**Autism Commission Birth to Fourteen Years Old**

**Subcommittee Meeting**

July 16, 2021 10:00am-12:00pm

Via WebEx

Present on Webex: Co-chairs Russell Johnston and Michele Brait, Rob Polsinelli, Julia Landau, Zack Huston, Michelle Poulin, Beth Jerskey, Erin Sherman, and Carolyn Kain.

Dr. Russell Johnston called the meeting to order and welcomed all members of the Birth to Fourteen Years Old subcommittee meeting. The subcommittee members present unanimously voted to approve the April meeting minutes. The subcommittee then addressed the agenda items.

**Agency Updates from Subcommittee Members**

Mr. Polsinelli updated the subcommittee members on the DDS Waiver Program.

-They are rolling out renewal services and meeting with ASD support centers for trainings.

-Non clinical staff can now visit families in person.

-There are 20 support brokers across the state and 7 clinical managers.

-Vaccine status is mixed over the population.

Ms. Landau updated the subcommittee members on Mass Advocates for Children.

-At a recent retreat they discussed needs for next year for children with ASD and policies and practices required to support these students.

- Primary concerns were: as students return to school with loss of skills and regression, mental health needs and behaviors, how discipline would be handled. In substantially separate programs, concerns that parents will be contacted to pick up their children when behaviors occur. Concerns for supporting ELL learners, and where federal funding will be used to mitigate harm.

Mr. Huston updated the subcommittee members on Boston Public Schools.

-ESY began and staff positions were filled. Attendance bonuses for staff were implemented.

-Student attendance was increasing daily.

* Some ASD students returned and were better and ready to go after a school break.
* Compensatory services are being looked at to get remedial services in place.
* According to the Federation for Children with Special Needs, the number one concern of parents is how the remediation plan will be put into place, which will help them determine if they will send their children back. Translation, transition, and transportation were primary concerns and ESY was the lowest concern.

Ms. Sherman updated the subcommittee members on The Italian Home for Children.

* There are deficits in both programs with difficultly onboarding in community and home ABA.
* Finding experiences people for the program has been challenging.
* The new head of school is trying to build professional development.
* ESY and summer school are up and running, geared toward the students with ASD.
* A recent Flutie Foundation grant was providing resources.

Ms. Kain provided the subcommittee members with the following feedback:

* They are seeing lots of children with higher needs due to lack of access to their schedule and full school day as a result of the pandemic.
* Things are improving but the impact continues to be felt.
* There are lots of significant behaviors and increases in hospitalizations.
* Impacts on schools and ABA services are likely to be ongoing.

Dr. Johnston updated the subcommittee members on DESE.

* There are some special education schools that may close due to staffing issues, especially in the western part of the state.
* There was a recent update for special education leaders meeting to discuss issues.
* The IEP improvement project is moving along and getting closer to launching the first document which will replace the Is Special Education the Right Service? This should be rolled put in the fall.
* People will be directed to the digital format where they can see the particular items, they are interested in.
* Early adopter schools have signed up to pilot the program and provide feedback at the end of this year, and a playbook for other districts to utilize will be created for better outcomes with the new IEP. This will be followed by a process guide and then a parent guide.
* The process will be included stakeholder input, continued CAST involvement and early adopters, formation of a steering committee, delivery of Referral, Evaluation, Eligibility, Guidance, Forms, Process Guides, Annotated Agenda, and Parent Guide.
* Smaller stakeholder groups will be conducted for feedback.
* Many of our subcommittee suggestions were incorporated in the new IEP project.
* An Acceleration Roadmap Overview was developed in response to coming back from the pandemic, with a focus on acceleration instead of remediation, focusing on grade content with scaffolded support to accelerate and make gains.
* Lots of parent engagement and racial equity feedback from our subcommittee was incorporated in the concept and reflected in the document.
* Teams will be required to have IEP meetings that did not happen last year to address the individual needs of the student.
* Regulations for the new school year require a physicians note for remote learning. If a student cannot attend in person for more than 60 days with a medical note, the Team must reconvene immediately to determine what to do for the student.

**ABA Centers**

The subcommittee then began a discussion about ABA centers. Dr. Johnston indicated through Autism Insurance, ABA can be done in homes or in centers. For students 6 years old and older, school is compulsory and so districts must have an accounting of all students. There are hundreds of students going to ABA centers full time, instead of going to school. How are districts managing attendance, training, IEP, tracking for these students? What advice can be given to Districts, DPH, DESE? He asked the subcommittee for feedback.

* some businesses feel it’s more efficient and beneficial to open centers, share BCBA staff among children. Insurance is paying for the service, so they should be providing oversight, but are they?
* Some families use the centers as after school services and some schools offer compensatory hours at centers, some families defer special education services until age 6 and are using centers until then.
* DDS has also seen many children staying in the centers instead of attending a preschool, and then staying with center services after school.
* There are big differences between the school and center-based ABA programs. Drills and play happen at the center, without robust social skills training. At schools, ABA is part of the school day and integrated.
* If BCBA’s got licensed, it would help differentiate skill levels.
* Currently big box agencies are buying up small practices, and experienced clinicians are harder to find, there is also inconsistency around practicum experience for insurance-based centers and school-based programs. Often the center is to supplement what is being done in schools.
* There is a consistency issue, each insurance company has a different look at medical needs, it needs to be individualized.
* Historically schools provided in school and after school or weekend services. Once Insurance ABA was available, schools stopped doing after school and weekend services and there was no coordination or collaboration between the two groups. This caused inconsistencies.
* Licensing issues also complicate things.
* We need to get all service providers represented at TEAM meetings, but if out of school agencies won’t pay the staff to attend TEAM meetings, they may not come.
* The diverse quality of ABA training and variety of skills is very different, there is a shortage of behavior analysts.
* Could state oversight help by requiring connection to other providers with school and help promote quality of staff?
* More clinical experience is needed, especially before being able to supervise others, and Sr. Clinicians should be overseeing BCBAs.
* There are concerns about adversely impacting coverage, we don’t want insurance companies to deny claims. Schools are required to provide educational services and address the 7 areas on the IEP, insurance provides for medically necessary treatment.
* BCBA ethical code requires collaboration. There should be more and better education for families so if your BCBA isn’t doing their job, there is recourse to report as a professional license is on the line.
* Could the Autism Commission take up tracking an ethical complaint committee to get information in this regard?
* How can state oversight promote more qualified staff, collaboration, caseload management, support and supervision? How are agencies offering these things to their staff?
* Can we bring in Amy Weinstock from the Insurance Institute to address some of these concerns?
* A Mass ABA organization contacted Dr. Johnston about the lack of access to retirement benefits and licensure. He provided them with the results of the survey our subcommittee did in 2019 related to BCBA recruitment and retention. They agreed to put guidelines together for hiring BCBAs for districts. The ABA group will draft it and it will be sent to Special Education Directors across the state and to businesses to promote the best ways to recruit and hire. When Dr. Johnston receives the draft in the fall, he will provide it to the subcommittee for review and input.

The subcommittee decided that future meeting would now be 90 minutes in length. With no further business to discuss, the meeting concluded.