

Adults with ASD Workgroup 11/30/15

Participants: Jim Adams, Karla Birkholz, Joyce Millard Hoie, Jon Meyers, Denise Resnik. On phone: Elanie Estrada

Facilitator: Sharon Flanagan-Hyde Note-taker: Chris Vinyard

Discussed "Recommendations" document

1. Transportation issues per Waiver language – transportation is a significant barrier to gaining employment.
2. Member Advocacy – broaden to adults with ASD (self-advocates) and representatives for those with ASD.
3. Healthcare – a list will need to be developed. Other wordsmithing.
4. Continuity of Care – critical for adults as they may go in and out of system.
5. Appropriate tool
6. Community Integration – Jim has included some of these same items in his list. "Recreation" should be added to the list. Will initiate and navigate "the range" of social environments. Coding alignment will be looked at or alluded to.
7. Person Centered Planning – PSPs are great, but who is really implementing the plans? In most instances, it's the families – their minimal expectation is that they will continue to have full-day, supervised supports, otherwise residential outpatient treatment will be pursued. For adults with ASD living in their parent's home, which is roughly over 90% of the population, they need 6-8 hours of structured supervision. Even for higher functioning individuals, it's a tremendous strain on family resources/time in order to supervise.
8. Employment – Jim's recommendations provide an adequate response. There needs to be a point of emphasis on increasing capacity for self-determination and independence.
9. Innovation and Evaluation – Cost-effective rather than low-cost solutions provides a better perspective.

Aligning the recommendations in the report with what families will relate to and access down the road needs to be addressed. This report provides a platform to implement systems-wide change. As such, Denise's opening statement, and the questions that are raised in relation to the section, should be considered for inclusion in order to provide this alignment and make the report as meaningful as possible.

Jim's recommendations:

AHCCCS Recommendations

1. Listing of medical professionals – All providers/professionals to be included - A comprehensive website is likely to be created as a result of these meetings.
2. Group counseling – does not seem to be much group counseling available but there is an interest.
3. Social communication class – nothing similar to this is being provided. ASU provided a one-year class, similar to Chapel Haven, and the recommendation is that follow-up is needed. Could potentially be provided under "speech therapy" as a covered AHCCCS service, since the class is taught by those types of providers. Communication is a core symptom of Autism.

4. Would consider adding “Nutritional Counseling” to this list.

Vocational Recommendations

1. Useful to get data from DDD on the types of unemployment/unemployment (day programs, CBP, GBP, individually supported employment) of adults with ASD — Elanie will get this information

Vocational Rehabilitation

1. Add language to include “Natural Support Coach”

DDD Housing Recommendations

1. Want to ensure that “friendships” is woven into the recommendation. Being a friend is an integral piece of a meaningful life

Have Arizona Dental Association create a list of Autism-friendly dentists.

A.T. Still and Midwestern have special needs providers.

Worrisome that person centered planning may not be fully implemented until 5 years from now given the 5-year waiver implementation and planning.

Final version draft to be provided by 12/11