

Pupil ID: Parent ID: Week commencing: / /
day month year

ASSIST Feasibility Trial FOLLOW UP WEEKLY DIARY - Parent

This diary is to record your experience of using either Social Story™ or an Attention Control Story as part of the ASSIST Trial (referred to below as ASSIST Story) and any change to the target behaviours/social skills identified in the Goal Setting Meeting with the clinician. **Please complete the dairies based on the time you spend with the child/young person (e.g. at home)**

1. Experience of using the ASSIST Story:

Please complete the following table to tell us about your daily use of the ASSIST Story with the child/young person.

WEEK <input type="text"/>	1. How many times was the ASSIST Story read today? <i>Please enter '0' if the ASSIST Story was not read today.</i>	2. On average, how long did it take to read the ASSIST Story each time? <i>Please specify in minutes.</i>	3. On a scale of 1 to 5, how well was the ASSIST Story received by the pupil? <i>Scale: 1 - very poorly and 5 - very well</i>	4. How did the pupil react to the ASSIST Story? <i>Please give any comments</i>
Monday	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Tuesday	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Wednesday	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Thursday	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Friday	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Saturday	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Sunday	<input type="text"/>	<input type="text"/>	<input type="text"/>	

2. Pupil's Progress:

At the Goal Setting Meeting you agreed a goal and related target behaviours/ social skills which you hoped would increase or decrease.

Goal: _____

A. Target behaviour/ social skill to INCREASE: _____ Measured at home? Yes No

B. Target behaviour/ social skill to DECREASE: _____ Measured at home? Yes No

WEEK <input type="checkbox"/>	1. How many times did you observe target behaviour/ social skill A today? <i>Please enter '0' if you did not observe the target behaviour/ social skill today.</i>	2. On average, how long did target behaviour/ social skill A last each time it occurred? <i>Please specify in minutes and seconds.</i>	3. In what setting did target behaviour/ social skill A most frequently occur? <i>Enter: 1 = At home, 2 = other 'If other' please specify location.</i>	4. How many times did you observe target behaviour/ social skill B today? <i>Please enter '0' if you did not observe the target behaviour/ social skill today.</i>	5. On average, how long did target behaviour/ social skill B last each time it occurred? <i>Please specify in minutes and seconds.</i>	6. In what setting did target behaviour/ social skill B most frequently occur? <i>Enter: 1 = At home, 2 = other 'If other' please specify location.</i>
Monday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> _____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> _____
Tuesday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> _____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> _____
Wednesday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> _____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> _____
Thursday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> _____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> _____
Friday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> _____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> _____
Saturday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> _____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> _____
Sunday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> _____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> _____

Pupil ID:

Teacher ID:

Week commencing: / / 2 0 1 3
day month year

ASSSIST Feasibility Trial FOLLOW UP WEEKLY DIARY - Teacher

This diary is to record your experience of using either Social Story™ or an Attention Control Story as part of the ASSSIST Trial (referred to below as ASSSIST Story) and any change to the target behaviours/social skills identified in the Goal Setting Meeting with the clinician. **Please complete the dairies based on the whole of the school day.**

1. Experience of using the ASSSIST Story:

Please complete the following table to tell us about your daily use of the ASSSIST Story with the pupil.

WEEK <input type="text"/>	1. How many times was the ASSSIST Story read <u>today</u> ? <i>Please enter '0' if the ASSSIST Story was not read today.</i>	2. On average, how long did it take to read the ASSSIST Story each time? <i>Please specify in minutes.</i>	3. On a scale of 1 to 5, how well was the ASSSIST Story received by the pupil? <i>Scale: 1 - very poorly and 5 - very well</i>	4. How did the pupil react to the ASSSIST Story? <i>Please give any comments</i>
Monday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>	
Tuesday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>	
Wednesday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>	
Thursday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>	
Friday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>	

2. Pupil's Progress:

At the Goal Setting Meeting you agreed a goal and related target behaviours/ social skills which you hoped would increase or decrease.

Goal:

A. Target behaviour/ social skill to INCREASE:

B. Target behaviour/ social skill to DECREASE:

WEEK <input type="text"/>	1. How many times did you observe target behaviour/ social skill A today? <i>Please enter '0' if you did not observe the target behaviour/ social skill today.</i>	2. On average, how long did target behaviour/ social skill A last each time it occurred? <i>Please specify in minutes and seconds.</i>	3. In what setting did target behaviour/ social skill A most frequently occur? <i>Enter: 1 - in Classroom, 2 = In playground, 3 = other "If 'other' please specify location.</i>	4. How many times did you observe target behaviour/ social skill B today? <i>Please enter '0' if you did not observe the target behaviour/ social skill today.</i>	5. On average, how long did target behaviour/ social skill B last each time it occurred? <i>Please specify in minutes and seconds.</i>	6. In what setting did target behaviour/ social skill B most frequently occur? <i>Enter: 1 - in Classroom, 2 = In playground, 3 = other "If 'other' please specify location.</i>
Monday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> <input type="text"/>
Tuesday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> <input type="text"/>
Wednesday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> <input type="text"/>
Thursday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> <input type="text"/>
Friday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <i>If 'other', please specify:</i> <input type="text"/>