Massachusetts Autism Commission

Adult Subcommittee

July 14, 2021

Via WebEx

 **Participants**

Carolyn Kain, Christine Hubbard, Kathy Sanders, Janet George, Lea Hill, Dianne Lescinskas, Maria Stefano, Nancy Marticio, Karen Seck, Elizabeth Sandblom, Michele Brait and Kathy Stern

**Approval of Meeting Minutes from May 19, 2021**

The meeting minutes from May were reviewed and Ms. Kain made a motion to approve the minutes, Christine Hubbard seconded the motion. The meeting minutes were approved unanimously.

**Update** **on status of DDS Coaching Services RFR and College Navigation**

Ms. George discussed the procurement for Coaching Services which included Pre-engagement Coaching and College Navigation. There was a good response from providers.

* In May there was a broad-based training for qualified providers
* Providers had the opportunity to apply for one service or both and the qualifications for each service is different
* College Navigation – wanted to ensure that “moms” are not the navigators – looked for recent college grads to help acclimate the student to the college campus – wanted people with working knowledge of ASD
* Coaching and pre-coaching – learned that for some folks, active engagement would take some time – coaching was for the users that knew what they wanted and had a goal in mind – wanted provider who has a masters degree with awareness of ASD and the rates recognized the qualifications – looking for individuals with experience and paying more for providing the service to individuals
* The services are specifically designed for ASD population
* NE Region reported to have 7 providers for pre-engagement, coaching and College Navigation – they had previously done the pilot with Easter Seals for College Navigation
* NE Region received a large number of referrals for coaching and CN but no referrals, as of yet, for pre-engagement – more work may have to be done to “find” individuals for this service as the individuals may be isolated
* Having a large number of providers has been helpful with the referrals
* DDS is planning to run something like a “college fair” for providers so they can describe “who they are and what they do” – will use this as a marketing tool and this fair will be available for all across the state
* The Metro Region have been in touch with providers and have 11 so far – some will be ready to take referrals in July others will wait until August - they are still waiting to hear from additional providers
* The providers will come to the Metro Region’s monthly meetings for a “meet and greet” with staff
* There are similar actions taken place in the South-East and Central West Regions
* College Navigation – waiting to see if college campus’ will be fully opened
* UMass Lowell has professors that are responsive to this service – community colleges are responsive as well
* Providers can start to work with the college student in the summer prior to school starting
* DDS has built in the cost for collaborative activities so individuals will have connections in the community
* Most individuals using coaching service have a specific goal – many of them are looking at employment and social connections
* Mental health can be a barrier to their goals and the coach will help connect to mental health providers

**Update on technological innovations to serve autistic adults receiving MassHealth and DDS services and discussion of the work of the Innovation & Technology Task Force**

Elizabeth Sandblom, Deputy Asst. Commissioner for Field Operations (DDS) joined the meeting to discuss Assistive Technology and remote supports and monitoring

* DDS has been talking about using more technology for quite some time and prior to the pandemic had engaged with Technology Forward
* Two services have been prioritized – Assistive Technology/Evaluation - Training and Remote Support and monitoring
* The Asst. Tech. Evaluation is intended to identify needs of individuals and to support the individual to achieve outcomes to be more independent – it will include and cover purchases of devices, leases and applications (apps) – these will all be reimbursed by Federal Gov.
* The training will support the set up for the user and/or the support person to ensure that people are set up to be successful
* Remote Support and Monitoring – monitors and responds and can use two-way communication for individual to be safe and independent at home – provider staff can communicate at any time
* Goals to be more independent can be scheduled and planned or can be any time of the day
* For individuals with a history of falls/seizures - sensors could be installed – plan for the monitor on “what to do” when sensors go off
* No camera or audio in bathrooms or bedrooms
* This is available for individuals who live at home with family or alone
* This will roll out slowly – targeting groups of individuals that could benefit from this technology
* Could be as simple as setting up an Amazon Alexa and instructing when to take medication or could be more in-depth
* DDS is working on a manual and a quick guide for area offices on how to prioritize the service and how to make a referral
* AT – not all individuals will need an in-depth evaluation and the evaluation will be done by a professional. This is where additional technology can be identified– could utilize a students’ AT evaluation from school if it is recent so they can continue to use the technology that they used in school and now use it as an adult
* Remote Support and Monitoring – providers will need an in-person back up for situations where Wifi goes down, technology is not working. Part of the AT plan will have a plan on who to call if something breaks etc. – they do not want user frustration
* ASD only is not part of the IDD waiver – the waiver provides the state with revenue – for every $1.00 DDS spends, .50 cents goes back to them from the federal government – this waiver is part of the Social Security Act – it is a specific Medicaid vehicle to offer services
* DDS is seeking CMS approval to add the AT and remote monitoring
* This is not meant to replace “human” services and increase isolation but to open opportunities and promote independence
* Providers can subcontract this service and/or develop own service
* There have been only 5 responses to the Remote Support RFR thus far – it is an open RFR so providers can respond throughout the year – 3 contracts have been awarded and all are subcontracting – over time they will develop their own system
* The AT RFR was opened and then closed
* DDS will have a Supportive Tech. Steering Group and will also have a Support Group
* DDS is hiring a Director of Technology Support and once hired, DDS will ask to come to this meeting and will hopefully have stories to share in the next few months

**Next Meeting**

This subcommittee will meet on September 26th and the full Autism Commission will meet on September 9th. There was a discussion on the subcommittee submitting a draft report of the work that has been done, circulate the report for review/comments and having it ready for the 9/9 meeting. The co-chairs decided that they will put together a report on the status of the subcommittee work thus far and will email the members by the end of August with the draft and it will be submitted as an update for the Autism Commission meeting on September 9th.

The meeting on September 26th will include a discussion of priorities for the upcoming year.

With no further discussion, the meeting was adjourned.