**Massachusetts Autism Commission**

*Meeting Minutes*

December 9, 2024 -3:00 p.m. –4:30p.m.

*Via Zoom*

**Autism Commission Members Present**: Undersecretary Mary McGeown(EHS), Michelle Harris (DDS), Carolyn Kain (EHS), Tim Cahill (DDS), Rep. Christine Barber (HOU), Rep. Joseph McKenna (HOU), Mi-Hata James (DMH), Lee Robinson (MassHealth), Toni Wolf (MBY), Jen Chebator (DCF), Christine Hubbard, Sarah Peterson (DDS) Iraida Alvarez (DESE), Aimee Smith Zeoli (EEC), Bronia Clifton (EOHLC), Emily White (DPH), Sacha Stadhard (EOL), Jo-Ann Simmons, Faith Ambrose (EOE), Janet Barbieri, Laurie Anastopoulos, Michele Brait, Julia Landau, Ann Neumeyer, Joanne Flatley, Rita Gardner, Zachary Houston, Jessica Sassi and Amy Weinstock.

**Meeting Minutes**: Dianne Lescinskas (EHS)

**Welcome and Approval of the Minutes from November 20, 2024**

Undersecretary Mary McGeown called the meeting to order and welcomed the members to the meeting. Aimee Smith Zeoli, Special Education Support Specialist for EEC and Sarah Peterson, Acting Commissioner of DDS are both new members of the Autism Commission and introduced themselves.

Ms. Kain reviewed the agenda for the meeting and then asked for a motion to approve the meeting minutes from the Autism Commission meeting on November 20th, 2024. There were two edits to the meeting minutes and with the edits, it was asked for a role call to approve the meeting minutes. Ms. Sassi made a motion to approve the minutes and Ms. Gardner seconded the motion. Ms. Kain asked if there were any questions or comments on the minutes and seeing none, a roll call was done with members Aimee Smith Zeoli and Sarah Peterson abstaining from the vote – all other members approved the meeting minutes. The minutes from November 20, 2024, were approved.

Undersecretary McGeown started the meeting with discussion of the new priorities chart from the subcommittees that was created to help guide the Autism Commission on prioritizing the work of the Commission for 2025. The chart includes budget, legislation and policy columns as well as short, medium and long-term columns. The co-chairs of the subcommittees were tasked with identifying each of their prospective recommendations/priorities and checking off, in the chart, how each recommendation/priority should be categorized in the columns in the chart. She discussed that this can be used as a tool to help identify which recommendations/priorities the subcommittee members should work on during the upcoming year – to pick a few that will be achievable. Undersecretary McGeown emphasized that this meeting was an opportunity for all members to give input for the work of the Commission for the upcoming year, and she invited all members to engage in an open discussion on the work of the Commission, and to give their feedback at today’s meeting.

***Comments***

* Commissioner Wolf Co-chair of 14-22/employment subcommittee discussed the importance of one of the previous recommendations regarding DEI. The subcommittee had worked on the recommendation for months, had DESE provide data on the high number students of color in sub separate settings in their school. It is an important topic, and the members of the subcommittee were passionate about the topic and wanting to move it forward. It is a DESE question/obligation and not able to move the recommendation forward. It was meant to raise awareness on classroom placement and the data was helpful to show the disparities on where students were being placed.
* Comm. Wolf also asked if the subcommittees could be put on hold until there is more clarity on how they should move forward in their work.
* It was asked if “homebound” could be added to school placements in the data as some students did not return to school after COVID.
* Undersecretary McGeown discussed that the purpose of the meeting and of the chart was to help guide subcommittees to look at priorities/recommendations and work to agree on which one(s) would be achievable and what would the steps be to move it forward. In addition, members were asked if they had other issues they wanted to identify for the future work of the Commission. No additional items were proposed.
* An observation, when looking at the recommendations is that some priorities assume different functions for state agencies – some are advising roles, some are assumed we are analysts and some assume we, as a subcommittee will be doing the work, and some assume we are changing policy.
* Data pulling is there an opportunity for allowing subcommittees to look/examine the data that is currently available and put together an action plan. It may help reveal how to move forward with an action plan on specific issues based on data currently available, however, the work is to inform state agencies on their current and future work. The Commission does not fund or provide any direct services and is a policy recommending body.
* There are a fair number of recommendations/priorities that lend itself to information sharing and the sharing of resources – what is the best way to capture this information and push it out. Sharing information/resources on multiple state websites should be explored.
* Early Intervention has a recommendation on DEI and the transition from EI to school.
* Adult recommendation on adults that were not diagnosed early in life and are now not able to get services due to lack of diagnosis – this is something that needs attention as well as aging adult caregivers.
* Comment was made on giving attention to ASD individuals who are immigrants and have many struggles with services across the board – we anticipate that these challenges will become worse as time goes by.
* Child Safety was discussed and the idea of a website of resources – one site with resources for ASD and anything related to safety. This could be achieved with minimal budget impact.
* Access to care – reviewing feedback on timely transition on access to care and age of onset (EI).
* Webpage on information sharing for post diagnosis – it may already exist, but it should be on all related state agency websites.
* Risk and Safety – an action item to avoid imminent risk (add a column to the chart – low need/high risk)
* Not having access to a diagnosis and services will change the trajectory of a child’s life and have an impact on development of a child.
* It was added that the access issue is also an issue for adults in terms of medical and behavioral health care crisis – more training is needed for healthcare workers. Aging and the transition at the other end of life can get ignored when a caretaker is no longer there, and the person is not connected to services.
* Ms. Weinstock asked about Center Based Programs and the needed licensure or regulations. Commissioner Kershaw responded that this will be a topic for discussion in a future meetings with EEC, MassHealth and DPH, and work is being done to identify the most appropriate next steps.

***Next Steps:***

1. Take the information provided on recommendation/priorities and look at themes in the recommendations for next steps. No new recommendations/priorities were added during the meeting.
2. Look at different areas, equity& access, and resources. Continuum of care (behavioral health), safety issues with a goal towards a web page housing resources on ASD and safety concerns.
3. Ms. Kain discussed information that has been created for families in 6 different languages – on the Commission website, and that we should take a look at them and update and add to as needed.
4. Organize recommendations/priorities in themes (access/equity, and resources), and ask each ember to opine on no more than 2 recommendations/priorities for each subcommittee before the next meeting. The information will be tallied and added to the annual report under subcommittees. Approval of the annual report will be voted on at the next meeting.
5. Once drafted and reviewed by the Chair, the chart will be sent to members of the Autism Commission for responses before out next meeting in January or February 2025.
6. Ms. Kain asked if the respective state agencies could also look at the list of recommendations/priorities and determine if any recommendations/priorities are already related to work that they are currently engaged in – we do not want to duplicate efforts.

***Comments:***

* Question was asked by Commissioner Wolf “What are we” – looking for clarity – is the role of this group shifting to not only making recommendations?
* Concerned that a lot of time will pass prior to next meeting given the holidays – how can we keep the needle moving – a lot of great recommendations/priorities but some are not attainable – we need to pick a few things that we can work on and get done in the coming year. The Chair asked the members to focus on specific recommendations/priorities that are achievable in the next year given the expected budget constraints expected.
* Under the open meeting law, members of the Autism Commission should respond directly to Ms. Kain with their selections of recommendations/priorities, and this will assist with moving the work forward before our next meeting.

**Autism Commission Annual Report**

Ms. Kain shared a draft report with members of the Autism Commission, and she added back in information on the Autism Waiver and the DDS/DESE program. The report contains updated information on DDS, collaboration of DDS and DMH, MassAbility, and MassHealth. The report is factual and meant to be informative for the Legislative committees and the Governor. Members are welcome to email directly to Ms. Kain with their comments or questions. All comments are due on or before January 6, 2025.

With no further business to discuss, a motion to adjourn was made by Undersecretary McGeown, Commissioner Wolf seconded the motion and with no objections, the meeting adjourned.