Massachusetts Autism Commission

Meeting Minutes

May 13, 2021– 2:00 p.m.– 4:00 p.m.

Via WebEx

Autism Commission Members Present: Secretary Marylou Sudders (EHS), Katie Mick, Undersecretary (EHS), Carolyn Kain (EHS), Jane Ryder (DDS), Elizabeth Morse (DDS), Janet George (DDS), Rep. Christine Barber (HOU), Sen. Joan Lovely (SEN), Ann Reale (EOE), Samantha Aigner-Treworgy (EEC), Kate Ginnis (EHS) ,Kathy Sanders (DMH), Christine Hubbard, Russell Johnston (DESE), Amy Weinstock, Bronia Clifton (DHCD), Michele Brait, Joan Butterfield (DPH), Toni Wolf (MRC), Katherine Canada (DCF), Sacha Stadhard (EOL), Dania Jekel, Jo Ann Simons, Julia Landau, Ann Neumeyer and Vincent Strully

Guests: Maria Mossaides (OCA), Jessie Brunelle (OCA), Michelle Harris (DDS), Christine Palladino-Downs and Katherine Haney (EHS)

Meeting Minutes: Dianne Lescinskas

**Welcome - Review and Approval of Meeting Minutes from February 1, 2021**

Secretary Sudders called the meeting to order and welcomed the Autism Commission members.

Secretary Sudders asked for a motion to approve the meeting minutes from February 1, 2021. Kate Ginnis moved the motion and Ann Reale seconded the motion. Ms. Kain called for a roll call vote and the minutes were approved with Secretary Sudders abstaining from the vote.

**Report from Director Maria Mossaides, Office of the Child Advocate**

Director Mossaides gave a brief introduction on the Office of Child Advocates and their work. She then moved on to a PowerPoint presentation on the Multi-Systemic Investigation into the death of David Almond.

*Presentation*

* The OCA reviews every critical incident report to understand what happened and why it happened.
* For DCF involved children, the review focuses on whether there was a missed opportunity for DCF to assist the family and protect the child.
* Director Mossaides reviewed the timeline of what happened in this case that led to the death of David Almond, a 14-year-old teenager with Autism Spectrum Disorder.
* The OCA determined there was a multi-system failure, complicated by the pandemic, and that the safeguards that were in pace, especially at DCF, were inadequate.
* Children with disabilities are at least three times as likely to be maltreated than their peers without disabilities, and more likely to be seriously injured by abuse or neglect.
* Lack of general knowledge about disabilities, and lack of specific knowledge of how these children’s disabilities presented in them as individuals, resulted in state systems overlooking the risk factors and warning signs that precipitated David’s death.
* There were 26 recommendations as a result of the investigation that included recommendations for DCF, DESE, Juvenile Court, and Probation Services.
* The safety and well-being of a child, particularly a child with disabilities, is the shared responsibility of the family, community, and entities responsible for providing services to children and families.

*Questions/Comments*

* DCF is dedicated to implementing all the recommendations from the report and will make necessary changes to support all individuals with disabilities.
* Secretary Sudders said that Governor Baker indicated that he would accept all the recommendations and a few other recommendations that are not in this report.
* In 2015 DCF had created substance abuse specialist positions. These positions will be expanded to include specialists in disability. The specialists will have a range of expertise.
* DCF will update the Autism Commission on the work and will get their input in the changes so they can benefit from the expertise of commission members.
* There will be a few other changes that were not included in the report. 1. Youth in Special Education placements will not have their placement interrupted unless it is a natural occurrence. 2. When there is a disagreement in a team there will be an interim step for a social worker to move the issue up so decisions are not made in a vacuum. 3. Bring the provider voice into the process.
* It is essential to assess the parent capacity to take care of a child with a disability. AANE sees a lot of parents with ASD themselves.
* There will be a set of mandates that will require core-competencies across all lines of social workers and disability will be one of the core competencies.
* There are resources for kinship families and DCF will ask if these resources include ASD.
* The OCA report recommendation included assessment of risk and protective factors and DCF is looking at an evidence-based tool of risk of harm and protective factor. It will be a collection of data and a validation tool – will take 18 months to develop and then there will be a mandated training on the tool.
* The OCA offered to come back to a future Autism Commission meeting to engage in specific areas and follow up.

**Budget Updates**

Catherine Haney, CFO for the Executive Office of Health and Human Services shared a PowerPoint presentation on the FY2022 budget to date.

*Presentation*

* H.1 funds DDS at $2.260 B, a $127.4 M (+6%) increase above the FY21 GAA
* This is the 5th consecutive year that the T22 class of 1233 new members has been fully funded.
* House Budget and Senate Ways and Means (SWM) both fund DDS at $2.990 B a $158M (+7%) increase above the FY21 GAA. Increases from H.1 are:
* + $7M to Transportation
* +$15M to Community Day and Work
* + $7 Family Respite
* + $1.5M to Autism Division Services
* The House and SWM budget do not include transferability as proposed in H.1 but instead includes consolidated line items and annualized funding in the Turning 22 appropriation (5920-5000) account for individuals who began receiving services in FY20 allowing for greater flexibility in spending and service provision.
* 23%-25% of individuals served in this appropriation are on the Autism Spectrum.
* **Adult Autism Services (5920-3020)**
* This account is funded at $36.6M in H.1, House and SWM. As of March, 1,893 adults with Autism are enrolled in DDS services and supports from this account.
* This account also funds a $435K ISA with DMH aimed to provide diagnostic clarity, consultation, and treatment recommendations around eligibility and service planning. For example, the ISA funds: 3 psychiatric fellowships (Residency Training Grant Programs) at MGH Boston, Boston Medical Center and UMass Medical Center in Worcester. Risk Assessment Services. Clinical consultation, treatment planning and service design recommendations for ASD individuals.
* $5K for training involving DDS and DMH managers (with the assistance of Asperger’s Autism of New England)

* **Children’s Autism Services (5920-3010)**
* H.1 funded this account at $5.9M while House and SWM budget proposed $7.4M. This account supports 6 staff statewide; 246 children are currently enrolled in the child Autism waiver.

* **DDS/DESE**
* This program is funded at $10.5M in all three current proposals and has served 775 children in FY21. An additional 275 children and families have requested participation in this program and are in process of being assessed. Approximately 60%-75% of this population has an Autism diagnosis.

With no further business to discuss Ms. Kain asked if there was a motion to adjourn the meeting. A motion to adjourn was made by Mr. Johnston and seconded by Ms. Ginnis, meeting adjourned.