Autism Commission

Subcommittee for Workforce Development

June 18, 2018 – 10:00am – 11:30pm

Advocates - 1881 Worcester Road, Framingham, MA

Attendees: Pat Gentile, Carolyn Kain, Dianne Lescinskas, Mike Maloney, Jeff Keilson, Liz Martineau, Maryann Diezk and Sue Houle

Dr. Gentile called the meeting to order and welcomed the members to the meeting of this subcommittee.

**Review of Minutes**

Minutes from last meeting in May of 2017 were reviewed and approved, with minor changes.

**Review of Goals**

This subcommittee will reexamine their goals and look at “low hanging fruit” and set long term goals as they may need additional time for members to address.

* Cambridge College provides 60% tutor support
* 1500 hours and supervision is required
* Could take up to 2 to 2 ½ years to get the supervision
* Verified coursework sequence
* BACB – Behavior Analyst Certification Board – they oversee and ensure a program is certified
* Certified Colleges include: Regis, Western New England, Westfield, Cambridge College, Simmons, Northeastern University, Endicott, UMass Lowell, Elms and BayPath
* In 2017 there were 302 individuals that passed the exam
* There are 1300 LABA’s in Massachusetts – 700 have not applied for their license – it is a $100 fee for the state to look at it
* The licensing board only consists of 2 members that are BCBA’s out of 14. They have to review a lot of applications – if both BCBA’s are not present, they cannot do a review
* There is a need for an independent board
* **Draft Recommendation** - To have an independent board under the Allied Board of Mental Health – there is a bill out there on jobs and this could be tacked on making this recommendation moot if it passes (Sue will send out copies of the legislation work on this topic)
* Ask the Division of Insurance to work with us on this issue
* There are 2-3 payers that pay a large percentage – might be useful to go to payers to ask if they are willing to allow a lengthened time for an individual to receive their license as long as they are credentialed this will allow a credentialed non-licensed person to work with an individual.
* Insurance companies could allow longer period of time for a person to receive their license. As it currently stands, the longer it takes to get a license to someone the less insurance companies have to pay out
* **Draft recommendation** –the insurance company allows a certified BCBA to bill while they are waiting for their license
* Nashoba Learning Group provides $500 reimbursement per semester for course tuition, up to a maximum of two (2) semesters per fiscal year– they will be required to stay three years for loan forgiveness
* EI accepts an Associate Degree plus hours in the field
* Schools do not have any requirements for ABA and most times have paraprofessionals doing ABA with students – typically there are no training hours available to them
* The training for Para’s should be built into the IEP
* Parents will push for out of district placement due to inadequate ABA services in the school
* RBT – 40 hour training requirement but cannot use towards a degree – at a minimum this should be what is required in public schools
* Caseloads of BCBA’s are very high in public schools - one hour of supervision for every 10 hours of direct service – districts would have to hire many more BCBA’s if the requirement in school was to have RBT training
* There are large disparities in what insurance companies require and what school districts require
* This subcommittee should also not lose sight of the challenge with direct support staff in programs – there is another large group of people doing direct care with individuals
* Three levels for consideration 1. BCBA 2. Direct support professionals in day/residential programs (some have college degrees some have high school but are not licensed – there needs to be a lot of advocacy to get salaries up to $15 per hour) 3. Respite worker for family care givers

Discussions move to the Rewarding Work Registry for respite workers. DDS is working on how to get the word out about this registry. There is an access code to get a subscription into the registry –Mr. Keilson will send it out to this subcommittee so they can look at it. Mr. Keilson described the registry as similar to Care.Com but without all the bells and whistles. It involves an application process, the family interviews the candidate and does a reference check. There are no cori/sori requirements. There was further discussion on the lack of cori/sori and if a **recommendation** should be considered for families to run a background check at no cost to them. Mr. Keilson will look into the details on running a cori/sori and report back to this subcommittee.

There was discussion on the rate review and how to incentive direct care workers. A **recommendation** was proposed to review the pay rate to ensure a livable wage to incentive direct care workers. It was also said that group home rates are not high enough at $15 per hour. The pay rate and attracting new workers are a combined issue.

**Draft Recommendations that were proposed by this subcommittee**

**Draft Recommendation** - To have an independent board under the Allied Board of Mental Health – there is a bill out there on jobs and this could be tacked on making this recommendation moot if it passes (Sue will send out copies of the legislation work on this topic)

**Draft recommendation** –the insurance company allows a certified BCBA to bill while they are waiting for their license

**Draft recommendation -** families to run a background check at no cost to them for respite workers.

**Draft recommendation** - review the pay rate to ensure a livable wage to incentive direct care workers.

**Other topics discussed**

Dr. Gentile met with people from Cambridge College and came up with a draft of the 3+1. It involves three (3) years at Cambridge College and one (1) year at a community college. They are working out the details and she will distribute the final document to this subcommittee once completed.

Further discussion around RBT as a good standard training but they do not get course credits and it will not transfer as credits. If a person could receive credits for this training it would be an incentive to continue with a career path in this field. This subcommittee will look at the possibility of course credits for the RBT training. There is a competency based assessment at the end of the RBT training and it would be helpful to have someone from Human Service Department look at it to see if it could map to credits.

Ms. Kain will review her notes from this meeting and see where she can follow up on some of the tasks discussed.

With no further business to discuss the meeting was adjourned.