



AUTISM COUNCIL MEETING MINUTES

June 28th, 2024

9:00 am – 12:00 pm

[Meeting Recording](#)

COUNCIL MEMBERS PRESENT	ORGANIZATION, REPRESENTATION
Dr. Amy Matthews, LP, BCBA	Grand Valley State University, State-funded Initiatives
Dana Lasenby, MBA*	Oakland Community Health Network, Pre-Paid Inpatient Health Plans/Community Mental Health Service Programs
Dr. Jacob Daar, BCBA	Northern Michigan University, State Universities
Dr. Jeanette Scheid	MDHHS Children’s Services Administration
Jenny Piatt, MA	Michigan Rehabilitation Services, Employment Services
Krista Boe, M.A., BCBA	Acorn Health, Certified Behavior Analysts
Dr. Steven Tunnicliff	Genesee ISD, Intermediate School Districts and Local Schools
Dr. Neelkamal Soares	Western Michigan University Homer Stryker MD School of Medicine, Health Care Providers
Martin Baum, J.D. *	Parent, ASD Community
COUNCIL MEMBERS EXCUSED	ORGANIZATION, REPRESENTATION
Brian Debano, MPA	Department of Licensing and Regulatory Affairs
Emily DeLaGarza	Michigan Department of Insurance & Financial Services
Rebecca McIntyre, M.Ed.	Michigan Department of Education
Raymie Postema	Michigan Department of Health & Human Services, Recipient Rights
Dr. Colleen Allen	Autism Alliance of Michigan, a Non-Profit Organization serving those with ASD
Frank Vaca	Self-Advocate, ASD Community
MDHHS STAFF PRESENT	MDHHS REPRESENTATION
Heather Glidden, LBSW, QJDP, MS	Bureau of Children’s Service Coordinated Health Policy & Supports
Aarica Smith*	Legislative Affairs
Dr. Mary Luchies, LP, BCBA, LBA	Bureau of Children’s Service Coordinated Health Policy & Supports
Maya Bryant, MPH, NASM-CPT	Bureau of Children’s Service Coordinated Health Policy & Supports

Stacey Farrell, LMSW	Bureau of Children’s Service Coordinated Health Policy & Supports
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* Indicates the member joined virtually

- Multiple guests also attended in person and virtually.

CALL TO ORDER

The Autism Council meeting was called to order by Amy Matthews at 9:03 am. A quorum was not present for the meeting.

ROLL CALL

A roll call for council members and MDHHS staff was completed.

APPROVAL OF PREVIOUS MINUTES

A quorum was not present to approve the April 2024 minutes.

PUBLIC COMMENT

No public comment.

Michigan Department of Health and Human Services (MDHHS) UPDATES

Financial Operations Administration-MDHHS Budget: Mary Luchies indicated there was no budget update.

Legislative Update: Aarica Smith reported on the bills in Appendix I of the meeting minutes.

- Discussion:
 - Bill 5785 regarding supervision from an LP requirements
 - APAs in the process of solidifying accreditation standards – question regarding if the bill is considering that accreditation
 - Senate Bill 626, regarding supervision, is not on the list and should be considered

Bureau of Children’s Service Coordinated Health Policy & Supports (BCCHPS)

- The IDD/ASD section will be moving to the Office of the Advocate for Children, Youth, and Families under Clinical Support.
 - Phil Kurdunowicz will resign his membership on the council. Patricia Neitman will take his place as the MDHHS representative.
 - Training series with Dr. Brooklier is still underway with one more upcoming lunch and learn
 - Discussion:
 - Question regarding feedback on trends and patterns
 - Seeing an increase in attendance, some misinformation leading education to be more broad
 - Meeting with child welfare relating to autism
 - Historical perspective from when ABA became the insurance mandate
 - Reminding public that children have diverse needs, not a one size, fits all
 - Question regarding attendance for PIHPs and CMHs as attendance is voluntary
 - Providing guidance per boilerplate to help clear up communication regarding the need for a medical diagnosis
 - Question regarding 3-year evaluation

- It is currently a burden on the system, hoping to have the language removed until then, as it is mandated in the policy

MDE Update

No update

LEO/MRS Update

- *Youth Employment Month* highlights opportunities for youth to gain valuable work experience – on June 3, [press release](#) highlighting resources available to businesses, schools, and parents to help prepare young adults for safe job opportunities.
- *Professional Trades Month* spotlights high-wage, in-demand career opportunities for Michiganders – on May 8, [press release](#) highlighting resources for Michigan workers looking to prepare for and find high-wage, in-demand professional trades careers.
- *Michigan’s \$90 Million Investment Propels Expansion of Registered Apprenticeship Programs* – on May 7, [press release](#) announcing Michigan’s investments in Registered Apprenticeship programs during the first ever National Youth Apprenticeship Week.
- *Gov. Whitmer Signs Executive Directive to Train 5,000 Infrastructure Workers* – on April 29, [press release](#) announcing LEO supporting Gov. Whitmer’s commitment to training 5,000 new infrastructure workers, who will each earn an industry-recognized certificate or credential or receive on-the-job training.
- **Case Highlight - *Detroit Renaissance District – Porter (Southeastern Division - SED)***
 - Mr. Bardel came to Michigan Rehabilitation Services (MRS) to assist him with training and job placement. Mr. Bardel required assistance with organizing, responding to assignments promptly, and refining his professional social skills. The MRS counselor assisted Mr. Bardel by referring him to Autism Alliance of Michigan. Mr. Bardel was able to gain assistance in refining his professional social skills to support successful navigation in the workplace. Mr. Bardel was assisted with honing his social interaction abilities, workplace boundaries, conversational and presentation skills, and self-advocacy skills.
 - Mr. Bardel was referred to C SI SEE Detroit to assist him with job placement. C SI SEE Detroit assisted Mr. Bardel with job leads and looking for employment. With the refining of professional workplace skills, Mr. Bardel was able to secure employment with General Dynamics Led Systems as a computer engineer on his own. He currently is also working as a Robotics and Artificial Intelligence technician in his role.
 - Mr. Bardel is currently still employed with General Dynamics Led Systems and is satisfied with his current position.
- Discussion:
 - Question regarding coordination of these efforts with MDE
 - The Workforce Innovation Opportunity Act requires that state offices have combined efforts. The plans are all therefore coordinated, not done by individual offices.

Department of Insurance and Financial Services (DIFS)

No update

Old Business

- Review of the ASD State Plan Priorities 2024-2029 and the council's purpose – see Appendix II.

New Business

Please see Appendix III for the presentation on the Michigan Assistive Technology Program.

- Discussion:
- There is no cost for individuals to access services
 - Question regarding learning libraries – is a waiver required for accidents or damage?
 - If there is a willful incidence then that is addressed, but there is an understanding that some incidents will happen.
 - If something is stolen or intentionally damaged, a police report is filed for tracking purposes, but the individual is not required to cover the cost.
 - Are there connections for devices that require a specialist to operate?
 - Individual training is not supported.

Please see Appendix IV for the Applied Behavior Analysis in Schools presentation.

- Discussion:
 - How are challenges navigated within the school system?
 - Addressing individual needs, not the specific diagnosis
 - Considering if the plan will work within the context of the school
 - Recognizing and addressing co-occurring diagnoses
 - Addressing barriers in access and with funding, especially as it relates to ABA
 - Maintaining alignment with the guidance document

Member Updates

- Self-advocate organization's input – Katie Oswald
 - Committee is growing and Autism State Plan survey questions have been submitted
 - Working to ensure the organization is solidified in its mission – Katie Oswald has been identified as the chair
 - Zone leads have been identified to promote the work of the Committee
- Jacob Daar
 - The Association for Behavioral Analysis International is setting micro-credential system to help organizations establish their credentialing system
 - Grants will be provided to accredited programs
- Dr. Soares
 - His position at Western will be eliminated as of Sunday. The stated reason is due to a lack of children with developmental disabilities and it's not necessary to educate pediatricians. Dr. Soares is still planning to serve Southeast Michigan in another role.
 - Concern as families are lacking direction as to where to go next – Mary Luchies commented that families should reach out to their respective legislators and Autism Alliance of Michigan is another support system.
 - Jenny Piatt commented that the press may be a good option especially as we are looking to keep residents in Michigan and remove barriers to access to care.

Action Items			
<i>Status</i> <i>(Open)</i>	<i>Description</i>	<i>Owner</i>	<i>Target Date</i>

<i>(Complete)</i>			
Open	Follow-ups regarding House Bills 915, 918, 5786, and senate bill 626	Aarica Smith	
Open	Review of April 2024 minutes, any feedback should be sent to Mary Luchies	All Council Members	

Adjourn

Amy Matthews called for a motion to adjourn the meeting. Jacob Daar motioned to adjourn the meeting; Dr. Scheid seconded the motion. Amy Matthews adjourned the meeting at 11:59 am. The next Autism Council meeting will take place on August 23rd, 2024.

Appendix I

June 2024 Legislative Update

Updates:

[Senate Bill 27](#) (Anthony) – *Provides equitable coverage for behavioral health and substance use disorder treatment* – DIFS Lead, signed by Governor 5/14/24 as Public Act 41 of 2024

[House Bill 4101](#) (VanderWall) – *Modifies temporary licensing of speech-language pathologists* – LARA/DHHS Co-Leads, signed by Governor 6/6/24 as Public Act 57 of 2024

[House Bill 4131](#) (Liberati) – *Modifies coverage for health care services provided through telemedicine* – DIFS Lead, signed by Governor 6/6/24 as Public Act 52 of 2024

[House Bill 4213](#) (Morse) – *Provides definition of distant site for telemedicine visit* – DHHS/LARA Co-Leads, signed by Governor 6/6/24 as Public Act 54 of 2024

[House Bill 4523](#) (Hope) – *Modifies eligibility for mental health court for those with violent offenses* – SCAO/AG/LEGAL Co-Leads, signed by Governor 5/22/24 as Public Act 44 of 2024

[House Bill 4579, 4580](#) (Price, Brabec) – *Requires reimbursement rate for telehealth visits to be the same as office visits* – DIFS/DHHS Co-leads, signed by Governor 6/6/24 as Public Act 51 and 53 of 2024

[Senate Bill 227](#) (Lauwers) – *Modifies emergency safety intervention in a children's therapeutic group home* – DHHS/MiLEAP Co-leads, signed by Governor 6/6/24 as Public Act 50 of 2024

[House Bill 5114](#) (Rheingans) – *Expands definition of mental health professional to include physician assistants, certified nurse practitioners, and clinical nurse specialists-certified, and allows them to perform certain examinations* – DHHS/LARA Co-Leads, Reported from House Health Policy Committee with H-3 substitute

[House Bill 5371](#) & [5372](#) (Brabec, Green) – *Provide certification and funding for CCBHCS (certified community behavioral health clinics)* – DHHS/LEGAL Co-Leads, Received a hearing in House Health Policy Behavioral Health Subcommittee

[House Bill 5556](#) (Morse) – *Provides appropriations for fiscal year 2024-2025* – SBO/DHHS Co-Leads, Senate substitute S-1 nonconcurrent in

[Senate Bill 767](#) (Santana) – *Provides appropriations for fiscal year 2024-2025* – SBO/DHHS Co-Leads, Referred to conference committee

New:

[House Bill 5670](#) (Thompson) – *Requires annual review and report of health professional licensing and registration requirements and their impact* – LARA/LEGAL Co-Leads, Referred to House Government Operations Committee

[House Bill 5698](#) (Young) – *Provides for screening and treatment for post-traumatic prison disorder and requires certain other mental health screenings, planning and treatment of incarcerated people* – MDOC/DHHS Co-Leads, Referred to House Criminal Justice Committee

[House Bill 5718](#) (Thompson) – *Designates third Sunday of April each year "Autism Acceptance Day"* – LEGAL Leads, Referred to House Government Operations Committee

[House Bill 5752](#) (Weiss) – *Modifies student mental health apprenticeship retention and training (SMART) program* – MiLEAP/DHHS Co-Leads, Referred to House Education Committee

[House Bill 5785](#) (Brabec) – *Modifies requirements for practice by limited licensed psychologists* – LARA/DHHS Co-Leads, Referred to House Health Policy Committee

[Senate Resolution 120](#) (Bayer) – *A resolution to declare May 2024 as Mental Health Awareness Month in the state of Michigan* – Adopted 5/22/24

[Senate Bill 849](#) (Webber) – *Requires DHHS to submit an annual report on reciprocity for certain health occupations under the public health code* – DHHS/LARA Co-Leads, Referred to Senate Health Policy Committee

[Senate Bill 872](#) (Irwin) - *Provides conditions on the use of certain benefits, including federal disability benefits, for children in foster care*– DHHS/LEGAL Co-Leads, Reported from Senate Housing & Human Services Committee with S-1 substitute

[Senate Bills 915-918](#) (Hertel, Santana, Irwin, Wojno) – *Makes various changes to the mental health outpatient treatment process* – DHHS/AG/LEGAL Co-Leads, Referred to Senate Health Policy Committee

[Senate Bill 921](#) (Webber) – *Establishes health insurance mandate review commission* – DIFS/LEGAL Co-Leads, Referred to Senate Health Policy Committee

[Senate Bills 922-925](#) (Klinefelt, Anthony, Hertel, Irwin) – *Provides for elder and vulnerable adult personal protection orders and adds other protections* – AG/LEGAL/SCAO Co-Leads, Referred to Senate Civil Rights, Judiciary & Public Safety Committee

Appendix II Review of State Plan

Michigan ASD State Plan Priorities 2024-2029 – Work Plan

Plan Development Activity	Action	Who completes	Timeline
Review MI ASD State Plan and 2018 Progress Update and Recommendations	<ul style="list-style-type: none"> Review the assigned focus areas and identify any major changes in each focus area since 2018. 	Workgroup members:	March 2024
Review other state plans	<ul style="list-style-type: none"> Review example reports 	Workgroup members:	March 2024
Conduct a survey of parents, educators, and clinical/medical service providers/self-advocates	<ul style="list-style-type: none"> Review and revise surveys from 2018 	Workgroup members:	April 2024
	<ul style="list-style-type: none"> Develop additional surveys as needed (e.g., community) 	Workgroup members:	April 2024
	<ul style="list-style-type: none"> Finalize surveys (education - finalize and disseminate by May) 	Amy with assistance of workgroup members	May 2024
	<ul style="list-style-type: none"> Disseminate to relevant stakeholders 	Workgroup collaborates with Autism Council representatives	May/June 2024
	<ul style="list-style-type: none"> Summarize results for report 	Amy with assistance of workgroup members	Summer 2024
	<ul style="list-style-type: none"> Share results with the autism council. 	Workgroup members:	August 2024
Gather input from council members on focus areas and recommendations	<ul style="list-style-type: none"> Facilitated discussion of focus areas and recommendations for state plan update 	Autism Council	April 2024
Collect relevant data to inform the plan	<ul style="list-style-type: none"> Create a list of data needed to inform needs and recommendations Data may be collected by each subgroup working on the focus areas 	Workgroup members	May-Aug

Michigan ASD State Plan Priorities 2024-2029 – Work Plan

Write State Plan update with council input on focus areas and recommendations and survey input	<ul style="list-style-type: none"> Develop focus area summary and recommendations 	Workgroup members	June-Aug 2024
Relevant stakeholders provide input on draft Workgroup updates plan based on feedback	<ul style="list-style-type: none"> Identify relevant stakeholders for each focus area and solicit input based on draft of focus area summary and recommendations 	Workgroup members Autism council member stakeholder groups	Sept 2024
Autism council reviews draft and approves state plan update	<ul style="list-style-type: none"> Send draft plan to council at least ten days before October council meeting 	Autism Council	Oct 2024
Make edits based on council input and finalize plan	Complete writing of plan, copy edit, and submit for layout.	Workgroup members	Oct/Nov2024
Layout and production	<ul style="list-style-type: none"> Work design specialist to layout the plan. 	Workgroup members Design specialist	Nov 2024
Share with state agencies	<ul style="list-style-type: none"> Provide final version to state agency leadership to review Revise plan based on feedback, as needed Create final draft 	Agency representatives	Nov 2024
Dissemination	<ul style="list-style-type: none"> Distribute plan update to stakeholders Develop press release Add to state plan/council website Clearly articulate who could take a role with specific recommendations 	Autism Council State agencies	Dec 2024

Appendix III
Michigan Assistive Technology Program



AT for Autism
Aimee Sterk, LMSW



Presenter



Aimee Sterk, LMSW (she, her, hers)
Aimee@MyMDRC.org

MDRC Mission

MDRC cultivates disability pride and strengthens the disability movement by recognizing disability as a natural and beautiful part of human diversity while collaborating to dismantle all forms of oppression.

Michigan Disability Rights Coalition

What is AT?

- Assistive Technology (AT) is any item, piece of equipment, software, or app that is used to help people with disabilities, including older adults, do what they want to do.
- Technology can make things easier for everyone. For people with disabilities, AT opens up possibilities.



Michigan Assistive Technology Program

- Access to AT information and services in Michigan
- Federally funded through the AT Act with money that flows through MRS
- By people with disabilities, for people with disabilities
- Demonstrations, loans of devices, trainings, and more
- Lending library of more than 1600
- Devices across all disabilities and ages
- Request a demo or loan of devices

800-578-0280

MyMDRC.org/assistive-tech-program/

M A T P



Michigan Assistive
Technology Program

MATP Lending Library

- Mymdrc.org/lending-library
- More than 1,600 devices



8-IN-1 MULTIFUNCTIONAL DESK LAMP



1.52 PCS EYE-CARING LED



ALUMINUM ALLOY HEAT SINK



WIRELESS CHARGING PAD



ON/OFF & COLOR MODE



30/60MIN TIMER



ADJUSTABLE BRIGHTNESS



5V/2A USB CHARGING PORT



USB POWER PORT





Disability Pride & Autism

Disability Pride is accepting and honoring our uniqueness and seeing it as a natural and beautiful part of human diversity.

Pride comes from celebrating our own heritage, culture, unique experiences, and contributions.

What's to gain from Disability Pride?

- Self esteem, self acceptance
 - Neurodiversity Affirming
- Support system/community with sense of belonging
- Accommodations
- Value of interdependence

Disability Pride and Autism

- Acknowledging and being proud of Autistic identity
- Internalized ableism—when a person with a disability turns ableism (beliefs that people with disabilities are less valuable) inward. Disability pride fights internalized ableism
- Using AT acknowledges disability
- Asking for accommodations acknowledges disability
- Disability Pride takes practice
- Requesting and getting accommodations and using AT is practicing pride
- Connecting to the Autistic Community and broader disability community
- Finding your community



AT for Self Regulation & Sensory Needs



The Regulator

Sensory System	Tools and Strategies	How It changes my energy...			How much I like it...		
		Soothing	Neutral	Alerting	Yuck	Okay	Awesome
Vestibular (movement/position in space)	Jump up and down	Yellow	Yellow	Yellow	Light Green	Light Green	Light Green
	Touch toes / stretch	Yellow	Yellow	Yellow	Light Green	Light Green	Light Green
	Spin or dance	Yellow	Yellow	Yellow	Light Green	Light Green	Light Green
	Sprint or run up stairs	Yellow	Yellow	Yellow	Light Green	Light Green	Light Green
	Rock	Yellow	Yellow	Yellow	Light Green	Light Green	Light Green
	Go for a walk	Yellow	Yellow	Yellow	Light Green	Light Green	Light Green
	Flap	Yellow	Yellow	Yellow	Light Green	Light Green	Light Green
	Ask for tight hug from trusted person	Yellow	Yellow	Yellow	Light Green	Light Green	Light Green
Carry heavy	Yellow	Yellow	Yellow	Light Green	Light Green	Light Green	



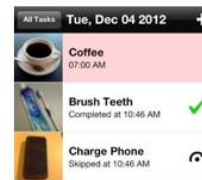
AT for Self Regulation 2





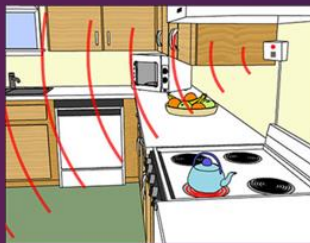
Organizing & Memory

- Timers and reminders (memory)
- Calendar and reminders using apple iOS or Android Tech
- Smart devices
- Google assistant and Siri
- Alexa device
- Google Keep - Notes and lists

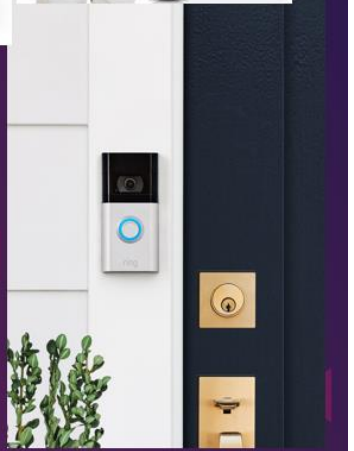


AT for Safety

Wanting to
"Escape" and Fight
or Flight response



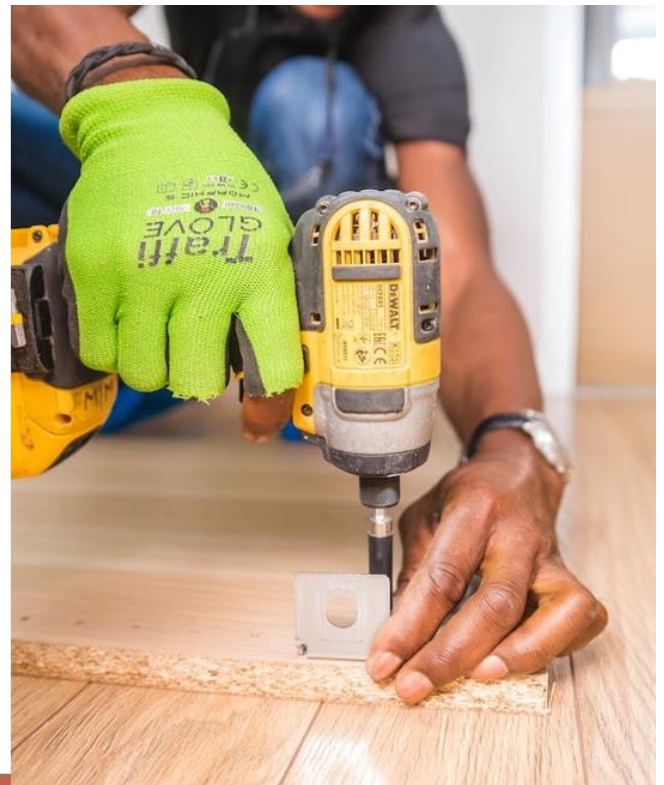
Detecting or
respond to danger
cues.



Getting help

Employment

- Using regulation techniques, sensory breaks, other tools mentioned here
- Flexible scheduling
- Set up for feeling safe
- Decreasing overwhelming sensory input
- Options for telecommuting
- Work space ergonomics to meet body needs
- Supports for memory and organizing
- AI Tools



Mental Health Apps & AT

- Constant encouraging to mask and pressures from living in neurotypical society increase PTSD and other mental health disabilities in Autistic people
- Mental Wellness and Self Care
- Reduce Anxiety and Stress
- Learn and practice coping skills
- Track Moods and Symptoms
- Community and Support Groups
- PTSD Coach
- PTSD Family Coach
- Calm
- Meditation tools—bracelet, Brain Gym



Communication and Connections to Community

- Smartphone – Text, Call, Video FaceTime
- Tablet or Ipad – Video Facetime
- Alexa Device – Echo Show
- Companion Pets
- Gaming (especially online)
- Accessing social media and other ways of connecting



Resources

- Michigan AT Loan Fund
- To Learn more or test out the items presented request a demonstration:
 - info@mymdrc.org
 - 800-578-0280
 - MyMDRC.org/assistive-tech-program/

Assistive Technology for Autism Resource Page

The Michigan Assistive Technology Program (MATP)

Please take a survey about our training: <https://www.surveymonkey.com/r/TrainingCC>

To request a demonstration or loan of Assistive Technology

www.tinyurl.com/MATPDemoRequest

Our website

<https://mymdrc.org/assistive-tech>

Like & follow our MDRC Facebook page for info on our training and services

<https://www.facebook.com/mymdrc>

Presenter:

Aimee Sterk, LMSW: Aimee@mymdrc.org

What is Assistive Technology?

Assistive Technology or AT is any item, product, system, or equipment that improves life for people with disabilities.

Michigan Assistive Technology Program

- Access to AT information and services in Michigan
- Federally funded through the AT Act with money that flows through MRS
- By people with disabilities, for people with disabilities
- Demonstrations, loans of devices, trainings, and more
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MATP Lending Library

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- Value of interdependence
- Life of honesty
- Appreciation for diversity

Disability Pride & Autism

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- Disability pride fights internalized ableism
- Using AT acknowledges disability
- Asking for accommodations acknowledges disability
- Disability Pride takes practice
- Requesting and getting accommodations and using AT is practicing pride

Self Regulation and Sensory AT

- [Hammock Swing](#)
- [Autism Level Up: The Regulator](#)
- [Trek eBike](#)
- [Aurora Projector](#)
- [Sensate](#)
- [Fidget Worm](#)
- [Ono Roller](#)
- [Teeter Popper](#)
- [Sensasoft Squeezeie Seat](#)
- [Cozy Canoe](#)

Organizing & Memory

- [Smart watch comparison guide](#)
- [Rocketbook reusable scannable notebook](#)
- [Tile Mate Bluetooth trackers](#)
- [Echo Show/smart speakers & screens](#)
 - Timers
 - Alarms for wake up
 - Care Hub
 - Routines
 - Schedule
 - Reminders
 - Video calls
 - Meditation, read recipes, music, books, podcasts, games
 - Environmental controls (security system, thermostate)
 - Lights, appliances
 - Show & Tell feature
- [CanPlan App](#)
- [Time Timer](#)

AT for Sleeping & Rest

- [C Crane pillow headphone](#)

- [Weighted blankets](#)
- [Sleepbar](#)
- White noise machines
- Alexa devices—bedtime stories, music

AT for Safety

- [Tech Safe App](#)
- [Angelsense](#)
- [Ring Doorbell](#)
- Noise cancelling headphones/[loop](#)
- Motion sensing lights
- Cut resistant gloves
- Stove shut offs

Employment

Accommodations

- Using regulation techniques, sensory breaks, other tools mentioned here
- Flexible scheduling
- Set up for feeling safe
- Decreasing overwhelming sensory input
- Options for telecommuting
- Work space ergonomics to meet body needs
- Supports for memory and organizing
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Mental Health Apps

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- Mental Wellness and Self Care
- Reduce Anxiety and Stress
- Learn and practice coping skills
- Track Moods and Symptoms
- Virtual Companions, Therapy, and Coaching
- PTSD Support
- Community and Support Groups
- Organizers and reminders
- [PTSD Coach](#)
- [PTSD Family Coach](#)
- [Calm](#)

Communication and Connections to Community

- Smartphone – Text, Call, Video FaceTime
- Tablet or Ipad – Video Facetime
- Alexa Device – Echo Show
- [Companion Pets](#)
- Accessing social media and other ways of connecting
- AAC (Augmentative and Alternative Communication) Devices

Resources

- Michigan Assistive Technology Loan Fund
- Michigan Assistive Technology Program
 - 800-578-0280
 - info@mymdrc.org

MyMDRC.org/assistive-tech-progr

Appendix IV

Applied Behavior Analysis in Schools Presentation

Applied Behavior Analysis (ABA) in Schools

June, 2024

Michigan Department of Health and Human Services



1

Agenda

- Foundation for the project
- Need for a guidance document
- Review panel
- Guidance sections
- Intent and goals for the document
- Questions/discussion



2

Foundation for the Project



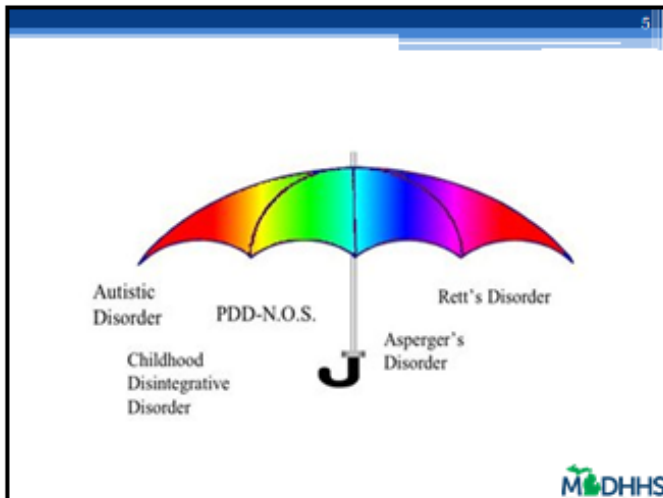
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Medical diagnosis of Autism

- Autism spectrum disorder (ASD) is a developmental condition associated with differences in communication, learning, and behavior.
- It can look different from person to person.
- People with ASD may have a wide range of strengths, abilities, needs, and challenges.



4



5

DSM-5 Medical Diagnostic Criteria for Autism Spectrum Disorder (ASD)

- A. Persistent deficits in social communication and social interaction
- B. Restrictive, repetitive patterns of behavior or activities

6

6

A. Persistent deficits in social communication and social interaction across contexts, not accounted for by general developmental delays, and manifest by 3 of 3 symptoms:

- Deficits in social-emotional reciprocity; includes social initiation and response
- Deficits in nonverbal communicative behaviors used for social interaction
- Deficits in developing and maintaining relationships, appropriate to developmental level (beyond caregivers); problems with social awareness and insight, as well as with the broader concept of social relationships

7

7

B. Restricted, repetitive patterns of behavior, interests, or activities as manifested by at least 2 of 4 symptoms:

- Stereotyped or repetitive speech, motor movements, or use of objects; atypical speech, movements, and play
- Excessive adherence to routines, ritualized patterns of verbal or nonverbal behavior, or excessive resistance to change; includes rituals and resistance to change
- Highly restricted, fixated interests that are abnormal in intensity or focus; includes preoccupations with objects or topics
- Hyper- or hypo-reactivity to sensory input or unusual interest in sensory aspects of environment; includes atypical sensory behaviors

8

8



9

Who can diagnose Autism Spectrum Disorder (ASD)

- Physician (MD)
 - Developmental pediatrician
 - Child psychiatrist
- Fully licensed psychologist (LP)
- *Exceptions for Medicaid:
 - Masters level psychologist (LLP)
 - Masters level social worker (LMSW)
 - Physicians assistant (PA)
 - Nurse practitioner (NP)

*with specialized training and expertise in diagnosing autism

MDHHS

10

Educational diagnosis of Autism (Federal definition)

“ a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three, that adversely affects a child’s educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences” ([IDEA Section 300.8](#)).

MDHHS

11

The IDEA additional states:

- Autism does not apply if a child’s educational performance is adversely affected primarily because the child has an emotional disturbance
- A child who manifests the characteristics of autism after age three could be identified as having autism if additional criteria is satisfied

MDHHS

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Michigan Educational Criteria

Autism spectrum disorder (ASD) is considered a lifelong developmental disability that adversely affects a student's educational performance in 1 or more of the following performance areas:

- Academic
- Behavioral
- Social



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Educational eligibility for ASD is characterized by qualitative impairments

in:

- Reciprocal social interactions

- Communication
- Restricted range of interests/repetitive behaviors
- Determination may include unusual or inconsistent response to stimuli



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Michigan Educational Eligibility: Other Factors

While ASD may exist concurrently with other diagnoses or areas of disability, to be eligible under this rule, **there shall not be a primary diagnosis of schizophrenia or emotional impairment.**



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Who Determines Educational Eligibility as Student with Autism Spectrum Disorder?

The Individualized Education Program (IEP) Team

The team must include at a minimum:

- a psychologist or psychiatrist
- an authorized provider of speech and language
- a school social worker



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Applied Behavior Analysis (ABA)

- ABA is considered an evidence-based best practice treatment by the US Surgeon General and by the American Psychological Association.
- "Evidence based" means that ABA has passed scientific tests of its usefulness, quality, and effectiveness. ABA therapy includes many different techniques. All of these techniques focus on antecedents (what happens before a behavior occurs) and on consequences (what happens after the behavior).
- More than 20 studies have established that *intensive and long-term* therapy using ABA principles improves outcomes for many but not all children with autism. "Intensive" and "long term" refer to programs that provide 25 to 40 hours a week of therapy for 1 to 3 years.
- These studies show gains in intellectual functioning, language development, daily living skills and social functioning.



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Evidence Based Practices in Education

The federal Every Student Succeeds Act and the Individuals with Disabilities Education Act mandate educators use, **to the greatest extent possible**, evidence-based academic and behavioral practices and programs

The National Professional Development Center (NPDC) on Autism Spectrum Disorder has identified [28 evidence-based practices](#) for improving outcomes for students with ASD



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Behavior analysis helps us understand:

- How behavior works
- How behavior is affected by the environment
- How learning takes place
- ABA therapy applies our understanding of how behavior works to real situations.
- The goal is to increase behaviors that are helpful and decrease behaviors that are harmful or affect learning.



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Who can provide ABA therapy?

- A board-certified behavior analyst (BCBA)
 - Earn a master's degree or PhD in psychology or behavior analysis*
 - Pass a national certification exam
 - Seek a state license to practice in Michigan (LBA)
- ABA therapy programs also involve technicians, or registered behavior technicians (BTs/RBTs).
- These therapists are trained and supervised by the BCBA. They work directly with children and adults with autism to practice skills and work toward the individual goals written by the BCBA/LBA.
- *BCaBAs can have a bachelor's degree w/ supervision



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ABA therapy can help:

- Increase language and communication skills
- Improve attention, focus, social skills, memory, and academics
- Decrease problem behaviors
- The methods of behavior analysis have been used and studied since the 1960s.



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Why Develop Guidance?

- Schools have been providing behavior supports for decades
- ABA became accessible via insurance reform in 2013 and is reimbursable by providers
- The information regarding ABA in schools has not been integrated specifically
- Many families, schools, and providers have asked for guidance
- Legislation was proposed to direct services



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Considerations for ABA in school

- Free and public education rules (FAPE)
- Individuals with disabilities in education act (IDEA)
- Michigan school management structure
- Medical diagnosis vs educational criteria
- Individual education program (IEP)



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Representation on Review Panel

- MDHHS, Bureau of Children's Coordinated Health Policy and Supports (BCHHPS)
- Michigan Department of Education (MDE)
- MDHHS, Behavioral and Physical Health and Aging Administration (BPHASA)
- Prepaid Inpatient Health Plans (PIHPs)
- Community Mental Health Service Providers (CMHSPs)



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Representation continued

- Michigan Autism Council
- Michigan Association of Administrators of Special Education (MAASE)
- Intermediate School Districts (ISDs)
- Local Educational Agency (LEAs)
- Michigan Behavior Analysis Providers Association (MIBAP)



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Sections of the Guidance



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1) Applied Behavior Analysis

- What ABA is Not
- Practitioners Utilizing Behavioral Strategies
- Who are Behavior Analysts?
- What is a Licensed Behavior Analyst?



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2) Determining Need and Appropriateness of ABA During the School Day

- Provision of ABA in the School Setting
- Education vs. Clinical or Medical Models
- Requests for Services Outside of the IEP
- When is it Appropriate to Shorten the School Day to Provide ABA?



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3) Considerations Regarding Personnel Who Provide ABA Therapy in the Public Schools

- School Contracted LBAs
- Privately Contracted LBAs
- School District Employed LBAs
- Role of the IEP Team
- What if the Team Disagrees?
- Policies



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4) Financial Responsibilities of Personnel Not Employed by the School Who Provide Services

- Considerations for School Districts



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5) Developing Agreements Between School Districts, Providers and Families

- Contracts, MOUs, MOAs
- Training
- Mental Health Parity and Addiction Equity Act
- Questions to Consider Regarding the Provision of ABA Services During the School Day



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6) Utilizing Licensed Behavior Analysts Employed by the School Board to Provide ABA Services

- School District Employed LBAs
- Reducing Reliance on Outside Providers



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7) Considerations for Private Providers Who Wish to Provide Services in the Public Schools

- School District Policies
- Understanding the Role
- Scope of Practice
- Factors Determining Instruction



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8) Working Collaboratively

- Understanding Roles and Responsibilities
- Communication
- Working Through Challenges and Constraints
- Ethical Practice
- Interprofessional Collaboration
- Teams/Teamwork



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Intent of the Guidance Document

- The guidance is not a contract or legal document
- It is informational to support collective knowledge and understanding
- The guidance can be updated as needed
- Conversations will need to continue between schools, providers, families
- MDHHS and MDE will continue to support training, education, and support



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Questions?

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