Massachusetts Autism Commission

Adult Subcommittee Meeting

Virtual - via zoom

April 28, 2025

11:00 a.m. –12:30 p.m.

**Remote Participation**

Chris Peltier (Co-Chair), Chris Hubbard (Co-Chair) Carolyn Kain, Dianne Lescinskas, Maria Stefano, Michele Brait, Beth Zwick, Janet Barbieri, Josh Greenberg, Des Neiges Harkness, Amam Saleh, Alice Hawkes, Karen Wylie

Meeting Minutes: Dianne Lescinskas

**Welcome and Introductions**

Chris Hubbard opened the meeting with introductions. Ms. Hubbard made a motion to approve the meeting minutes from our prior meeting in September of 2024. Ms. Kain moved the motion, and Mr. Peltier seconded the motion. With no objections, the meeting minutes were approved.

**Discussion of Priorities, including update from DDS regarding initiatives around Aging in Aging Caregiver (two priorities below)**

***Expand Access to Resources for Aging Autistic Individuals, including those who were not eligible for services prior to 2014, and their Aging Caregivers and Support Network*.** Encourage the Department of Developmental Services (DDS), MassHealth and other agencies to develop and disseminate a resource/information packet targeted to individuals aging with autism and their natural support networks and caregivers, including those who may not have been eligible for services prior to 2014.

Ms. Hubbard discussed the charge from the Autism Commission to work on the two priorities of this subcommittee. Ms. Hubbard and Mr. Peltier (DDS) met prior to this meeting to discuss the efforts of DDS on aging and ASD.

* Guidance of outreach strategies
* DDS has a network of support centers – could use as a base for outreach
* There have been statewide efforts to Independent Living Centers
* 55 letters sent and 6 responses – met with them and asked about best way to engage prior to a crisis
* DDS met with UMass Center for engagement – UMass will develop training for service providers
* A lot of individuals (aging) do not have records – how can we engage with intake and eligibility
* DDS is open to guidance on the outreach of those living at home with older caregiver and no services – find prior to a crisis
* Individuals utilizing ASAP’s – give materials so they can add to a newsletter – help to communicate support of DDS for adults
* ADRC – let them know about resources – ASD 101 – they also have a newsletter – add information for outreach efforts
* Mass Options – when a call comes in could they be linked to other agencies and get connected at a local level DDS support center
* DDS is doing staff training on this issue in September
* DDS will develop information for newsletters to help with outreach
* ARC of MA had previously received funding to establish partnerships with senior centers in Lexington – they had 3 meetings and asked broadly about family members with ASD/disability – the ARC was able to connect with the family members to offer support and give information
* DDS will look at the network of centers and how to best approach them – having someone to guide with “next steps” and information sharing is important
* ADRC has a newsletter that goes out every other month – we could develop information sheets to distribute
* Community Health Centers – tap into DPH for information sharing
* Veterans seem to be connected to navigators in senior centers
* Chris Peltier will do a draft of an information sheet and distribute it to the subcommittee for feedback via email
* PCPs would also be a good place to provide information to the family members – they also have newsletters

***Examine Barriers to Accessing Services, including Healthcare Services, Created by Late Diagnosis of Autism Spectrum Disorder*.** Explore ways to effectively reach out to those aging with autism who were not eligible for services prior to 2014 to provide information about and navigation guidance regarding eligibility and services.

If you don’t have a diagnosis and try to establish eligibility, what does the process look like? Especially without school records.

* We could discuss a DDS case and how it was handled – how did the family navigate the hurdles
* We should invite someone from Intake and Eligibility to discuss the situation – Chris Peltier spoke with a senior psychologist from I & E – willing to come to a meeting
* There is a bottleneck on who can administrate the diagnosis
* ECHO model (training – one set of experts to train another set of experts) is a good model for resources’ – could be a good cross training for Elder Services and ASD
* DDS has connected with this type of training
* Template or dashboard to gather information that a family member may need – include links to resources such as school records/health records – leave things in good order
* Self-advocates who are aging – there is a book published by 3 self-advocates with lived experience.
* Psychological barriers – tremendous factor of trusting government systems – should work with local and known persons – people get overwhelmed and shut down

**Action Items**

1. Doodle poll to go out to find dates to meet (every other month)
2. Chris Peltier will draft the “information” document and share with subcommittee members via email

With no further business to discuss, Ms. Kain asked for a motion to end the meeting, Ms. Hubbard seconded the motion and with no objections, the meeting adjourned.

**Priorities and Recommendation Discussion**

A draft of priorities and recommendations was circulated to the subcommittee. Ms. Hubbard also drafted a summary of work from last year going into this year as a refresher.