**Autism Commission, Birth to Fourteen Years Old Subcommittee Meeting**

Massachusetts Department of Elementary and Secondary Education

75 Pleasant Street Malden, MA 02148

Thursday, June 21, 2018, 12:00 p.m. to 1:45 p.m.

Members present: Russell Johnston, Michele Brait, Carolyn Kain, Dianne Lescinskas, Joan Raﬀerty, Julia Landau and Alexis Glikman

Members participating via telephone: Beth Jerskey, Sarah Richman, and Rob Polsinelli

Russell Johnston called the meeting to order and welcomed all members of the Birth to Fourteen Years Old Subcommittee. Dr. Johnston noted that this meeting, like all Autism Commission subcommittee meetings, would be subject to Massachusetts’ Open Meeting Law, and, as such, the present members of the subcommittee would need to vote to allow non-present members to participate via telephone. Subcommittee members physically present at the meeting voted unanimously to allow such remote participation.

The meeting minutes from the May 10, 2018 meeting were duly reviewed by all meeting participants and approved.

Dr. Johnston then reviewed the meeting norms sent to all members of the subcommittee as part of the meeting agenda.

**Review of Subcommittee Priorities**

Dr. Johnston reviewed the three (3) priorities that were set during the last meeting on May 10, 2018. He asked this subcommittee what they deem as successful outcomes and then work through steps to address issues, come up with a timeline and asked how we will hold ourselves accountable for the work.

1. **Providing input into the development of the DESE electronic IEP to ensure the inclusion of issues that relate to students with ASD**
* How does the new electronic IEP address transition services
* Does it look at the 7 areas of ASD under Chapter 71B
* Does it address bullying specific to ASD
* Is it addressing Inclusion - especially in the younger grades and placement of students in substantially separate classrooms
* Cultural and linguistic barriers and ASD
* Will it address how a team will run a culturally competent IEP meeting (Ms. Kain commented that this seemed more of a training issue for staff)

*Ms. Glikman commented, as a whole, it is important to make sure everyone is culturally responsive in all situations in general and then specifically to ASD*

* Is there a way to alert families about state agency supports other than through the 688 process? The Autism Commission’s brochure addresses this issue but could it be part of the new IEP.
* There are triggers for compliance around a students’ first IEP being done at age three (3) in a timely manner. Dr. Johnston discussed a technical advisory on this issue that is being developed.

This subcommittee wants to be sure that these, and other issues specific to ASD, are being addressed at the team level. Dr. Johnston will ask members from the IEP Improvement Project committee to attend the meeting on September 27, 2018 and give this subcommittee a presentation on the work currently being done on the new Electronic IEP. This will give subcommittee members an opportunity to identify any gaps in the system as it relates to ASD. The goal is to not just have a team check a box but to help spur meaningful discussion with families. Ms. Kain noted that the team could also record how they addressed the questions with the student/family and also record the outcome of the discussions. Ms. Rafferty said it will be helpful once we know where the IEP team is on this process. Dr. Johnston said the overarching goal is how will the new electronic IEP foster more meaningful conversation on ASD.

**Next Steps**: Invite the IEP Improvement Project to the meeting on September 27, 2018 to give a presentation on the electronic IEP being developed. This will help identify any gaps and give this subcommittee a chance to give recommendations on what is being developed. This subcommittee would then provide a written response about the findings from the Electronic IEP and come up with a recommendation to be reviewed by the full Autism Commission. Ms. Landau commented that the list the subcommittee developed could expand once we review the new IEP. Dr. Johnston asked that if any members have additional comments, they should email him directly.

1. **Addressing the shortage of ABA providers across the state**

Dr. Johnston asked what might success look like and how will we address this issue. The Workforce Development subcommittee is also working on this topic and they are in the beginning stages. They are looking at how to encourage people to go into this field and then stay, as well as incentive programs such as tuition reimbursement to incentivize people to go into this field of work. They have collected data on which colleges/universities are offering courses and degrees related to ABA and how they can encourage better pathways from an associate degree to degrees at the master level. They are also looking at this issue more globally as there is a shortage of direct service workers as well.

* Is there data on the waitlist for ABA services that includes the numbers, income level, region and race
* DESE does not require any licensure for individuals providing direct ABA or the Mass. License for BCBAs in their schools
* There is a wage disparity between schools and in home supports and with hospitals and center based programs
* RBT – Registered Behavior Technician – 40 hour online course – a lot of paraprofessionals working for private providers are taking this competency based course. The person has to be 18 years old, have a high school diploma or a GED. For Early Intervention purposes, they require at least an Associate’s Degree to work for them but they could attract more workers if they relax that rule – they are talking to MassHealth about RBT but the age requirement would have to be 21 years old. The training does not transfer for credits if the person decides to pursue a degree in this field.
* This subcommittee is interested in finding data on the numbers of ABA providers and their demographics – this will be helpful in recruitment. DPH may be doing some data collection and Joan Rafferty thought there were at least 15 providers that we could reach out to for their data on the number of children served and the wait lists for services. Ms. Kain also discussed reaching out to MassHealth and inquiring about their agency providers for additional data. Lastly, other members on this subcommittee may be able to contribute to data collection.
* The shortage issue is not exclusive to Massachusetts- we have approximately 3,000 BCBA’s – many states have far less
* The LABA is an additional licensure requirement
* Center Based Programs are an issue. Some families will keep their children at a CBP until they are 5 years old to access ABA services approved by insurance
* There is a lag time in payment with insurance companies – if a person is fully credentialed BCBA and LABA insurance companies are still taking an extended period of time to credential these individuals to enable them to get paid by insurers.
* There is legislation pending to allow for temporary provisional ABA license until the full license is accessed. Currently, a full license is required for billing purposes.

**Next Steps**: Workforce Development is working on the issue of recruitment and retention. Does our subcommittee want to exert ourselves on this topic or does it make more sense for WFD to continue their work and have our subcommittee receive updates. Ms. Kain will report back to this subcommittee on the work being done, on this topic, by WFD and ask the chairs of WFD how this subcommittee could be helpful with this issue. There was further discussion on the Center Based Programs and this committee discussed possibly exploring this as a specialized issue.

1. **Identifying ways to decrease wait times for evaluation and early diagnosis and promote existing resources for Health Care professionals**
* Mass Act Early videos are an effort to address this issue
* DESE data has broken down the number of ASD students by culture and ethnicity and the data shows a much lower number of African American and Hispanic compared to white students with ASD – Ms. Landau said she is also interested in the percentage.
* Massachusetts is not a CDC monitoring site but a recommendation came from The Autism Roadmap report that MA may wish to become a monitoring site.
* There are a few models that could be replicated to help with wait times – UMass Boston uses an MCHAT screening tool and developed a level 2 screening to allow physicians to increase to testing 2 patients per day. Project Early uses the Stat Test – a level 2 screener and has been able to test individuals at a quicker rate.
* In Springfield a psychologist is targeting families who may have trouble bringing children to a clinic and is now making home visits
* Ms. Kain discussed Boston Medical Center initiative called Three under Three – and that BMC also raised the issue of allowing a nurse who is competent in administering the ADOS to diagnose, but under the statute only licensed physicians and licensed psychologists can diagnosis.
* This subcommittee discussed finding a providers list to assist families and how we can help to find out what exists for resources and what ideas we have for improving the use of the tools that are currently available
* American Academy of Pediatricians has a distribution list
* Ms. Kain stated that she has reached out to the Division of Insurance about the extended period insurers are taking to credential individuals after they receive their LABA.
* This subcommittee asked if we came up with ideas on promoting existing resources, like those already on the Mass Act early website to help decrease wait times, would it be welcomed, and who is our audience
* Hearing assessments and ASD was discussed as an issue by Dr. Jerskey
* Ms. Landau commented that there needs to be more clarity around gathering data on the initial wait time for evaluation and diagnosis. One issue is that some are diagnosed prior to age three but then are required to have additional testing for diagnosis for continued services through DDS and Mass Health.

**Next Steps**: We will look at this issue more closely in November and it was asked that this subcommittee think of ideas around this issue to be discussed during the September meeting. There are two issues to look at – reducing wait times and promote existing resources. It was mentioned that by promoting existing ideas it could help reduce wait times. Elaine Gabovich’s report, Autism Roadmap, has some information on wait times and Ms. Rafferty will also check with EI providers on their wait times.

**Next Meeting**

Dr. Johnston asked to extend the meeting on September 27, 2018 to two hours. Ms. Kain will give an update on the Workforce Development subcommittee work and Ms. Rafferty will give information on wait times and promoting information. The IEP Improvement committee will give a presentation on the electronic IEP. A doodle poll will go out to the subcommittee members to set a date for the meeting in November.

With no further business to discuss, the meeting was adjourned at 1:40 p.m.