth exchanges
- Asks “who,” “what,” “where,” or “why” questions, like “Where is mommy/daddy?”
- Says what action is happening in a picture or book when asked, like “running,” “eating,” or “playing”
- Says first name, when asked
- Talks well enough for others to understand, most of the time

## Social/Emotional
- Shows concern and affection for others without prompting
- Copies adults and friends (e.g., runs when other children run)
- Takes turns in games
- Separates easily from parents
- Shows a wide range of feelings
- Enjoys routines and may get upset with a major change
- Dresses and undresses self
- Enjoys simple household tasks
## Developmental Milestones

<table>
<thead>
<tr>
<th>Movement/Physical Development</th>
<th>Cognitive (learning, thinking, problem-solving)</th>
<th>Language/Communication</th>
<th>Social/Emotional</th>
</tr>
</thead>
<tbody>
<tr>
<td>Static tripod grasp (writing utensil held with thumb, index and middle fingers)</td>
<td>Understands the concepts of “same” and “different”</td>
<td>Says sentences with four or more words</td>
<td>Plays cooperatively with other children</td>
</tr>
<tr>
<td>Cuts out a circle</td>
<td>Understands the concept of counting and may know numbers</td>
<td>Says some words from a song, story, or nursery rhyme</td>
<td>Negotiates solutions to conflicts</td>
</tr>
<tr>
<td>Zips jacket</td>
<td>Knows basic colors</td>
<td>Talks about at least one thing that happened during his day, like “I played soccer.”</td>
<td>Prefers playing with other children than playing alone</td>
</tr>
<tr>
<td>Copies intersecting lines, diagonal lines, simple shapes, some letters and numbers</td>
<td>Tells what comes next in a well-known story</td>
<td>Answers simple questions like “What is a coat for?” or “What is a crayon for?”</td>
<td>Enjoys doing new things</td>
</tr>
<tr>
<td>Balances on one foot for 10 seconds or longer</td>
<td>Draws a person with three or more body parts</td>
<td>Becomes more creative in make-believe play</td>
<td>Becomes more creative in make-believe play</td>
</tr>
<tr>
<td>Serves themselves food or pours water, with adult supervision</td>
<td>Fully potty trained</td>
<td>Confuses what’s real and what’s make-believe</td>
<td>Expresses likes and dislikes</td>
</tr>
<tr>
<td>Unbuttons some buttons</td>
<td>It is important to note that all children are unique in their development. The guidelines can help you identify the need for a referral from a physician.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 4 years
- Hops on one foot
- Colors within the lines
- Draws a person with at least 6 or more different parts
- Cuts out a square
- Copies a triangle and other geometrical shapes
- Prints some letters and numbers
- Uses toilet independently
- Swings and climbs
- Uses fork and spoon, and sometimes a table knife
- Does somersaults
- Counts to 10 or more objects
- Names at least four colors correctly
- Understands items used every day, such as food or money
- Pays attention for 5 to 10 minutes during activities
- Understands the concept of time
- Recognizes own printed name and may be able to write name
- Tells a story she heard or made up with at least two events. For example, a cat was stuck in a tree and a firefighter saved it
- Answers simple questions about a book or story after you read or tell it to him
- Keeps a conversation going with more than three back-and-forth exchanges
- Uses or recognizes simple rhymes (bat-cat, ball-tall)
- Wants to please friends and be like friends
- Agrees to rules more easily
- Likes to sing, dance and act
- Knows the difference between fantasy and reality
- Knows who he is a boy or a girl
- Expresses likes and dislikes
- Shows increasing independence
- Seeks new experiences
- Demonstrates both demanding and cooperative behaviors
# Developmental Milestones

<table>
<thead>
<tr>
<th>Movement/Physical Development</th>
<th>Cognitive (learning, thinking, problem-solving)</th>
<th>Language/Communication</th>
<th>Social/Emotional</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Dynamic tripod grasp (held with thumb, index and middle fingers with ring and pinky curled into palm; movement of writing utensil comes from the fingertips)</td>
<td>• Can tell you their age</td>
<td>• Able to describe a favorite TV show, movie, story, or other activity</td>
<td>• Wants their parents to play with them</td>
</tr>
<tr>
<td>• Throws at a target 5 feet away and hits target fairly consistently</td>
<td>• Begin to understand cause-and-effect relationships</td>
<td>• Speaks with correct grammar most of the time</td>
<td>• Usually likes to play with friends of the same gender</td>
</tr>
<tr>
<td>• Copies letters and numbers</td>
<td>• Are learning to express themselves well through words</td>
<td>• Reads some simple words</td>
<td>• Plays themes include events never personally experienced (e.g., goes to space)</td>
</tr>
<tr>
<td>• Skips independently</td>
<td>• Are learning to write</td>
<td></td>
<td>• Plays and negotiates with others during play</td>
</tr>
<tr>
<td>• Rides a bicycle independently</td>
<td></td>
<td></td>
<td>• Develops a sense of humor. May make simple jokes and funny books and rhymes</td>
</tr>
</tbody>
</table>

### 6 years

It is important to note that all children are unique in their development. The guidelines can help you identify the need for a referral from a physician.

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## References


Appendix C: Occupational Therapy Problem Checklist

Are Occupational Therapy Services Needed?
All children are different and develop skills at their own pace. However, if you think the child may be struggling with some of the skill areas below, contact an occupational therapist.

Developmental Delay
Meaning that a child is behind in developing skills that are common during a particular age or during a particular time period. Being behind in a combination of skills or not meeting developmental milestones.
- Not reaching developmental milestones of sitting, crawling, and walking
- Not learning at an age-appropriate level
- Not developing age appropriate play and social skills

Fine Motor Skills
Small movements made with fingers, toes, wrists, lips, and tongue. For example, holding a small object or picking up a spoon.
- Manipulating toys and puzzles
- Holding a pencil
- Using silverware or straws at an age-appropriate time
- Using scissors
- Using zippers, buttons, shoelaces
- Coloring, drawing, tracing, prewriting shapes
- Poor handwriting, letter/number formation
- Not developing a hand dominance at an age-appropriate time
- Avoiding tasks and games that require fine motor skills

Movement, Strength, and Balance Development (Gross Motor Skills)
Helps us move and coordinate our arms, legs, and other body parts. They involve larger muscles that help us control our bodies. Their muscle tone, or muscle tension and resistance could be higher or lower than the appropriate developmental milestone.
- Going up and down stairs at an age appropriate time
- Coordinating both sides of the body
- Understanding the concept of right and left
- Poor ball skills
- Poor balance
- Be fearful of feet leaving the ground
- Doesn’t cross midline of his or her body during play and school tasks
- Avoids tasks and games that require gross motor skills
Visual Processing
Used to make sense of what we see. A process in our brain that interprets visual information.
- Difficulty with the spacing and sizes of letters
- Difficulty with recognizing letters
- Difficulty with copying shapes or letters
- Difficulty with visual tracking and crossing midline
- Difficulty finding objects among other objects
- Difficulty with copying from the board or another paper
- Difficulty with the concept of right and left
- Lose his or her place when reading or copying from the board

Oral Motor/Oral Sensory
Control of muscle movements in the face and oral area, such as the lips, jaw, tongue, and soft palate.
- Excessive drool
- Chews food in the front of the mouth, rather than on the molars
- Difficulty using a cup at an age-appropriate time
- Difficulty with drinking from a straw at an age-appropriate time
- Lengthy bottle or breast feedings
- Baby loses excessive liquid from his or her lips when bottle or breast feeding
- Child loses excessive liquid or food from his or her mouth when drinking or chewing
- Child appears to be excessively picky when eating, only eating certain types or textures of food
- Child excessively mouths toys or objects beyond an age-appropriate time

Sensory Processing
Making sense of information that we receive through our senses, like sound and smell
- Overly sensitive or heightened reactivity to sound, touch, or movement
- Under-responsive to certain sensations (e.g., high pain tolerance, doesn't notice cuts/bruises)
- Constantly moving, jumping, crashing, bumping
- Easily distracted by visual or auditory stimuli
- Emotionally reactive
- Difficulty coping with change
- Inability to calm self when upset

Learning Challenges
Another type of developmental delay.
- Unable to concentrate and focus at school
- Easily distracted.
- Difficulty following instructions and completing work
- Tires easily with schoolwork
- Poor impulse control
- Hyperactivity or low energy
- Not keeping up with workload at school
- Difficulty learning new material

**Play Skills**
Help a child make sense of the world around them
- Needs adult guidance to initiate play
- Difficulty with imitative play
- Wanders aimlessly without purposeful play
- Moves quickly from one activity to the next
- Does not explore toys appropriately
- Participates in repetitive play for hours (e.g., lining up toys)
- Does not join in with peers/siblings when playing
- Does not understand concepts of sharing and turn taking

Reference:


*For more information on what skills are appropriate for what age, view the developmental milestones handout for ages 18 months to 6 years.*
Appendix D: Identified Areas of Need Form

Autism Center for Child Development
Intake Packet

IDENTIFIED AREAS OF NEED FOR PARENTS

We acknowledge the challenges that come with being a parent and would like to offer support. Please select the following topics you would like support with. You will receive the names of organizations, descriptions, and their contact information for the resources you select.

- [ ] Advocacy & Information (regarding autism)
- [ ] Approved Autism Evaluation Centers
- [ ] Car Seat Services
- [ ] Childcare Services
- [ ] Clothing Services
- [ ] Community Events
- [ ] Dental Services
- [ ] Diaper Services
- [ ] Financial Services
- [ ] Food Services
- [ ] Legal Services
- [ ] Pediatricians
- [ ] Psychiatric & Psychological Services
- [ ] School Services
- [ ] Social Support Services
- [ ] Therapeutic Services
- [ ] Toys and Therapy Products
- [ ] Transportation Services

______________________________  ______________________________
Name (Printed)                   Signature & Date
Resources for Caregivers of Children with Autism Spectrum Disorder (ASD) in Kent County, Michigan

Professionals and organizations on this list are not endorsed by Wedgwood Christian Services. This list was compiled to help individuals find out information about ASD and/or help locate services to support their quality of life.

Wedgwood’s Autism Center for Child Development
(616) 965-3492
1260 Ekhart Street Northeast, Grand Rapids, MI 49503
Hours: 8:30-4:30PM
autismcenter@wedgwood.org
https://www.wedgwood.org/autismcenter/
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- Childcare Services ................................................................. 54
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- Community Events ................................................................. 56
- Dental Services ................................................................. 57
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# Advocacy & Information

<table>
<thead>
<tr>
<th>Name</th>
<th>Description</th>
<th>Contact Information</th>
</tr>
</thead>
</table>
| Arc Kent County                           | - Offers Virtual Program Library with on-demand activities for families to do at home.  
- Offers information on public benefits, such as housing assistance, food assistance, general assistance, social security, disability insurance, Medicare, supplemental security income, Medicaid. | Address: 2922 Fuller Ave. NE Ste 201, Grand Rapids, MI 49505  
Phone: (616) 459-3339  
Email: info@arckent.org  
Website: [www.arckent.org](http://www.arckent.org)                                                                 |
| Association For Science in Autism Treatment | - Contains research summaries of autism treatments for families to make informed choices before considering treatment options.  
- Categories of information include topical articles, book and resource reviews, research synopses, clinical corner, interviews, parents share their stories, books, applying science to education, excellence in special education, videos, outside resources. | Address: Association for Science in Autism Treatment, PO Box 1447, Hoboken, NJ 07030  
Email: info@asatonline.org  
Website: [https://asatonline.org/](https://asatonline.org/)                                                                 |
| Autism Alliance of Michigan               | - Offers a resource directory and an “ask an expert” form with questions about various topics (e.g., advocating, clinical, education, legal).  
- Offers newsletters, webinars, diagnosis information, insurance information, screening information, and social narratives. | Address: 26913 Northwestern Hwy. Ste 520, Southfield, MI 48033  
Phone: (877) 463.AAOM  
Email: info@aaomi.org  
Website: [http://www.autismallianceofmichigan.org/](http://www.autismallianceofmichigan.org/) |
| Autism Speaks                             | - Register for your own account within 5 minutes.  
- Offers service provider directory, online and in-person events, toolkits (e.g., 100 day kit for families of young children newly diagnosed with autism).  
- Autism Response Team that answers questions, connects you with tools and resources, and helps find autism services and support within your community. | Address: 1060 State Road, 2nd Floor, Princeton, NJ 08540  
Phone: (888) 288-4762  
Email: help@autismspeaks.org  
Website: [https://www.autismspeaks.org/](https://www.autismspeaks.org/)                                                                 |
| Autism Supports of Kent County            | - Offers community resource directory and book recommendations.  
- Bimonthly newsletters about events and programs available.  
- Legal and financial planning workshops | Address: P. O. Box 150348  
Grand Rapids, MI 49515  
Phone: (616) 752-8577  
Email: P AlleyiggetASKC@gmail.com  
Website: [www.autismsupportofkentcounty.org](http://www.autismsupportofkentcounty.org) |
| Network180                                 | - Access Center Children’s Intake Team determines eligibility for services for youth under 18 years old and connects youth and their families to services throughout Kent County.  
- Parent Support Partner services are available for primary caregivers of youth who are receiving intellectual & developmental disabilities. | Address: 790 Fuller Ave. NE  
Grand Rapids, MI 49503  
Phone: (616) 336-3909  
Email: info@network180.org  
Website: [https://www.network180.org/youth](https://www.network180.org/youth) |
| The Autism Community in Action | Offers experience, trained, supported, qualified mentors to guide parents on the Autism Journey. Provides in-depth comprehensive information and resources to help parents navigate all aspects of the autism journey, including obtaining a diagnosis, developing skills, medical issues, special education/IEPs, diet, preparing for adulthood, and more. | Address: 2222 Martin, Ste 140, Irvine, CA 92612  
Phone: (949) 640-4401  
Website: https://tacanow.org |

Information in this list is obtained either directly from organizations or from organization's websites. Professionals and organizations on this list are not endorsed by Wedgwood Christian Services. This list was compiled to help individuals find out information about ASD and/or help locate services to support their quality of life.
Approved Autism Evaluation Centers

The autism evaluation centers listed in the table below have been approved by Blue Cross and BCN. Long wait lists are to be expected.

<table>
<thead>
<tr>
<th>Name</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acorn Health</td>
<td>Address: 1000 E. Paris SE, Suite 160 Grand Rapids, MI 49546 Phone: (844) 244-1818</td>
</tr>
<tr>
<td>BRAINS</td>
<td>Address: 3292 N. Evergreen Dr. NE Grand Rapids, MI 49525 Phone: (616) 365-8920</td>
</tr>
<tr>
<td>Easterseals Michigan</td>
<td>Address: 4065 East Hills Court SE Grand Rapids, MI 49546 Phone: (616) 942-2081</td>
</tr>
<tr>
<td>Helen DeVos Behavioral Health Clinic-Spectrum Health</td>
<td>Address: 35 Michigan St., Suite 5201 Grand Rapids, MI 49503 Phone: (616) 267-2830</td>
</tr>
<tr>
<td>Mary Free Bed Kids-Autism Spectrum Disorder Program</td>
<td>Address: 235 Wealthy Street SE Grand Rapids, MI 49503 Phone: (616) 840-8807</td>
</tr>
<tr>
<td>Pine Rest Christian Mental Health Services</td>
<td>Address: 300 68th Street SE P.O. Box 165 Grand Rapids, MI 49548 Phone: (616) 258-7500</td>
</tr>
</tbody>
</table>

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## Car Seat Services

<table>
<thead>
<tr>
<th>Name</th>
<th>Description</th>
<th>Contact Information</th>
</tr>
</thead>
</table>
| Bethany’s Child Safety Initiative Program                 | -Provides portable cribs and car seats to eligible caregivers who receive individual consultation and education and who can demonstrate the proper installation of car seats as well as infant safe sleep practices. | Address: 901 Eastern Ave, Grand Rapids, MI 49503  
Phone: (616) 240-7996                                                                 |
| Cherry Health’s Child Safety Passenger Program            | -Offers car seats at no cost that are funded by the Kent County Ready By 5 millage.  
- Car seats are convertible that are appropriate for newborns and children up to 65lbs.  
- Clients must qualify for Medicaid, have children under the age of 5, and reside in Kent County. If this criteria isn’t met, they provide car seats through the Buckle Up For Life program and other State programs at no cost. | Email: mihp@cherryhealth.com                                                                 |
| Family Futures                                            | -Provides Pack N’ Plays and car seats to eligible families in Kent County.  
-Parents are eligible if they are enrolled in Medicaid. However, those at certain income levels can still qualify. | Address: 678 Front Ave NW #210, Grand Rapids, MI 49504  
Phone: (616) 454-4673  
Website: [https://familyfutures.org/programs/safe-sleep-bcr/](https://familyfutures.org/programs/safe-sleep-bcr/) |
| OSHP Car Seat Distribution for Technicians                | -Office of Highway Safety Planning (OHSP) will support local car seat distribution efforts by providing car seats for local seat check events and fitting stations for low-income families.  
- Certified child passenger safety technicians may request car seats from OHSP using the process found on the website. | Phone: (517) 284-3332  
Email: MSP-OHSP@Michigan.gov  
| Wayne’s Metro’s Car Seat Distribution Program            | - Year-round resource program for individuals and families in need of a free car seat or booster seat.  
- To apply for car seat assistance, please email the Connect Center to gather an access code.  
- Then use the website link and enter the access code. | Phone: (313) 388-9799  
Email: wmmconnectcenter@waynemetro.org  
Website: [https://www.buckleupforlife.org/partner/Wayne-Metro](https://www.buckleupforlife.org/partner/Wayne-Metro) |

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# Childcare Services

<table>
<thead>
<tr>
<th>Name</th>
<th>Description</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>CARE.COM</td>
<td>- An online service that helps families find and select the best care possible based on detailed profiles, background checks, and references for hundreds and thousands of caregivers.</td>
<td>Website: <a href="https://www.care.com/autism-child-care">https://www.care.com/autism-child-care</a></td>
</tr>
</tbody>
</table>
| Child Care Resources                      | - Operates a statewide referral center that helps families find and pay for child care that fits their needs, provides information on quality care and school readiness and delivers enhanced services for families who are homeless or have children with special needs. | Address: 1225 South Weller, Seattle, WA 98144  
Phone: 1-800-446-1114  
Website: [https://www.childcare.org/about/](https://www.childcare.org/about/)                                                                                                                                 |
| Kent Resource Center                      | - Helps parents find child care and preschool by navigating the Great Start Quality website to generate a referral list.  
- Referrals to free 4 year-old preschool, Great Start Readiness Program or Head Start programs.  
- Get help paying for child care – Referrals to the Department of Health and Human Services to access child care subsidies. | Address: 2930 Knapp St NE, Grand Rapids, MI 49525  
Phone: (616) 447-5678  
Email: kentresourcecenter@kentisd.org  
Website: [https://greatstarttoquality.org/kent-resource-center/](https://greatstarttoquality.org/kent-resource-center/)                                                                 |
- Contains the following: what is respite; how is respite different from daycare; how can respite help my family; is respite care right for my family; is my family eligible for respite care services; types of respite care; planning respite; finding the right fit for your family; observing the respite provider; preparing the respite provider; respite follow-up | Link: [https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Doing-Business-with-MDHHS/Forms-and-Applications/A_Family_Guide_to_Respite_139866_7.pdf](https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Doing-Business-with-MDHHS/Forms-and-Applications/A_Family_Guide_to_Respite_139866_7.pdf) |
| Real Life living Services (RLLS)          | - Children’s waiver and respite services are funded by the Community Mental Health (CMH) of the county of which the family lives in.  
- Upon authorization by CMH, staff will assist the child at home with daily living activities. Staff will work hands-on with the child with any clinical program they may have (OT, PT, SLP, etc.). Staff will also go on community activities with the child for socialization/behavioral skill building, as well as just to have fun. | Address: 2922 Fuller Ave NE #203-B Grand Rapids, MI 49505  
Phone: (616) 272-3064  
Website: [http://www.rlls.org/](http://www.rlls.org/)                                                                                                                                 |

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# Clothing Services

<table>
<thead>
<tr>
<th>Baby &amp; Toddler Pantries of Catholic Charities West Michigan</th>
<th>Offers a selection of free items for infant and child care. -Patrons must be able to provide their identification, proof of address and birth certificate/record for each child needing an item.</th>
<th>Address: 303 Division Ave S, Grand Rapids, MI Phone: (616) 454-4110 Email: <a href="mailto:sbusch@ccwestmi.org">sbusch@ccwestmi.org</a> Website: <a href="https://ccwestmi.org/what-we-do/baby-pantry/">https://ccwestmi.org/what-we-do/baby-pantry/</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>Help Pregnancy Crisis Aid Inc</td>
<td>A walk-in program that provides essentials monthly. -Clients are linked to resources that help promote the healthy development of babies from conception to their 3rd birthday. -Program provides formula, clothes, diapers, food for residents of Kent County, MI.</td>
<td>Address: 705 Bridge Street Northwest, Grand Rapids, MI 49504 Phone: 616-459-9139 Email: <a href="mailto:info@helppregnancy.org">info@helppregnancy.org</a> Website: <a href="https://helppregnancy.org/">https://helppregnancy.org/</a></td>
</tr>
<tr>
<td>In The Image</td>
<td>Provides clothing, shoes, and accessories for free. -All members receive twelve visits a year and those visits can be used on any day or time the Free Store is open.</td>
<td>Address: 4255 Kalamazoo Avenue SE Grand Rapids, MI 49508 Phone: (616) 456-6150 Email: <a href="mailto:lfunk@intheimage.org">lfunk@intheimage.org</a> Website: <a href="https://www.intheimage.org/gethelp">https://www.intheimage.org/gethelp</a></td>
</tr>
<tr>
<td>The Salvation Army Family Store</td>
<td>Offer shoppers the opportunities to purchase brand name clothing, furniture, household goods, sporting equipment, books, electronics, and much more at bargain prices. -Stores are loaded with gently used clothing that are donated through the pickup service, drop-off bins, community centers, and family stores.</td>
<td>Address: 4283 28th Street Southeast, Kentwood, MI 49512 Phone: 800-728-7825 Website: <a href="http://grandrapids.satruck.org/">http://grandrapids.satruck.org/</a></td>
</tr>
</tbody>
</table>

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# Community Events

<table>
<thead>
<tr>
<th>Name</th>
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</tr>
</thead>
</table>
| Autism Alliance of Michigan               | - Provides details of upcoming events in Michigan.  
- Can apply filters when searching for events, such as event category, cost, tags, venues, organizers, day, featured events, and series.                                           | Phone: (877) 463.AAOM  
Email: info@aaomi.org  
Website: [https://autismallianceofmichigan.org/events/list/](https://autismallianceofmichigan.org/events/list/)                                                                                     |
| Autism Supports of Kent County            | - Monthly family events for all ages are available.  
- Examples of previous events: Sensory Friendly Performance of "Elephant & Piggie" at the GR Civic Theatre; Roller Skating and Pizza Party; Easter Egg Hunt.  
- Offers large resource fair, kids’ crafts, strolling zoo animals, emergency vehicles to touch and see, a one-mile walk around John Ball Park, and snacks. | Address: P. O. Box 150348  
Grand Rapids, MI 49515  
Phone: (616) 752-8577  
Email: PailLiggettASKC@gmail.com  
Website: [https://www.autismsupportofkentcounty.org/events](https://www.autismsupportofkentcounty.org/events)                                                                 |
| Autism Walk                               | - Annual walk to raise money for social programs, family events, theater groups, support groups, resource sharing, emergency personnel training, grants, and much more.  
- Offers large resource fair, kids’ crafts, strolling zoo animals, emergency vehicles to touch and see, a one-mile walk around John Ball Park, and snacks. | Address: 1300 Fulton St W, Grand Rapids, MI 49504  
Phone: (616) 752-8577  
Email: PailLiggettASKC@gmail.com  
| Be Like Buddy                             | - Growing database of activities for individuals with autism across the U.S.  
- Theaters, museums, sports and musical venues, hair salons, and eating establishments all make the list!                                                                                           | Website: [https://www.belikebuddy.com/michigan](https://www.belikebuddy.com/michigan)                                                                                                                                  |
| Blue Bridge Walk for Autism               | - Annual walk for inclusiveness and diversity  
- Event for the autism community, community members, businesses, and local leaders alike to come together.                                                                                       | Place: The Blue Bridge and Grand Rapids Public Museum  
Email: foundation@hopenetwork.org  
Website: [http://hopenetwork.org/bridgewalk](http://hopenetwork.org/bridgewalk)                                                                                                                                  |
| United In Christ Ministry                 | - Offers free programs that are rich in diversity, reaching the youth in the community and equipping them to be leaders.  
- Programs vary but may consist of young kids gathering to sing songs, learn bible stories, do crafts, and enjoy a meal. | Address: 1035 Godfrey Avenue, S.W. Grand Rapids, MI  
Phone: (616) 855-8851  
Email: director@unitedinchristgr.com  
Website: [https://unitedinchristgr.com/](https://unitedinchristgr.com/)                                                                                                                             |

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# Dental Services

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<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Kingma Pediatric Dentistry</td>
<td>-For infants, children, teens, and young patients with special needs.</td>
<td>Address: 1179 East Paris SE&lt;br&gt;Grand Rapids, MI 49546&lt;br&gt;Phone: (616) 942-9840&lt;br&gt;Website: <a href="http://www.pediatricoothdoc.com">www.pediatricoothdoc.com</a></td>
</tr>
<tr>
<td>Richard J. Elias, DDS</td>
<td>-Laid back personalities, patients, and willingness to accept the disability and work with it, rather than against it, allows staff to make remarkable progress in special needs dentistry.</td>
<td>Address: 535 Greenwood Ave. SE&lt;br&gt;East Grand Rapids, MI 49506&lt;br&gt;Phone: (616) 458-2048&lt;br&gt;Website: <a href="http://www.RichardEliasdds.com">www.RichardEliasdds.com</a></td>
</tr>
<tr>
<td>Smilie’s Pediatric Dentistry</td>
<td>-For infants, children, teens, medically compromised and special needs children.</td>
<td>Address: 2017 Eastcastle SE Suite A&lt;br&gt;Grand Rapids, MI 49508&lt;br&gt;Phone: (616) 455-4646&lt;br&gt;Website: <a href="https://smiliespediatricdentistry.com/">https://smiliespediatricdentistry.com/</a></td>
</tr>
<tr>
<td>Thomas J. Burdo, DDS</td>
<td>-Works together with St. Mary’s Hospital, provides exceptional care and extra attention for patients with special needs.</td>
<td>Address: 1100 4 Mile Road NW&lt;br&gt;Grand Rapids, MI 49544-7397&lt;br&gt;Phone: (616) 784-6377&lt;br&gt;Website: <a href="http://www.burdodds.com">www.burdodds.com</a></td>
</tr>
<tr>
<td>Valleau, Vandeven &amp; Massie - Dentistry for Children</td>
<td>-Recognizes that providing comprehensive preventative and therapeutic oral health care to individuals with special health care needs is an integral part of the speciality of pediatric dentistry.</td>
<td>Address: 2000 43rd Street SE&lt;br&gt;Grand Rapids, MI 49508&lt;br&gt;Phone: (616) 455-1301&lt;br&gt;Website: <a href="http://www.vvandmkidsdentistry.com">www.vvandmkidsdentistry.com</a></td>
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## Diaper Services

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| Baby & Toddler Pantries of Catholic Charities West Michigan | - Offers a selection of free items for infant and toddler care.  
- Patrons must be able to provide their identification, proof of address and birth certificate/record for each child needing items. | Address: 303 Division Ave S, Grand Rapids, MI  
Phone: (616) 454-4110  
Email: sbusch@ccwestmi.org  
Website: [https://ccwestmi.org/what-we-do/baby-pantry/](https://ccwestmi.org/what-we-do/baby-pantry/) |
| Baxter Community Center | - Provides diapers to clients who live in the Baxter community area.  
- Priority is given to area N-Fulton, E-Patterson, S-Hall, and W-US 131  
- Must be low-income to be eligible.  
- Clients should call first. | Address: 935 Baxter Street SE, Grand Rapids, MI 49506  
Phone: (616) 456-8593 Ext: 217  
Email: info@baxtercommunitycenter.org  
Website: [www.wearebaxter.org](http://www.wearebaxter.org) |
| Help Pregnancy Crisis Aid Inc | - A walk-in program that provides essentials monthly.  
- Program provides formula, clothes, diapers, and food for residents of Kent County, MI. For babies - 3 years old. | Address: 705 Bridge Street Northwest, Grand Rapids, MI 49504  
Phone: 616-459-9139  
Email: info@helppregnancy.org  
Website: [https://helppregnancy.org/](https://helppregnancy.org/) |
| Network180 | - Offers free diapers after the child reaches age 3.  
- Ask your support coordinator for more details. | Address: 790 Fuller Ave. NE, Grand Rapids, MI 49503  
Phone: (616) 336-3909  
Website: [https://www.network180.org/youth](https://www.network180.org/youth) |
| Secom Resource Center | - Provides food, diapers, and personal care items (when available) to qualifying participants.  
- To be eligible, you must live within SECOM’s service area (between 131, Hall Street, Patterson Ave, and 28th Street), have low income, and be in need of food.  
- Frequency is once a month with exceptions approved by the pantry manager. | Address: 1545 Buchanan Avenue SW, Grand Rapids, MI 49507  
Phone: (616) 452-7684 Ext: 3  
Email: pantrymanager@secomresourcecenter.org  
Website: [http://www.secomresourcecenter.org/](http://www.secomresourcecenter.org/) |
| United Church Outreach Ministry | - Provides baby items such as diapers and wipes to address the needs or residents of the UCOM pantry service area.  
- Clients can utilize services as often as once per month. | Address: 4130 Wilson Avenue SW, Grandville, MI  
Website: [www.ucomgr.org](http://www.ucomgr.org)  
Email: bruce.roller@ucomgr.org |

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# Financial Services

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| ACT Today!                                | -a national nonprofit 501(c)(3) organization whose mission is to raise awareness and provide treatment services and support to families to help their children with autism be able to achieve their full potential  
- Families can apply for grants up to $5,000                                                                                                                                                                                                                                  | Address: 20750 Ventura Blvd, Ste 160, Woodland Hills, CA 91364  
Phone: 877-9 ACT-TODAY or 805-506-5235  
Email: autismcaretoday@gmail.com  
Website: act-today.org                                                                                                                                     |
| Autism Spectrum Disorder Foundation       | - Must fill out an application for a scholarship through their website.  
- You will need the following information when completing the application: name of camp/program, dates of camp/program, amount requested, date the funds are due, documentation stating the child is on the autism spectrum.                                                                                                                    | Address: 228 W. Lincoln Highway 301, Schererville, IN 46375  
Phone: (877) 806-0635  
Email: myasdf@yahoo.org  
Website: myasdf.org                                                                                                                                             |
| Family Hope Foundations                   | - Scholarship program provides financial assistance to families for therapies that have little or no insurance coverage.  
- Two scholarship cycles, one in the spring and one in the fall, in which families can apply for scholarships up to $1,000.  
- Families may apply during one or both scholarship cycles.                                                                                                                                                                                                                     | Address: 7086 8th Avenue Jenison, MI 49428  
Phone: (616) 729-8833  
Website: www.thefamilyhopefoundation.org                                                                                                                                                                                  |
| Family Support Subsidy Program            | - Provides a monthly payment ($300.36) that the family must spend on special needs that occur as a result of caring for a child with a severe disability at home.  
- Purchase of additional therapies, special equipment, special food, paper diapers, transportation costs, in-home specialized care, respite care, family counseling, support groups, general household expenses, family recreation and home remodeling to provide for the special needs of the child.  
- Families can apply for subsidies at their local Community Mental Health Services Programs.                                                                                                                                                                                                 | When calling your local Community Mental Health Services Program, ask for the Family Support Subsidy Coordinator for additional information and to obtain an application.  
If unable to locate your county's CMHSP, you may call (517) 241-5774  
Website: https://www.michigan.gov/mdhhs/keep-p-mi-healthy/mentalhealth/mentalhealth/childrenandfamilies/fssp                                                                                                                  |
| Michigan Department of Health and Human Services | - Use MI bridges to apply for assistance, check your eligibility status, and manage your account online.  
- The application is for multiple programs, including healthcare coverage, food assistance program, child development and care, cash assistance, WIC, and state emergency relief.                                                                                                                                 | Website: https://newmibridges.michigan.gov/s/id-landing-page?language=en_US                                                                                     |
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<tr>
<th>Organization</th>
<th>Information</th>
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</table>
| Network180                                       | - Offers mileage reimbursement  
- Must reach out to the support coordinator for details. |
| Address: 790 Fuller Ave. NE  
Grand Rapids, MI 49503  
Phone: (616) 336-3909  
Email: info@network180.org  
Website: https://www.network180.org/youth |
| Patient Advocate Foundation                      | - Provides small grants to patients who meet financial and medical criteria.  
- Grants are provided on a first-come first-served basis and are distributed until funds are depleted.  
- Qualifications and processes for each fund may differ based on fund requirements.  
- Eligibility is different for each specific fund, refer to the program details to identify if criteria is met. |
| Address: 421 Butler Farm Road  
Hampton, VA 23666  
Phone: 1 (800) 532-5274  
Website: https://www.patientadvocate.org/connect-with-services/financial-aid-funds/ |
| United Healthcare Children’s Foundation          | - Offers timely financial support to families, so they can focus on what is most important – improving the quality of life of their child.  
- UHCCF grants help with medical expenses not covered, or not fully covered, by a family’s commercial health insurance.  
- There are eligibility requirements to receive financial support for medical expenses that can be found on their website, such as income and wage. |
| Address: 9700 Healthcare Lane  
Minnetonka, MN 55343  
Phone: 1 855-MY-UHCCF / 1 (855-698-4223)  
Email: uhccfcustomerservice@uhc.com  
Website: uhccf.org |

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## Food Services

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<tr>
<td>Baby &amp; Toddler Pantries of Catholic Charities West Michigan</td>
<td>- Offers a selection of free items for infant and childcare. &lt;br&gt;- Patrons must be able to provide their identification, proof of address and birth certificate/record for each child needing an item. &lt;br&gt;- Pantry can be utilized each month.</td>
<td>Address: 303 Division Ave S, Grand Rapids, MI &lt;br&gt;Phone: (616) 454-4110 &lt;br&gt;Email: <a href="mailto:sbusch@ccwestmi.org">sbusch@ccwestmi.org</a> &lt;br&gt;Website: <a href="https://ccwestmi.org/what-we-do/baby-pantry/">https://ccwestmi.org/what-we-do/baby-pantry/</a></td>
</tr>
<tr>
<td>Feeding America West Michigan</td>
<td>- Mobile Food Pantry that travels around Michigan &lt;br&gt;- Follow the link to see the schedule (date, time and location) of food assistance. &lt;br&gt;- The website has a resource map that you can use to locate one of our partner agencies or an upcoming Mobile Food Pantry near you.</td>
<td>Address: 864 West River Center Drive NE, Comstock Park, MI 49321 &lt;br&gt;Phone: (616) 784-3250 &lt;br&gt;Email: <a href="mailto:Shayk@feedwm.org">Shayk@feedwm.org</a> &lt;br&gt;Website: <a href="http://www.feedwm.org/mobile-pantry-schedule/">http://www.feedwm.org/mobile-pantry-schedule/</a></td>
</tr>
<tr>
<td>Food Pantries</td>
<td>- Offers directory of food banks, soup kitchens, and non-profit organizations committed to fighting hunger. &lt;br&gt;- Provides you with food assistance closest to the provided address with contact information and additional details.</td>
<td>Website: <a href="https://www.foodpantries.org/address-geo.php">https://www.foodpantries.org/address-geo.php</a></td>
</tr>
<tr>
<td>Help Pregnancy Crisis Aid Inc.</td>
<td>- A walk-in program that provides essentials monthly. &lt;br&gt;- Clients are linked to resources that help promote the healthy development of babies from conception to their 3rd birthday. &lt;br&gt;- Program provides formula, clothes, diapers, food for residents of Kent County, MI.</td>
<td>Address: 705 Bridge Street Northwest, Grand Rapids, MI 49504 &lt;br&gt;Phone: 616-459-9139 &lt;br&gt;Email: <a href="mailto:info@helppregnancy.org">info@helppregnancy.org</a> &lt;br&gt;Website: <a href="https://helppregnancy.org/">https://helppregnancy.org/</a></td>
</tr>
<tr>
<td>Kentwood Christian Services</td>
<td>- Casting Bread Food Truck &lt;br&gt;- Available on the 2nd Monday of the month with 5,000 pounds of food in the church parking lot to be distributed to families. &lt;br&gt;- Registration starts at 4:30 p.m. and distribution starts at 6 p.m. &lt;br&gt;- It is open to anyone for any size family. &lt;br&gt;- Name and phone number gets taken in case there is a food recall.</td>
<td>Address: 5841 Kalamazoo Ave SE, Grand Rapids, MI 49508 &lt;br&gt;Phone: (616) 455-1510 &lt;br&gt;Email: <a href="mailto:kccweb@kentwoodchristianchurch.com">kccweb@kentwoodchristianchurch.com</a> &lt;br&gt;Website: <a href="https://kentwoodchristianchurch.com/events-calendar/">https://kentwoodchristianchurch.com/events-calendar/</a></td>
</tr>
<tr>
<td>Michigan Department of Health and Human Services</td>
<td>- Provides temporary food assistance for eligible low-income families and individuals from the U.S. Department of Agriculture. &lt;br&gt;- Use MI Bridges to apply for assistance.</td>
<td>Website: <a href="https://newmibridges.michigan.gov/s/id-landing-page?language=en_US">https://newmibridges.michigan.gov/s/id-landing-page?language=en_US</a></td>
</tr>
<tr>
<td>Organization</td>
<td>Description</td>
<td>Address</td>
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<tr>
<td>North End Community Ministry</td>
<td>Offered once a month, where families can get a 3-4 day food supply and personal care products at no cost. The food pantry has a grocery store setting and feel to it which empowers clients to pick and choose a variety of foods they need and want for their families.</td>
<td>214 Spencer NE, Grand Rapids, MI 49505</td>
</tr>
<tr>
<td>Secom Resource Center</td>
<td>Provides food, diapers, and personal care items (when available) to qualifying participants. To be eligible, you must live within SECOM’s service area (between 131, Hall Street, Patterson Ave, and 28th Street), have low income, and be in need of food. Frequency is once a month with exceptions approved by the pantry manager.</td>
<td>1545 Buchanan Avenue SW, Grand Rapids, MI 49507</td>
</tr>
<tr>
<td>The Green Apple Pantry</td>
<td>Neighborhood’s Choice Pantry provides balanced monthly groceries. At each visit, a picture ID for a person shopping and a document with a current address for each person in the household is required. Also offers quarterly commodities distribution during the months of June, September, and December. When school is not in session, the pantry serves as a Meet Up and Eat Up site.</td>
<td>For more information about the pantry: Phone number: (616) 455-9411 Ext 1 Email: <a href="mailto:yolifuentes@thegreenapplepantry.org">yolifuentes@thegreenapplepantry.org</a> For more information on MeetUp and Eat Up: Phone: (616) 455-9411 Email <a href="mailto:info@thegreenapplepantry.org">info@thegreenapplepantry.org</a> Website: <a href="https://thegreenapplepantry.org/services/food-assistance/">https://thegreenapplepantry.org/services/food-assistance/</a></td>
</tr>
<tr>
<td>United Way’s 2-1-1</td>
<td>Connects people with resources for food and other resources. Can call, chat online, email, or search the database to find resources.</td>
<td>118 Commerce Ave SW, Grand Rapids, MI 49503</td>
</tr>
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# Legal Services

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</tr>
</thead>
</table>
| C. Jill Smith-Goodell, PLLC | -Services include special needs trusts, durable power of attorneys, and guardianships | Address: 2525 East Paris SE, Suite 100, Grand Rapids, MI 49546  
Phone: (616) 204-3316  
Website: [www.smith-goodell.com](http://www.smith-goodell.com) |
| Daniel Blauw - Attorney | -Assist clients with a wide range of disability-related matters, such as petitioning for legal guardianship, setting up supportive housing, and drafting special needs trusts.  
-Frequently collaborates with parents of special needs children to create comprehensive estate plans that incorporate special needs trusts. | Address: 2020 Raybrook SE, #204A  
Grand Rapids, MI 49546  
Phone: (616) 336-5098  
Email: [danblauw@gmail.com](mailto:danblauw@gmail.com) and [sarah_kirkpatrick@comcast.net](mailto:sarah_kirkpatrick@comcast.net)  
Website: [http://www.blauwkirkpatricklaw.com/](http://www.blauwkirkpatricklaw.com/) |
| Lauretta K. Murphy, Attorney | -Plans to maximize resources for people with disabilities and special needs.  
-Prepares trusts to protect people with disabilities so they can maintain government benefits while family funds are used to enhance quality of life. | Address: 250 Monroe Avenue NW Suite 800, Grand Rapids, MI 49503-2250  
Phone: (616) 831-1733  
Email: murphyl@millerjohnson.com  
Website: [https://millerjohnson.com/attorney/murphy/](https://millerjohnson.com/attorney/murphy/) |
| Law Office of Thomas A. Geelhoed | -Helps people get disability benefits when they have been turned down by the government  
-Areas of practice include: social security disability, supplemental security income (SSI), child SSI, disabled adult and child benefits. | Address: 600 McKay Tower, 146 Monroe Center NW, Grand Rapids, MI 49503  
Phone: (616) 454-0300  
Website: [https://tom9442.wixsite.com/lawyer](https://tom9442.wixsite.com/lawyer) |
| W. Michael Van Haren - Attorney Warner Norcross & Judd LPP | -Services include special needs trusts, guardianships. | Address: 900 Fifth Third Center / 111 Lyon Street NW, Grand Rapids, MI 49503-2487  
Phone: (616) 752-2125  
Website: [www.wnj.com](http://www.wnj.com) |
| Westerbeke Law Firm, PLLC | -Helps clients with special needs trusts, guardianships, conservatorships, and related matters. | Address: 4595 Broadmoor Ave SE -- Suite 237, Grand Rapids, MI 49512  
Phone: (616) 965-2060  
Website: [www.michiganlegacyplan.com](http://www.michiganlegacyplan.com) |
Wrightslaw

- Offers information about legal advocacy for children with disabilities.
- Information about special education law, education law, and advocacy.
- Articles, cases, and free resources on many related topics.

Website: [http://www.wrightslaw.com/](http://www.wrightslaw.com/)

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</table>
| Dr. Anthony J. Richtsmeier | -48+ years of experience in the medical field | Address: 35 Michigan Street NE -- Floor 4, Suite 5201, Grand Rapids, MI 49503  
Phone: (616) 267-2830  
Website: www.helendevoschildrens.org |
| Dr. Dana Leary      | -34+ years of experience in the medical field | Address: 4444 Kalamazoo Avenue SE Suite 103, Grand Rapids, MI 49508  
Phone: (616) 281-5800  
Website: https://www.pediatricassociatesofkentwood.com/provider/dana-leary-md |
| Dr. Erika Pott      | -28+ years of experience in the medical field | Address: 7150 Kalamazoo, SE Suite A, Caledonia, MI, 49316  
Phone: (616) 818-7454  
Website: https://www.mikidspediatrics.com/ |
| Dr. Lisa Brown      | -35+ years of experience in the medical field | Address: 5150 Cascade Road SE, Suite B, Grand Rapids, MI 49546  
Phone: (616) 940-3168  
Website: https://www.cascadepediatrics.com/physicians |
| Dr. Tiffany Letts   | -20+ years of experience in the medical field | Address: 5900 Byron Center Ave Wyoming, MI 49519  
Phone: (616) 252-7200  
Website: https://metrohealth.net |
| Dr. William Bush    | -30+ years of experience in the medical field | Address: 877 Forest Hill Ave SE Grand Rapids, MI 49546  
Phone: (616) 949-4465  
Website: https://foresthillspediatrics.com/about-practice/topics/our-physicians |

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# Psychiatric & Psychological Services

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| BRAINS                | - Offers a multidisciplinary approach to understanding and treatment, with the family being an integral part of the treatment plan.  
- Offers the following testing and assessments: neuropsychological, psychological, educational, forensic.  
- Offers speech therapy, occupational therapy, counseling, court services, autism services.                                                                 | Address: 3292 North Evergreen Drive NE, Grand Rapids, MI, 49525  
Phone: (616) 365-8920  
Website: [https://brainspotential.com/](https://brainspotential.com/)                                                                                                                            |
| Developmental Enhancement | - Provides a wide array of behavioral health services for children and adolescents who may be experiencing developmental, behavioral, or emotional difficulties.  
- Reach Parent-Child Program provides mental health services for infants and children using an attachment based, developmentally focused model.                                               | Address: 7086 8th Ave, Jenison, MI 49428; 1428 44th Street SW Suite B, Wyoming, MI 49509  
Phone: (616) 244-2246  
Phone: (616) 604-8492  
Website: [http://debh.org/](http://debh.org/)                                                                                                                                            |
| The Clark Institute   | - Therapies and workshops are based on empirically supported parent-child relationship, behavior management, pervasive development, and sensory integration techniques and theories.  
- Provides behavior management, parent-child psychotherapy, parental guidance and child psychology, parent and child support and therapy groups, psychological assessments/diagnosis/treatment plan, advocacy, training, and consultation       | Address: 7150 Kalamazoo Avenue SE Suite C, Caledonia, MI 49316  
Phone: (616) 219-0159  
Website: [http://www.theclarkinstitute.com](http://www.theclarkinstitute.com)                                                                                                             |
| Psychology Today      | - A database that includes a list of psychologists, social workers, counselors, and therapists in your area.  
- Their name, specialties, biography, and contact information are provided.  
- Receiving parent counseling can help resolve personal issues and turn the attention to maintain, grow, and restore harmony in the household.                                   | Website: [https://www.psychologytoday.com/us/therapists/mi/grand-rapids?category=autism](https://www.psychologytoday.com/us/therapists/mi/grand-rapids?category=autism)                                       |

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# School Services

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</table>
| Early on - Kent ISD                       | - Assists families with infants and toddlers, from birth until 36 months, who have a delay in their development or a diagnosed disability.  
- Provides evaluations for your child’s development right in your home.  
- If eligible, a plan is created and services are provided for support to help your child reach their full potential. | Address: 1800 Leffingwell NE  
Grand Rapids, MI 49525  
Phone: (616) 365-2310  
| Kent Intermediate School District         | - Collaborative support, guidance, resources, and technical assistance is provided by Kent ISD to assist with professional development, program development, parent support, technology, and legal requirements to ensure that individual and the unique needs of all students are addressed. | Address: 2930 Knapp Street NE  
Grand Rapids, MI 49525  
Phone: (616) 365-2299  
Website: [https://www.kentisd.org/special-education/](https://www.kentisd.org/special-education/) |
| Special Education                         |                                                                                                  |                                                                                                         |
| Lake Michigan Academy                     | - A non-public school for elementary through high school students with learning disabilities (e.g., Autism), and/or ADHD.  
- Certified teachers provide differentiated instruction in small classes through evidence-based instructional strategies. | Address: 2428 Burton St SE  
Grand Rapids, Mi 49546  
Email: info@mylma.org  
Phone: (616) 464-3330  
Website: [https://www.mylma.org/](https://www.mylma.org/) |
| Michigan Alliance for Families             | - Statewide resources to connect families of children with disabilities to resources to help improve their children’s education.  
- Helps facilitate parent involvement as a means of improving educational services and outcomes for students with disabilities.  
- Assists you in knowing your rights, effectively communicating your child’s needs, and advising how to help them develop and learn. | Address: 1325 S. Washington Avenue  
Lansing MI 48910  
Phone: (734) 994-8100 ext. 1590 and (800) 552-4821  
Website: [www.michiganallianceforfamilies.org](http://www.michiganallianceforfamilies.org) |
| Parent Advisors for Special Education (PASE)| - Parent driven forum to positively impact the educational opportunities for children with special needs through collaboration, dissemination, and information.  
- Meets 4-5 times a year at 6:30 p.m. on a Monday at the KENT ISD Educational Services Center. | Address: 2930 Knapp NE  
Grand Rapids, MI  
Phone: (616) 365-2297  
Email: lorimatthews@kentisd.org  
Website: [https://www.kentisd.org/special-education/special-education-menu/parent-resources/pase/](https://www.kentisd.org/special-education/special-education-menu/parent-resources/pase/) |
Statewide Autism Resources & Training (START) Project  
- Provides families with resources to promote understanding to support their children in home, in school, and their community to collaborate meaningfully with school staff as an equal member of their children’s educational teams.
- Examples of information they provide expectations, visual supports, learning opportunities, CLAMS, SOS materials, preschool skills, behavior support, independence, circle time engagement activities, early childhood state and national resources.

Address: 401 W. Fulton Street  
Grand Rapids, MI 49504  
Phone: (616) 331-6480  
Email: autismed@gvsu.edu  
Website: [https://www.gvsu.edu/autismcenter/early-childhood-resources-and-tools-484.htm](https://www.gvsu.edu/autismcenter/early-childhood-resources-and-tools-484.htm)

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# Social Support Services

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| **ASD Parent Support Group G.R.**         | - A Facebook group that is parent-led to provide support for parents and caregivers of children with autism in the Grand Rapids area.  
- Provides a network of support for parents; a place where we can come together, learn information and skills, share concerns and support each other.  
- Meet on the 3rd Thursday of the month at Kent ISD from 6:30-9p.m.                                                                 | Address: 2930 Knapp St. NE, Grand Rapids, MI 49425  
Link to join: https://www.facebook.com/groups/884602521610110/?ref=share&mibextid=S66qvF  
Email: asdsuppgrpskentcounty@yahoo.org                                                                                                           |
| **Asperger/Autism Network (AANE)**        | - Provides individuals, families, and professionals with information, education, community, support, and advocacy.  
- Offers three types of support groups for parents of children along with an online google group discussion forum.                                                                                   | Address: 85 Main Street, Suite 3, Watertown, MA 02472  
Phone: (617) 393-3824  
Website: https://www.aane.org/resources/family-and-friends/support-groups-parents-children-teens/                                                  |
| **Autism Supports of Kent County**        | - Offers monthly support groups (in person and virtual) for parents.  
- Meetings are generally the first Monday of every month during the school year at the Kent Intermediate School District Educational Service Center.  
- Typically, there is a guest speaker.  
- Meetings are about an hour and a half and start at 7 p.m.  
- Group sizes are typically 10-15 people.                                                                                                        | Address: 2930 Knapp St. NE, Grand Rapids, MI 49425  
Phone: (616) 752-8577  
Email: PalLiggettASKC@gmail.com  
Website: www.autismsupportofkentcounty.org                                                                                                        |
| **Social Incites, LLC**                   | - Social coaching (individual and group), parent/family coaching, presentations, autism information and support.  
- Coaching and consultation services help to develop a personal success plan; learn strategies for building and maintaining social connections, organization, workplace skills, and parenting.  
- Options: one hour consult, three coaching sessions, six coaching sessions.                                                                          | Address: 1100 Cobblestone Road, Holland, MI 49423  
Phone: (616) 422-5886  
Website: http://socialincites.com/                                                                                                                    |

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# Therapeutic Services

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<tbody>
<tr>
<td>BRAINS</td>
<td>Offers a multidisciplinary approach to understanding and treatment, with the family being an integral part of the treatment plan. Offers the following testing and assessments: neuropsychological, psychological, educational, forensic. Offers speech therapy, occupational therapy, counseling, court services, autism services.</td>
<td>Address: 3292 North Evergreen Drive NE, Grand Rapids, MI, 49525 Phone: (616) 365-8920 Website: <a href="https://brainspotential.com/">https://brainspotential.com/</a></td>
</tr>
<tr>
<td>Calvin University</td>
<td>Provided by graduate student clinicians under close professional supervision by certified speech-language pathologists or registered and licensed occupational therapists. Treatment is provided in individual and small group settings. Speech clinic is donation based, OT clinic has nominal fee per session. Clients are scheduled for an entire semester and meet on the same scheduled day/time each week. Sports in the clinic are in high demand due to the quality of therapy provided. A waiting list is maintained year-round.</td>
<td>Calvin Speech Clinic Email: <a href="mailto:spaud@calvin.edu">spaud@calvin.edu</a> Phone: 616-526-6070 Website: <a href="https://calvin.edu/academics/departments-programs/speech-pathology-audiology/speech-clinic/">https://calvin.edu/academics/departments-programs/speech-pathology-audiology/speech-clinic/</a> Calvin Pediatric Clinic Email: <a href="mailto:tracy.young@wmich.edu">tracy.young@wmich.edu</a> Phone: (616) 742-4840 Website: <a href="https://wmich.edu/ot/academics/fieldwork/pediatric">https://wmich.edu/ot/academics/fieldwork/pediatric</a></td>
</tr>
<tr>
<td>Comprehensive Therapy Center, Inc</td>
<td>Offers community speech-language pathology, occupational therapy, sensory integration, and motor therapies. Therapists and teachers also offer individual sessions, academic tutoring specializing in learning disabilities and brain injury, and educational classes for caregivers.</td>
<td>Address: 2505 Ardmore SE Grand Rapids, MI 49506 Phone: (616) 559-1054 Website: <a href="http://www.therapycenter.org">www.therapycenter.org</a></td>
</tr>
<tr>
<td>Easter Seals of Michigan, Inc</td>
<td>Aims to increase children’s self-confidence, communication, speech and language, focus, and gross motor skills through a sensory-integration-based approach. Offers an eight-week individual occupational therapy program for children 0-12 years of age and group sensory programs for children.</td>
<td>Address: 4065 Saladin Dr. SE Grand Rapids, MI 49546 Phone: (616) 942-2081 Website: <a href="http://www.essmichigan.org">www.essmichigan.org</a></td>
</tr>
<tr>
<td>Equest Center for Therapeutic Riding</td>
<td>Improve quality of life through equine-based therapy to physically, mentally, and socially/emotionally challenged individuals. Integrates academic, social, physical skills, and uses the horse as a catalyst. Year-round facility.</td>
<td>Address: 3777 Rector Ave. NE Rockford, MI 49341 Phone: (616) 866-3066 Website: <a href="http://www.equestcenter.org">www.equestcenter.org</a></td>
</tr>
<tr>
<td>Family Tree Therapies</td>
<td>Private therapy office providing speech and occupational therapy, parent coaching, and positive discipline workshops.</td>
<td>Address: 2251 East Paris Avenue SE Grand Rapids, MI 49546</td>
</tr>
<tr>
<td>Service Provider</td>
<td>Description</td>
<td>Contact Information</td>
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<td>Franciscan Life Process Center</td>
<td>A religiously oriented non-profit organization, located on a 230 acre site which houses day, evening, and weekend programs. Counseling, music therapy, music education, preschool, art, individual/group retreats, and a volunteer program. The orchard, nature trails, woods, and animals are sometimes integrated into different aspects of programming.</td>
<td>Address: 11650 Downes Street Lowell, MI 49331  Phone: (616) 897-7842  Website: <a href="http://www.lifeprocesscenter.org">www.lifeprocesscenter.org</a></td>
</tr>
<tr>
<td>Horizons Developmental Resource Center</td>
<td>Works with individuals and families who have a variety of neurological, psychological, physical, or related symptoms. Provides consultations, evaluations, and treatments. Treatments include the following: individual and family counseling, parent education, nutrition consultation, low energy neurofeedback, mindfulness-based interventions, speech, and language therapy, feeding therapy, executive functioning skills training, school programming, academic tutoring/support, summer therapy programs, sibling support group.</td>
<td>Address: 3120 68th Street SE</td>
</tr>
<tr>
<td>Mary Free Bed Rehabilitation Hospital</td>
<td>Provides services for children presenting multiple therapy needs in a one-on-one setting. May focus on motor, cognitive, or perceptual skills based on needs.</td>
<td>Address: 235 Wealthy St. SE Grand Rapids, MI 49503  Phone: (616) 840-8005  Website: <a href="http://www.maryfreebed.com">www.maryfreebed.com</a></td>
</tr>
<tr>
<td>Neurocore</td>
<td>Specializes in data-driven, brain-based diagnostic treatments that help children and adults improve concentration, sleep better, and manage stress. Using data from quantitative electroencephalography (EEG), along with other physiological measures, deep understanding is gained of why a person’s health and well-being may be compromised. Uses proven neurofeedback therapy to train the brain to operate more efficiently.</td>
<td>Address: 2040 East Beltline NE Grand Rapids MI 49525  Phone: (616) 229-0815  Website: <a href="https://www.neurocorecenters.com/">https://www.neurocorecenters.com/</a></td>
</tr>
<tr>
<td>Paws with a Cause</td>
<td>Service dogs for children with autism. Improves social interactions and relationships, expands verbal and nonverbal communication, teaches life skills, increases interest in activities, and decreases stress within the family.</td>
<td>Address: 4646 Division Avenue South Wayland, MI 49348  Phone: (616) 877-7297  Website: <a href="http://www.pawswithacause.org">www.pawswithacause.org</a></td>
</tr>
<tr>
<td>Sensory Learning Center of West</td>
<td>Supra-model approach to developmental learning that unites auditory, visual, and</td>
<td>Address: 11301 Commerce Road, Suite A</td>
</tr>
<tr>
<td>Michigan</td>
<td>vestibular into one 30-day drug-free intervention to improve perception, understanding, and the ability to learn. -Listening profile and visual-motor measurements are taken. -Perception maps help provide baseline that are used to customize the program for the individual.</td>
<td>Allendale, Michigan 49401 Phone: (616) 895-9550 Website: <a href="http://www.wmsensorylearningcenter.com">www.wmsensorylearningcenter.com</a></td>
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<tr>
<td>Vision and Sensory Center</td>
<td>-Strives to help each person coordinate the visual system with the body so that it may operate at its most efficient potential. -It engages bodies and movement in the visual process, integrating vision with other senses, and learning to think visually. -Patients work one on one with a therapist who guides the learning process.</td>
<td>Address: 4467 Byron Center Avenue SW Wyoming, MI 49519 Phone: (616) 534-4953 Website: <a href="http://www.vscenter.com">www.vscenter.com</a></td>
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# Toys & Therapy Products

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| Aunt Sandy’s Sewing   | - Over 60 hand-created products to help with special needs, from infants to adults.  
                          - Weighted, sensory, and wheelchair products are available.  
                          - Special orders are accepted.                               | Address: P. O. Box 721  
                          Washington, Michigan  
                          Phone: (586) 337-5112  
                          Website: [www.auntsandyssewing.etsy.com](http://www.auntsandyssewing.etsy.com) |
| Discovery Toys        | - Products have useful applications for children and adults with developmental disabilities.  
                          - Committed to bringing fun, safe, and developmentally appropriate toys and products to children and adults of all ages. | Phone: (616) 667-8565  
                          Email: denisespratt.dt@gmail.com  
                          Website: [https://www.discoverytoys.net/](https://www.discoverytoys.net/)  |
| OTvest, LLC           | - Offers weighted vests of various sizes (e.g., 4-20+)                         | Phone: (269) 329-3287  
                          Email: otvest@otvest.com  
                          Website: [www.otvest.com](http://www.otvest.com)                         |
| Peaceful Products     | - Custom-made weighted blankets, lap pads, throws, dentist blankets, and shoulder pads.  
                          - Medical or fleece products.                                       | Phone: (616) 805-8716  
                          Email: info@peacefulproduct.com  
                          Website: [www.peacefulproduct.com](http://www.peacefulproduct.com)            |
| Renew Mobility        | - Offers strollers, gait trainers, standers, bath equipment, manual and power wheelchairs, forward and reverse walkers, canes and forearm crutches, adaptive and activity chairs. | Address: 2215 29th Street SE, Suite A6, Grand Rapids, MI 49508  
                          Phone: (616) 493-2620  
                          Email: info@renewmobility.org  
                          Website: [https://renewmobility.org/](https://renewmobility.org/) |
| Therapy Shoppe Inc    | - Innovative sensory products, fidget tools, educational toys, occupational therapy tools, autism or special needs toys for learning, play, self-regulation, sensory integration, handwriting, motor skills development, fidgeting, and much more. | Address: P. O. Box 8875  
                          Grand Rapids, MI 49518  
                          Phone: (800) 261-5590 / (616) 696-7441  
                          Email: info@therapyshoppe.com  
                          Website: [www.therapyshoppe.com](http://www.therapyshoppe.com) |
# Transportation Services

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</table>
| Care.com                 | - Find trusted after school transportation near you.  
                             - Compare and hire the best after school transportation to fit your needs.                                                                                                                                                                                                                       | Website: [https://www.care.com/after-school-transportation/grand-rapids-mi](https://www.care.com/after-school-transportation/grand-rapids-mi)                                                                                                                                                              |
| MTM Transit              | - Offers specialized student transportation solutions that make quality and safety a priority.  
                             - Must have Medicaid or Medicare health plans to qualify.  
                             - Visit the link and enter the zip code for a list of eligible health plans that qualify. Select your health plan and details regarding how to set up transportation will be displayed.                                                                                     | Phone: 636-561-5686  
                             Fax: 636-561-2962  
                             Email: marketing@mtm-inc.net  
                             Website: [http://www.memberportal.net/](http://www.memberportal.net/)                                                                                                                                                                                                                           |
| The Transporter          | - Located in Grand Rapids, Michigan.  
                             - Has been operating for approximately 6 years.  
                             - Has provided transportation for children with ASD to Wedgwood previously.  
                             - Contact Monica Robertson.                                                                                                                                                                                                                                                                  | Address: 1632 Diamond Ave NE, Grand Rapids, MI 49505  
                             Phone: (616) 202-4767  
                             Website: [https://www.a1autotransport.com/](https://www.a1autotransport.com/)                                                                                                                                                                                                                   |
| The Rapid                | - To be able to use the service due to disability, an ADA application must be completed.  
                             - For those who have been approved, the GO! Bus provides service in the same area and at the same days and times as The Rapid fixed-route buses.  
                             - GO! The bus is also available to companions of qualified riders, personal care attendants (PCAs) and service animals.                                                                                                                                                              | Address: 250 Cesar E. Chavez Ave SW, Grand Rapids, MI 49503  
                             Phone: (616) 766-1100  
                             Email: info@ridetherapid.org  
                             Website: [https://www.ridetherapid.org/additional-services/go-bus/how-to-apply](https://www.ridetherapid.org/additional-services/go-bus/how-to-apply)                                                                                                                                                     |
| United Way’s 2-1-1       | - Connects people with resources for transportation and other resources.  
                             - Can call, chat online, email, or search the database to find resources.                                                                                                                                                                                                                 | Address: 118 Commerce Ave SW, Grand Rapids, MI 49503  
                             Phone: 616-459-6281  
                             Email: communications@hwmuw.org  
                             Website: [https://www.hwmuw.org/211](https://www.hwmuw.org/211)                                                                                                                                                                                                                                   |

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References


Family Caregiver Alliance (FCA). (2022, April 7) Caregiver health. [https://www.caregiver.org/resource/caregiver-health/](https://www.caregiver.org/resource/caregiver-health/)


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