

Michigan

Autism Spectrum Disorders

State Plan

Executive Summary



December 2012

Overall Goal

Build the state infrastructure for comprehensive, lifespan supports to individuals with ASD and their families through access to information and resources, coordination of services, and implementation of evidence based practices.

This summary describes the major findings and recommendations for a plan to enhance the Michigan system of care for supporting individuals with an autism spectrum disorder (ASD) in their homes, schools, and communities. These findings and recommendations represent a synthesis and prioritization of goals with a primary focus on evidence-based practices and system and service coordination that brings together governmental agencies and private organizations. Expanding capacity to address the challenges presented by a rapidly growing ASD population does not mean the creation of a separate system of care specific to ASD but rather increasing the knowledge, coordination, and capacity of current systems in concert with focused attention on the specific needs of individuals with ASD.

The U.S. Centers for Disease Control and Prevention labeled ASD an “urgent public health concern” as the prevalence rate increased across the country to one in 88 children. It is imperative to understand the long-term implications of the identified needs of individuals with ASD given the major fiscal crisis if they do not receive adequate services. Lifetime costs for a person on the spectrum are estimated to be \$3.2 million, including costs for education, home and community-based services, and lost individual and family income (Ganz, 2007). However most important is the long-term impact on individual lives and the lives of family members if effective services and supports are not provided from a young age and throughout adulthood.

The state plan development committee believes that implementation of the recommendations will make a substantial difference in the lives of individuals with ASD and their families and will avert significant financial costs to the state. Gaps in services result from systemic challenges across service systems that affect a broader population of individuals with disabilities, and addressing these systemic challenges will benefit the broader populations served by the systems. Meeting the needs identified in this plan will require efforts at all levels of government and across public and private sectors. It is the hope of this committee that this plan will prompt further collaborative discussions and efforts to address the needs of all individuals with ASD in Michigan.

The recommendations outlined in the final state plan document:

1. reflect critical gaps and problems described by parents and professionals;
2. emphasize coordination of current systems of care;
3. promote increased access to knowledge, information, and skills;
4. promote greater awareness, availability, and implementation of evidence-based practices;
5. expand opportunities for individuals with ASD and their families to be fully engaged in their communities;
6. endorse systemic change that would benefit individuals with ASD as well as individuals with related disabilities.

Summary of Key Findings

Michigan currently lacks the following critical components for an effective state system of services and supports to individuals with ASD and their families:

- A state level Autism Council focused on ASD.
- A state center responsible for information dissemination, coordination of training and technical assistance efforts, and referral for services.
- Best practice guidelines for educators and service providers.
- Broad access to comprehensive diagnosis that is timely, affordable, and accurate.
- Service systems, including medical, human service, and educational systems, that demonstrate

effective coordination and communication so families can navigate between agencies and service providers.

- Consistent educational programming statewide that focuses on access to the least restrictive environment, the general education curriculum, and supplemental services that address the core deficits of ASD.
- Access to professionals, service providers, and community workers with training in evidence-based practices in all areas of the state.
- A sufficient number of service providers with experience and training in effective strategies to address significant behavior challenges and crisis situations.
- Availability of parent training and information focused on effective strategies for teaching and supporting a child with ASD.
- Sufficient access to employment, post-secondary education, housing options, leisure and community-based social activities, and transportation.
- A data system to assess the service needs and outcomes for individuals with ASD in the state.
- Adequate funding to support needed programs and services.

Recommendations for Immediate Action

The committee reviewed the recommendations from each section of the document and selected the following as the most critical issues that require immediate action:

- 1. Autism Council:** Michigan needs an Autism Council focused on the implementation, monitoring, and updating of the state plan to ensure that the key recommendations outlined in this document and future state plan updates become reality for individuals with ASD and their families. Therefore, the state plan recommendations will serve as the Autism Council's primary agenda. The Autism Council should be comprised of a broadly representative group of professionals, parents, and community stakeholders.
- 2. Autism Spectrum Disorders and Related Disabilities Resource Center for Michigan:** Establish a state center to serve as an information and resource clearinghouse for professionals and families and to assist in accessing and navigating programs and services related to ASD. The center would ensure that professionals, families, and individuals with ASD receive information about evidence-based and promising practices. The center should be linked to and integrated with existing resources.
- 3. Service Coordination and Statewide Infrastructure:** Improve service coordination and promote interagency agreements across all service systems. Establish standards of practice to be used by all agencies that function in a lead service coordination role. Individuals acting as service coordinators/case managers should be knowledgeable about ASD.
- 4. Regional Collaboratives:** Expand existing regional partnerships to promote communication, collaboration, and coordination efforts across all agencies, organizations, and key stakeholders. Regional collaboratives would serve as planning groups for training and resources within their catchment areas and as points of contact between the Autism Council, local service providers, families, and other stakeholders.
- 5. Early Screening, Evaluation, and Intervention for Young Children With ASD**
 - a. Increase screening by primary care providers, public health clinics, and early childhood providers such as Early Head Start.
 - b. Establish standards of practice and procedures for identification and referral.
 - c. Ensure that all young children with ASD receive systematic programming using evidence-based practices at a level of sufficient frequency and intensity to produce measurable gains.
 - d. Develop cross-agency, cross-program policies and procedures to coordinate available public and private resources to promote early screening and evaluation, referral to services, delivery of evidence-based interventions, and service coordination.

- e. Make high quality informational resources more readily accessible to families and providers.
- f. Increase public awareness and available information related to the signs and symptoms of ASD, the importance of early identification on future outcomes, and procedures to access a medical diagnosis and special education eligibility evaluation.

6. Best Practice and Service Navigation Guidelines: Develop and disseminate best practice guidelines for ASD identification and intervention across all age groups.

7. Crisis Intervention: Address the shortage of both in-home and hospital/clinic-based crisis intervention services for children and adults with ASD in all areas of the state. This should include increasing the number of trained professionals and health care centers capable of implementing evidence-based interventions for addressing significant challenging behaviors.

8. Training and Professional Development:

- a. Expand evidence-based, high quality pre-service and in-service professional development, technical assistance, and mentoring opportunities to ensure that Michigan has providers who are able to support individuals with ASD to be fully included in all aspects of their community.
- b. Ensure that institutions of higher education and state sponsored trainings utilize the literature on evidence-based practice as the foundation for pre-service and in-service professional training.
- c. Encourage universities to train more students in shortage areas, such as applied behavior analysis, to increase the number of these providers in schools, mental health settings, and adult service agencies.
- d. Increase the availability of relevant training to key community members who encounter individuals with ASD such as first responders, bus drivers, and child and family service workers.

9. University Collaboration and Coordination:

- a. *Research Coordination:* Plan a summit of university faculty conducting research in the area of ASD to discuss options for the coordination of research efforts and to seek federal grant funding that impacts both national and state efforts on behalf of individuals with ASD.
- b. *Pre-service training for education and health care professionals:* Plan a summit of university faculty providing pre-service training to pre-professionals in education, health care, and the social sciences to discuss ways to infuse ASD specific information into pre-service curricula across education and the medical and social sciences.

10. Data system: Create a centralized database for identifying the needs and outcomes of individuals with ASD in the state to assist state agencies in policy and service planning across the lifespan.

11. State Plan Review, Report, and Update: The Michigan ASD State Plan should be reviewed and updated in three years to measure progress and establish future goals.