

Autism Workgroup Strategic Planning Session Notes 2017-18

Purpose of Workgroup	2017 ORGANIZATIONAL THEME:	
	3-5 Year Priorities	2017-18 Priorities
<p>Develop a shared plan and optimize available talent and resources to make positive and lasting improvements to the Autism continuum of care in Alaska.</p>	Priority Area #1: Screening and Diagnosis	
	<ol style="list-style-type: none"> 1. Secure 2 PNDs 2. Increase capacity of providers who can provide clinical diagnosis of autism and ADHD 3. Gold Standard screening, multi-disciplinary diagnosis (when beneficial), treatment planning, referral, and parent navigation 4. Ensure systems for diagnosis from birth to 5, and 6 and above to include re-evaluation 5. System of care that is consistent and easy regardless of location; no wrong door 	<ol style="list-style-type: none"> 1. Maintain 13 neurodevelopmental outreach and autism screening clinic days (5 individual screenings/day) 2. Publish and keep current a list of providers who are credentialed to diagnosis individuals with autism 3. Develop a plan for consistent dissemination of information and resources 4. Enhance connections and systems of care with communities, including schools, infant learning, childcare, and Tribal health partners 5. Strengthen family navigation
<p>Long-Term Goal / Vision</p> <p>A service delivery system that includes autism-specific service coordination and braided service delivery to meet the needs of individuals who experience autism and their families <u>across the lifespan</u>.</p>	Priority Area # 2: Workforce Development and Training for Professionals, Educators, Families and Community Partners	
	<ol style="list-style-type: none"> 1. Establish person-centered infrastructure for autism workforce development and training in the state 2. Develop robust training and supervision program for BCBAs, BCABAs and RBTs to support service delivery in different settings and across the lifespan 3. Develop system that routinely provides training and ongoing coaching to self-advocates, parents, professionals, and community partners across the lifespan 	<ol style="list-style-type: none"> 1. Explore options for person-centered and sustainable infrastructure for Autism workforce development and training in the state- particularly rural Alaska 2. Enhance training program of RBTs and ensure it is available for parents if desired 3. Development of a formalized and supported "family as resource" system
<p>Core Values</p> <p>Services for people with ASD need to be:</p> <ul style="list-style-type: none"> • Person-centered and individualized, based on family choice and need; • Family directed, and based on principles of self-determination; • Evidence-based and delivered by skilled providers; • Provided as soon as possible after identification and diagnosis; • Culturally appropriate and relevant, available in urban and rural areas; • Coordinated, comprehensive and collaborative across all disciplines and state service systems; • Available across the lifespan, and the full spectrum of autistic disorders; • Delivered in a manner that maximizes independence by providing the supports and services needed; and • Built on and honoring of individual strengths 	Priority Area #3: Early Intervention and Educational Systems (Age 0-22)	
	<ol style="list-style-type: none"> 1. Support culture of inclusion and tolerance in schools and engage schools in a dialogue about long-term sustainability, continuity, and success 2. Improve outcomes for transition-aged youth 3. Provide early intervention and schools with access to Autism-professionals across the state that may enhance interventions for ages 0-22 	<ol style="list-style-type: none"> 1. Develop plan for increasing access and maintaining quality of statewide BCBA services for schools 2. Establish a system for ongoing, high quality training for students, administration and faculty 3. Promote ways to increase school access to Autism-professionals across the state that may enhance interventions 4. Survey school psychologists on autism skillsets and credentials
<p>Promise to Each Other</p> <p>To actively contribute time, expertise and/or resources to support the implementation of the five year plan produced through the group's efforts.</p>	Priority Area #4: Integrated and Comprehensive Services	
	<ol style="list-style-type: none"> 1. Systematize cross-system screening and diagnosis across the age span 2. Simplify access to integrated medical, behavioral, education, mental health care, community-based services, housing/residential, employment, and care coordination/family navigation across the life span 3. Access to PCMH statewide with families at the center of decision-making and care integration and support for transition to adult physical and preventative care 	<ol style="list-style-type: none"> 1. Begin researching, designing, and building the case for an Autism Center 2. Develop a central repository of regional Autism resources for families and providers including "Help Me Grow" 3. Develop a plan for comprehensive and integrated Autism services 4. Train family navigators and target rural and underserved communities 5. Develop a process that will shorten the time between screening, diagnosis, and treatment
Priority Area #5: Funding, Billing and Systems Issues		
<ol style="list-style-type: none"> 1. By blending and braiding of funding, 100% of services, including transition services, are covered by insurance and appropriate rate methodology to ensure sustainable services across the lifespan and across levels of care. 2. Availability of flexible funds for challenges and problem solving 3. Establish a robust tele-medicine program that supports training and service delivery needs, including Medication consultation 4. Explore and develop housing options for youth under age 18 	<ol style="list-style-type: none"> 1. Engage, understand, and identify opportunities in Medicaid reform payment models 2. Explore funding opportunities to support coordinated interventions, especially for ongoing training/coaching of staff and the entire family/team 3. Explore options for blending and braiding funding for services (Medical, School, SDS, DBH, Early Intervention ILP, and DVR) 4. Explore and advocate for payment options for care coordination/family navigation 5. Support implementation of private insurance billing 6. Advocate for incentivizing the integration between primary care and behavioral health 	