MICHIGAN AUTISM COUNCIL

Transition & Adult Services Committee

Recommendations
Phase I

September 2015

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Summary

The needs of adults with ASD are extensive and cross multiple domains including self-advocacy, self-determination, secondary and post-secondary education, employment, living arrangements, health care, community integration, family support, and life skills. In Michigan, while services in public and educational settings are present, a more coordinated infrastructure to support the transition to post-secondary goals is needed.

There is a primary dependence by many adults with ASD on public systems of care and support. While some offer comprehensive programming, often the complexity of ASD is not well understood and programming and accommodations are not sufficient to prepare the individual for life as an independent adult. The National Center for Educational Statistics and Institute for Educational Services (2012) indicated that in 2011-2012, there were 455,000 students meeting ASD eligibility nationwide representing an almost 400 percent increase from numbers reported in 2002; this is also represents 7.1 percent of all disabilities reported in 2012, which was 1.5 percent of the disability community in 2002. Early and intensive behavioral interventions (EIBI) offer some promise to improve the life trajectory of children and adolescents diagnosed with autism but resources and personnel are not yet available to provide EIBI for every child and adolescent and some children do not respond to early interventions with the level of behavioral improvements that will allow them to move into adulthood without the need for ongoing support and services.

Since 2012, Michigan has taken the following actions to support individuals with ASD:
- Established the Michigan Autism Council through Executive Order (2012);
- Developed the *Michigan ASD State Plan (2013)*;
- Established a committee of the Autism Council to identify Transition & Adult Services recommendations aligned with the *Michigan ASD State Plan (2013)*;
- Published the *Michigan Mental Health and Wellness Commission's Report (2013)* and subsequent recommendations for persons with mental illness, substance abuse disorder, and developmental disabilities; and
- Issued the Michigan Executive Directive (No. 2014-1) by Governor Rick Snyder in October 2014 that required the State of Michigan to adopt employment practices to employ individuals with disabilities in competitive settings, and to train all state employees to ensure better understanding and acceptance in the workplace.

This report addresses the Adult Service focus area of the *Michigan ASD State Plan (2013)* and subsequent recommendations (Phase I) of the Transition and Adult Services subcommittee in the areas of secondary transition programming, post-secondary education, employment, living arrangements, and participation in the community. Providing quality secondary transition programs is a catalyst to preparing youth and young adults for life in the community, and for employment and independent living. The subsequent phase (Phase II) will involve implementing some of the recommended supports and services from Phase I, and conducting further research and defining recommendations for adult service systems, health care, and family impact.

These recommendations represent action needed to increase impact from a systems

and integrated level, and could aid in facilitating comprehensive coordination across the population of young adults and adults with ASD.

Below is a summary of recommendations, with more detail and sub-recommendations within the report:

Secondary Transition Programs
- Identify evidence-based practice components of secondary transition programs that support individuals with ASD to meet post-secondary goals for education, employment, housing, community participation, and independence.
- Establish a framework to increase collaboration with the Michigan Department of Education, Office of Special Education transition initiatives, organizations offering specific training in transition preparation such as the Statewide Autism and Training Program (START) Building Your Future (BYF) program, and other groups and adult agencies providing transition training opportunities.
- Launch additional Project SEARCH sites statewide and within a regional configuration. Project SEARCH is an evidence- and business-based intensive internship and collaboration model providing an employment experience in the last year of education for individuals with developmental disabilities.
- Consider policy and legislative impact on post-secondary offerings, supports, interventions, or outcomes.

Post-Secondary Education
- Prepare students and families for the transition to post-secondary settings.
- Increase knowledge and awareness of ASD at post-secondary education settings.
- Provide counseling supports in post-secondary education settings.
- Promote social functioning within the post-secondary education setting.
- Extend financial assistance for research studies and funding incentives to support post-secondary education offerings.
- Consider policy and legislative impact on post-secondary offerings, supports, interventions, or outcomes.

Employment
- Provide training and support systems that will allow individuals with ASD to obtain and sustain meaningful employment based on the interests and desires of the individual.
- Training for educators, job developers, job coaches, and other support providers to better understand the depth and breadth of challenges of the disability, and the nature of how it affects each individual uniquely.
- Establish employment environments through the use of natural support systems and promoting integration with co-workers.
- Consider policy and legislative impact on post-secondary offerings, supports, interventions, or outcomes.

Living Arrangements
- Provide a housing environment that meets the needs and desires of the individual, is safe and accessible to services, allows for choices by the individual, and provides the most independence possible for the individual.
- Consider policy and legislative impact on post-secondary offerings, supports, interventions, or outcomes.

Public and Community Integration
- Provide an inclusive community for individuals with ASD to safely and productively live, work, and recreate.
- Consider policy and legislative impact on post-secondary offerings, supports, interventions, or outcomes.

Overview

The Transition & Adult Services committee of the Michigan Autism Council is committed to identifying resources, options, and practices that improve the lives of transitioning youth and adults living with ASD. This transition requires development and coordination of many systems of support and care. These areas will be covered in recommendations in this document.

In findings from the *Michigan ASD State Plan (2013)*, there are greater numbers of students moving into transition and post-secondary education settings. In 1990, the Michigan Department of Education (MDE) Office of Special Education (OSE) reported a total of 1,208 students eligible for ASD services in Michigan. By 2011 that number had grown to 15,976, a 1,300 percent increase from 1990. In 2013, the MDE OSE reported a total of 208,333 students eligible for special education services in Michigan, with 17,415 of those having an ASD eligibility; approximately 7,869 (36 percent) of those were 14-26 years and moving into transition age (as illustrated in the graph below). Further, more students are being screened and found to meet eligibility requirements earlier, representing an overall increase in students with ASD educated in Michigan schools, and who will eventually move into adulthood. At the current time, Michigan does not collect or maintain data for individuals who meet medical diagnostic criteria for ASD.

Number of Michigan Students with ASD by Age
* Based on 2013 MDE, OSE Eligibility Count
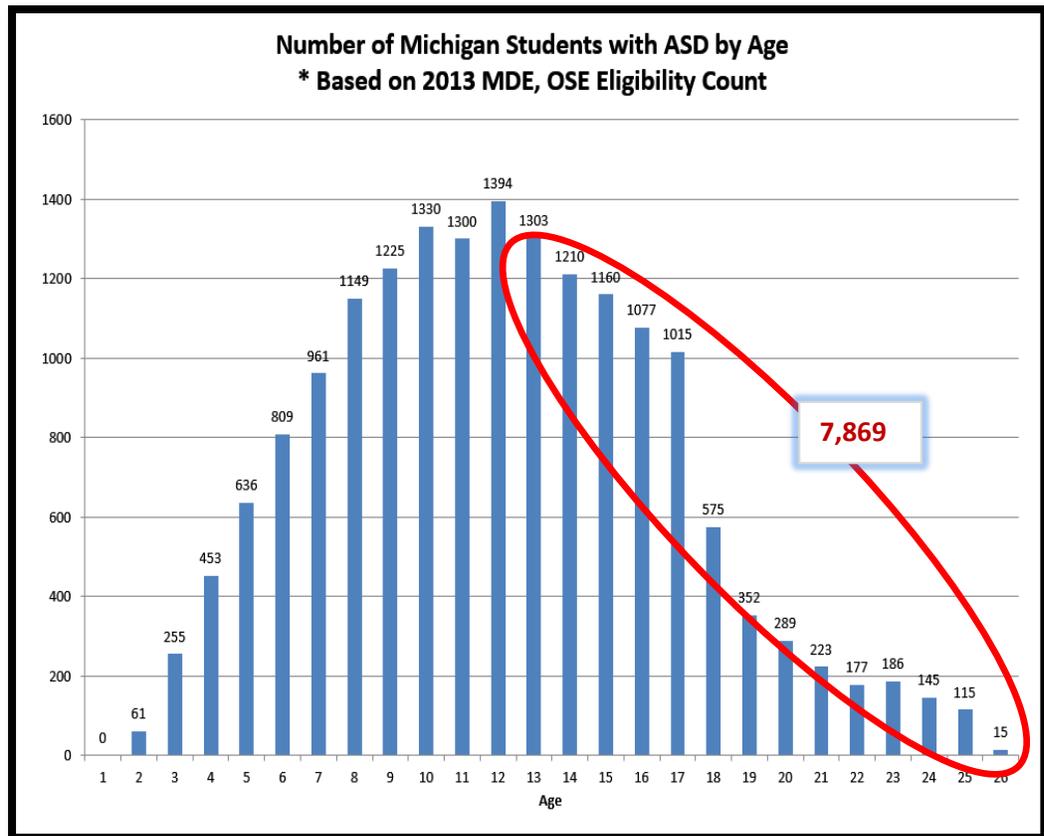
Purpose

The *Michigan Autism Spectrum Disorder (ASD) State Plan (2013)* provides a number of overarching recommendations pertaining to adult services. The recommendations contained in this document address elements aligning to those identified in the *Michigan ASD State Plan (2013)*, including:

- *Need for improved service coordination in public service systems with clarified roles and responsibilities in the agencies (Recommendation 4, p. 44).* Included recommendations address responsibilities systems involved in transition preparation and execution.
- *Professional development training options focused on ASD for adult service providers, secondary and post-secondary educational professionals serving students, caregivers, program administrators, medical professionals, nursing homes, first responders, and employers (Recommendation 5, p. 44).* Included recommendations address components of best practice transition planning and necessary elements of post-secondary programming based on current research; identifies existing training options for secondary and post-secondary educators involved in the transition process.
- *Families and individuals with ASD should be actively involved in the process of identifying and establishing appropriate and acceptable living situations (Recommendation 6, p. 44).* Included recommendations compiled by workgroup of family members; research conducted on current options and policy.
- *Work with Offices of Disability Support Services, MI-AHEAD and Resource Centers for Persons with disabilities within community colleges and universities to ensure a successful transition to higher learning and to secure necessary accommodations, supports, and resources for individuals with ASD (Recommendation 7, p. 44).* Included recommendations address post-secondary education programming, needed elements of programming identified based on research and a statewide survey conducted to colleges, universities, and vocational and technical schools.
- *Improve the transition process from secondary education to post-high programming, and to adult service agencies. Implement a model that brings together representatives from educational and adult service agencies who have dedicated planning time to focus collaboratively on transition outcomes (Recommendation 9, p. 45).* Included recommendations address this issue in secondary transition programming, post-secondary education, and employment. Existing and proposed opportunities are cited.
- E*xplore and expand pilot models to achieve better employment outcomes across the state (e.g., [Project SEARCH](), Customized Employment) (Recommendation 12, p. 45).* Included recommendations review existing models which integrate the discovery process and employment experiences prior to exiting secondary education (e.g. Project SEARCH, Kent County ISD Empowerment Model).
- *Explore and expand community participation models across the state to promote a sense of belonging for the person with ASD. Such inclusive models will serve to increase the network of natural supports and improve quality of life throughout the*

community (Recommendation 13, p. 45). Included recommendations explore a community-integrated model which promotes self-advocacy and assimilates stakeholders and families in local communities to promote inclusion, education, safety, acceptance, and quality of life.

The purpose of this document is to report progress on the recommendations of the *Michigan ASD State Plan (2013)* Adult Service focus area. It is further intended to provide high level recommendations to agencies and educational entities involved with young adults transitioning from secondary education to post-secondary programming and adulthood. This may also be helpful as a guide to parents and other professionals in the areas of best practice and considerations for their family member going through transition to adulthood. There are a number of key systems involved in the process of supporting youth becoming young adults with increased independence and decision-making in life after high school. This requires collaboration and an integration of services, including the educational and public systems such as Community Mental Health, Michigan Rehabilitative Services (MRS) and the Bureau of Services for Blind People (BSBP), and the Michigan Department of Health and Human Services (MDHHS).

Evidence-Based Practice

Secondary transition programs for people with disabilities have been highly researched, duplicated, and undergone systematic review for fidelity. This includes increasing skills not only for education and employment, but for independent living. The National Secondary Transition Technical Assistance Center ([NSTTAC](#)) is a federally funded program of the U.S. Department of Education, Office of Special Education (Test, Fowler, Kohler, 2013). NSTTAC conducted a two part study on 1) a review of the current literature and 2) the subsequent outcome of using these practices to teach students specific transition-related skills. This paper reported correlation between certain strategies and overall post-school outcomes in the areas of education, independent living, and employment. While additional experimental work needs to be conducted to confirm efficacy of specific interventions, this is an important step to identifying evidence based interventions.

The NSTTAC categorizes EBP practices in secondary transition based on interventions implemented versus specific skills taught. In all there were 64 evidence-based practices cited in the areas of student-focused planning, student development, family involvement, and program structure. NSTTAC rated the strength of the intervention based on "potential," "moderate," and "strong" evidence supporting the effectiveness of the intervention. The following evidence-based practices showed strong correlation to the skills taught:

- Using mnemonics to teach for increasing academic skills
- Using peers to provide instruction for academic skills
- Using published curricula to teach student involvement in IEP
- Using self-management instruction to teach academic skills

- Using technology to teach academic skills
- Using visuals to teach academic skills

The NSTTAC additionally defined *predictors* of outcomes in education, employment, and independent living based on utilizing EBP interventions to teach skills. The following had high correlations related to using EBP interventions across all <u>three</u> of these domains:

- Inclusion in general education;
- Paid employment/work experience;
- Self-care/independent living skills;
- Student support.

There was additionally strong correlation in predictors of outcomes in <u>two</u> areas including education and employment in the areas of: career awareness, interagency collaboration, occupational courses, parent expectations, self-advocacy/self-determination, social skills, transition programming, and vocational education. There were a number of EBPs that had a correlation in only <u>one</u> of the domains, which was the area of employment: community experiences, exit exam requirements/high school diploma status, parental involvement, program of study, and work study.

A current report was recently issued citing best-practice interventions for individuals with ASD, including young adults by Wong et al. (2014). The interventions specify age groups in which the intervention has significant data supporting its effectiveness. This report: *[Evidence Based Interventions for Children, Youth, and Young Adults with Autism Spectrum Disorder](2014)* was supported by the U.S. Department of Education Office of Special Education and the National Professional Development Center (NPDC) to review focused interventions based on rigorous scientific review of hundreds of studies. This aligns to the above practices pertaining to adults. Further, in April 2015, the National Autism Center (NAC) released Phase 2 of the National Standards Project ([NSP2 Online](#)). In addition to analyzing outcome studies for interventions of young children, they also included analysis of outcome studies for adults 22 years and older. There were 378 total studies identified as meeting inclusion criteria from birth through adulthood. Of the number researched, seventeen studies met inclusion criteria for adults 22 years and older. These interventions were based in behavior analytic procedures, with the majority of studies cited having strong emphasis on antecedent-based interventions. Antecedent interventions involve altering the environment or situation prior to the occurrence of a target behavior to increase a desired or appropriate behavior and decrease the likelihood of an undesired behavior. Examples of antecedent interventions are prompting, extinction, differential reinforcement, functional communication training, choice making, and often a combination of these procedures (NSP2 Online).

Recommendations

This document provides recommendations based on research findings within specific Transition & Adult Service workgroups which are considered fundamental to systemic change in Michigan. The secondary transition program was a central focus of these recommendations as a model to advance skills across the domains of living: post-high school education including higher level learning and post-high school secondary transition

programs, employment, public and community integration, and living arrangements.

Secondary Transition Programs

Secondary transition planning occurs in high school, whereas secondary transition programming is a process. Formal "secondary transition programs" pertain to post-high school programs offered through the student's Educational Service Agency (ESA) or Intermediate School District (ISD). Secondary transition programs are designed to support the individual, through an individualized education program (IEP), develop skills to reach post-secondary goals, including independent living, and successful employment.

Students with a disability who are eligible to receive special education and/or related services must be afforded, as part of their individualized education program (IEP), comprehensive transition services developed in a manner that supports the individual's post-secondary goals. Termination of eligibility for special education programs and/or related services may only be terminated when:

- A high school diploma is issued to the student, or
- The student reaches the age of 26.

Wehman et al. (2013), pointed out that vocational rehabilitation (VR) programs nationwide are challenged in responding to the needs of students with ASD; from 2008-2011, numbers indicate VR agencies served more transition aged students with ASD but the rate of rehabilitation declined overall, and the number of youth with ASD as a primary disability in VR programs is steadily increasing. Some of the reasons Wehman et al. (2013) cited are the complexity, co-morbidity, behaviors, and need for individualized programming utilizing ASD focused supports.

The U.S. Department of Education, Office of Special Education's National Secondary Transition Technical Assistance Center's report *High School Redesign and Secondary Transition Planning for Students with Disabilities: 101* cited the Harvard report *Pathways to Prosperity* which recommends defining multiple paths to graduation which increase post-high school outcomes in obtaining a diploma, providing programming that aligns with student's goals, offering a broad and comprehensive transition program, offering occupation-related coursework and vocational options, and completing a work study opportunity where the student is in a working-based situation (Test, Toms, Scroggins, Fowler, 2011).

Recommendations

I. Identify evidence-based practice components of secondary transition programs that support individuals with ASD to meet post-secondary goals for education, employment, housing, community participation, and independence.
• Modify Michigan Pupil Accounting rules to accommodate individualization of programming and supports based on the needs of the person. • Establish targeted programs to meet the needs of each individual with ASD using evidence-based practice interventions and supports in preparing for increased independent living and integration into community and employment. This initiative would align to the twenty-first century instructional design model

incorporating applied, experiential learning in a non-traditional manner.

- Develop a work group to maximize the ability for a school district to capture state pupil membership dollars for secondary transition programs that engages appropriate leadership from the Michigan Department of Education (Pupil Accounting, Career and Technical Education, Office of Special Education), and the Transition & Adult Services committee of the Michigan Autism Council.
  - · Ensure that public school "educational services and supports" are a priority in the next phase of implementation of the Autism Spectrum Disorder State Plan by working with the leadership of the Autism Council, the Department of Community Health and the Department of Education. The goal of this partnership is to develop work plans (including objectives, activities, and deliverables) gather information, conduct needs assessments, trainings, and develop resources (Education recommendation p. 15).
- Provide further training and resources to professionals delivering transition programming to students with ASD. Topics would include the heterogeneity, complexity and core deficits of ASD; selection of relevant vocational assessments which consider the strengths, desires, interests, and needs of the individual; and selection of interventions and training of the community and potential employers. These areas collectively impact overall outcomes for students with ASD. For nearly all individuals with ASD across the spectrum, the core deficits cause great challenges in acquiring and maintaining employment.
- Include the "discovery" process as one of the key components of transition assessments. Defined by the Ohio Center for Autism and Low Incidence (OCALI), discovery is a person centered approach to find out who the student is today, what skills are maintained in different settings, the skills and interests discovered by observation in natural environments including the community, with family and friends, and in the home. As this process is facilitated, the most optimal conditions of employment and support for each individual needs are determined. Based on these findings, work conditions and stakeholders could further be identified. The whole individual is considered and planning is individualized when using a discovery approach. It focuses on the student while involving the support team and family.
  - · Create individualized programs for each individual with ASD based on the discovery assessment matching skills to potential job opportunities; cultivate current skills sets and address any gaps or needs in living skills or behavior issues.
- Utilize inclusive, same-age peer supported programs to increase independence, self-management, self-determination, and self-advocacy.
- Facilitate paid or unpaid internship or work-based experiences promoting maximum integration possible prior to exiting education and promoting likelihood of securing and sustaining employment.
- Provide training in technology, social navigation, and appropriate use of technology and online navigation. Social media and technology may also provide social connections with others of shared interests.
- Offer training in accessing transportation independently if the individual is ineligible to obtain a state driver's license; individual should be able to navigate public transportation as autonomously as possible.
- Pursue an enhanced state identification card or standard state identification card if

the individual or guardian deems appropriate; develop a partnership with the Michigan Secretary of State office to expedite and ease this process.

- Educate on hygiene and socially-acceptable dress for specific environments, including the workplace and other settings pertinent to the individual.
- Support multi-agency collaboration within secondary transition programs such as Community Mental Health, Michigan Department of Education, local school districts, Intermediate School Districts (ISDs), Regional Education Agencies (RESAs), Michigan Rehabilitative Services (MRS) and the Bureau of Services for Blind Persons (BSBP), and others.

II. *Establish a framework to increase collaboration with the Michigan Department of Education, Office of Special Education transition initiatives, organizations offering specific training in transition preparation such as the Statewide Autism and Training Program (START) Building Your Future (BYF) program, and other groups and adult agencies providing transition training opportunities*.

- Promote outcomes for greater independent living, community involvement, and employment. Significant training domains include:
    - Heterogeneity, complexity, and core deficits of ASD,
    - Relevant and reliable vocational assessments,
    - Evidence-based practice interventions and supports,
    - Community and potential employer training and education,
    - Collaboration, continuity, and consistency of programming across systems.
- Integrate the Michigan transition services agency into the process at appropriate timelines.
- Engage Michigan Rehabilitative Services (MRS) and the Bureau of Services for Blind Persons (BSBP) in providing vocational training and support to individuals with disabilities in preparing for employing and acquiring employment, including self-employment.
    - MRS and BSBP provide individualized vocational rehabilitation services leading to competitive integrated employment.
    - MRS and BSBP counselors are part of transition process and included in the student's IEP prior to leaving high school.
    - Provides support to all disabilities, including ASD.
    - Access Michigan Career and Technical Institute (MCTI) for vocational and technical training for with goal of competitive, integrated employment.
    - Offers federally mandated Ticket to Work and Work and Self-Sufficiency Program for people with disabilities entering or reentering the workforce.
    - Talent Acquisition Portal (TAP) was designed for use by potential employers in locating qualified employees and matching with job seekers.
- Leverage existing organizations and programs offering transition training and critical employment skills and supports such as:
    - Statewide Autism and Resources Training (START) Building Your Future (BYF) programming, consisting of self-discovery to align potential employment with skills, goals, and desires of the individual. Integrates the individual into the process along with the cross-functional team: educational supports, Community Mental Health, parents, and individual with ASD.
    - Other programs that offer best practice training and promotes self-

advocacy, assuring the individual is central to the process.

III. Launch additional Project SEARCH sites statewide and within a regional configuration. Project SEARCH is an evidence- and business-based intensive internship and collaboration model providing an employment experience in the last year of education for individuals with developmental disabilities.

- Modify the traditional Project SEARCH model by embedding additional ASD-specific interventions. In a recent study conducted on competitive employment which included students with ASD utilizing the Project SEARCH model, providing additional interventions specific to ASD were imperative for success in maintaining employment after the Project SEARCH internship ended. The study emphasized the challenges current vocational rehabilitation programs have responding to the needs of individuals with ASD with overall success in employment outcomes declining. The findings from the study reported that 21 out of 24 (87.5 percent) individuals with ASD participating in the Project SEARCH program achieved employment while 1 of 16 (6.25 percent) individuals in the control group not receiving additional ASD supports achieved employment (Wehman et al., 2013). (*Paul Wehman is considered a leading expert and clinician for adults with ASD and Virginia Commonwealth University (VCU) and director of the VCU Autism Center*).
    - As of December 2014, there were eleven Project SEARCH sites in Michigan.
    - Targeting a minimum of two sites implementing Project SEARCH by the end of 2016.

IV. Policy and legislative considerations that may impact post-secondary offerings, supports, interventions, or outcomes.

- Implement changes in the area of education, supporting *Michigan Mental Health & Wellness Commission's Report (2013)*:
    - Ensure that public school "educational services and supports" are a priority in the next phase of implementation of the Autism Spectrum Disorder State Plan by working with the leadership of the Autism Council, the Department of Community Health and the Department of Education. The goal of this partnership is to develop work plans (including objectives, activities, and deliverables) gather information, conduct needs assessments, trainings, and develop resources (Education recommendation p. 15).
    - Expand sites for training using the Pathways to Potential Model which places the Michigan Department of Human Services workers in schools to help educate families and overcome barriers to academic support. Additional support in the school may come in the form of mental health organizations, health clinics, employment agencies that offer training in job skills, resume writing, tutoring, mentoring, and other specific skills needed for the job (Employment recommendation p. 17).
- Increase Project SEARCH sites in Michigan to people with a variety of developmental disabilities and subsequently increase employment opportunities. This supports the *State of Michigan Mental Health & Wellness Commission's Report (2013)* Employment recommendation (p. 17).
- Investigate secondary transition employment opportunities prior to exiting formal education through the Workforce Innovation and Opportunity Act (WIOA), which is

considered landmark federal legislation (passed October 2014) for individualized job training with integration to post-secondary education, occupational learning, and links to employers.

Post-Secondary Education

For individuals with ASD, the consideration given to preparation for transition to higher levels of education prior to finishing high school is very limited. Unfortunately, many students with ASD leave high school unprepared for a life of work or for post-secondary educational settings (Taylor & Seltzer, 2011; Wehman, Schall, Carr, Target, West, & Cifu, 2014). The National Longitudinal Transition Study 2 (NLTS2), a 10-year-long study, provides the most comprehensive view of secondary and post-secondary school students with disabilities including those with an autism spectrum disorder. Approximately 830 secondary school students (ages 13 to 16) in the NLTS2 data set had a primary diagnosis of autism (NLTS2). In a secondary analysis of NLTS2 participants with autism, researchers found that (1) the high school's primary post-high school goal for the student, (2) parental expectations, (3) high school type, (4) annual household income, (5) and academic performance were "significant predictors of participation in postsecondary education (Chiang, Cheung, Hickson, Xiang, & Tsai, 2012, p. 685). In addition, Fleury, Hedges, Hume, et al. (2013), noted that predictive factors impacting success in post-secondary settings included the ability of many educators in high school to make modifications to state-required curriculum while targeting the individualized needs of individuals with ASD. Kallio and Owens (2004) contend that the key to successful transition to post-secondary education is that these individualized needs are integral part of early planning that prevents the "period of floundering" (Halpern, 1991) when supports are not in place.

According to the Sanford, Newman, Wagner, Cameto, Knokey, and Shaver (2011) 91 percent of individuals with autism receive some form of accommodation in the classroom in high school, and only 35.2 percent of those individuals surveyed actually finished a post-secondary program. Specific challenges include time management, social relationships, executive functioning skills, anxiety, and sensory integration dysfunction (Graetz & Spampinato, 2008; VanBergeijk et al. 2008). The U.S. Department of Education (2011) reports that individuals who were employed, attained some level of education beyond post-secondary training (e.g. vocational, business, technical school; community college, 4 year university), and received some form of job training (e.g. in specific skills outside the employer or family). They were additionally more likely to be productively engaged in the communities in which they live.

Approximately 64 percent of adults with ASD in post-secondary degree-seeking programs are employed. This percentage is comparable to those without a disability. In addition, although only one-third of adults with ASD are employed upon exiting a post-secondary program, within 36 months, 90 percent were employed without supports (Aud et al., 2011). The NLTS2 survey reports that average hourly wage for young adults with disabilities who had completed a post-secondary education program was approximately $12.50 per hour compared to $9.80 for those who had only completed high school or had limited   post-secondary education. The benefits of post-secondary education also

extended beyond financial interests. Young adults attending a post-secondary education program had higher weekly rates of seeing friends, were more likely to volunteer in the community, and were more likely to have a driver's license.

Recommendations

I. **Prepare students and families for the transition to post-secondary settings.**
- Assure alignment of student's interests and passions with the goal of the post-secondary program.   - Teach self-advocacy, self-determination, and disclosure skills including rights under IDEA, ADA, and Section 504 and what constitutes a "reasonable accommodation".   - Foster the transition from family to student role in the decision making process pertaining to post-secondary education issues.   - Utilize strategies that were successful in high school in the post-secondary setting and teach organization and planning (executive functioning) skills prior to starting post-secondary education.   - Identify coping skills and supports to manage stress, anxiety, or depression.   - Encourage participation in summer courses at a community college or technical school before enrolling full-time to get exposure prior to becoming a student.   - Explore post-secondary educational website, attend orientation, and become familiar while exploring post-secondary options best suited for the individual.   - Set high expectations and identify potential success and barriers.   - Utilize online informational, research, and training tools for individuals with disabilities such as the National Secondary Transition Technical Assistance Center (NSTTAC) and Think College.   - Consider various types of programming, including certificate programs, online options, and financial aid options.   - Connect students with ASD to post-secondary peer to peer programs, support groups, social skill development groups, etc. that exist in the postsecondary setting.
II. **Increase knowledge and awareness of ASD at post-secondary education settings.**
- Provide training to faculty and staff about the characteristics of ASD and effective interventions.   - Disseminate resources that address ASD and post-secondary education programming.
III. **Provide counseling supports in post-secondary education settings.**
- Engage post-secondary counselors during the secondary transition planning process.   - Focus on strengths during post-secondary education for future and lifespan planning.
IV. **Promote social functioning within the post-secondary education setting.**
- Address social competence and ability to navigate social settings.   - Facilitate similar-aged peer and mentor programs where peers are trained in

characteristics of ASD and supporting the individual. • Conduct studies on the use of peers in post-secondary education settings.
V. Extend financial assistance for research studies and funding incentives to support post-secondary education offerings.
• Fund research by Michigan universities on transition from secondary to post-secondary education settings, aging and ASD, medical issues affecting post-secondary success, quality of life and ability to pursue post-secondary education, and other issues related to ASD and adults. By providing such funding to Michigan based universities, Michigan adults with ASD could potentially benefit. • Convene post-secondary education summit to discuss providing post-secondary options universities and colleges for students more significantly affected with ASD. • Develop Comprehensive Transition Programs in post-secondary settings that meet the criteria so that financial aid can be accessed.
VI. Policy and legislative considerations that may impact post-secondary offerings, supports, interventions, or outcomes.
• Americans with Disabilities Act (ADA, 199) and Section 504 of the Rehabilitation Act (504, 1973 are the primary mandates for the provision of assistance (Graetz & Spaminato, 2008). • Section 504 states: No otherwise qualified individual with a disability in the United States . . . shall, solely by reason of her or his disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance (Office of Civil Rights [OCR], 1998). This applies to all recipients of funding, "including colleges, universities, and post-secondary vocational education and adult education programs. Failure by these higher education schools to provide auxiliary aids to students with disabilities that results in a denial of a program benefit is discriminatory and prohibited by Section 504" (Office of Civil Rights, 1998). • Americans with Disabilities Act of 1990 (ADA), Title II prohibits discrimination based on disability and ensures accommodations such as taped texts, note takers, readers, assistive devices, extended time for tests, and video texts displays. • Review further components of post-secondary education and transition planning for parents and children. This supports the *State of Michigan Mental Health & Wellness Commission's Report (2013),* "Other" recommendations (p. 29).

Employment

The challenges of individuals with ASD to find and maintain employment continues to exist. According to Wehman et al. (2013), regardless of intellectual capability of the individual with ASD, wherever they fall on the spectrum, employment rates continue to range between 4.1 and 11.8 percent (Taylor and Seltzer, 2011) nationwide.

In 1990 the Americans with Disabilities Act (ADA) was passed requiring employers to provide equitable employment opportunities and accommodations to individuals with disabilities (ADA Regulations online). In 1999 the U.S. Supreme Court Olmstead v. L.C. decision held that individual with disabilities are entitled to full community integration

(ADA Olmstead online). Still today, the majority of people with significant disabilities continue to struggle in finding competitive employment. More adult-targeted services are needed for individuals with ASD so that they can achieve the greatest extent of independence and sustained careers; unfortunately, our current system of adult supports and services and often do not accommodate the unique needs of people with ASD (Taylor & Seltzer, 2012).

Findings in a cross-disability post-high school outcomes study commissioned by the U.S. Department of Education (2011) found that employment status up to eight years after finishing high school varied among disability classification; for ASD, 63.2 percent of those surveyed were employed at some point since high school, but only 37.2 percent were employed at the time of the interview whereas those with learning disabilities, speech/language impairments, and hearing impairments ranged from 91.5-94.9 percent employed at some time since high school, and ranged from 57.2 to 67.9 percent employed at the time of the outcome interview. Individuals with ASD were the second lowest to obtain employment at any point since high school (63.2 percent), with the lowest being those with multiple disabilities, which could include ASD (62.5 percent) (US Department of Education, 2011).

While research supports devising interventions to specific needs, strengths, and interests, and that supports for individuals with ASD can lead to sustained and more meaningful employment, outcomes in this area continue to be abysmal, with an estimated unemployment rate of 50-75 percent for adults with ASD (Hendricks, 2010). Hendricks (2010) goes on to point out that in addition to unemployment, people with ASD face earning less, underemployment, frequent job changes, issues integrating to job settings, and these issues are common with post-secondary educational experience.

There have been a number of studies conducted promoting promising and best practice approaches to maximizing employment outcomes for people with ASD. The need for \] \integration into non-segregated settings and implementing a culture of natural supports. This essentially reduces the sustained need for reliance on other individuals external to the employment setting, and more integration of a support system within the work place setting through trained co-workers and leaders (Callahan, Griffin, & Hammis, 2011). The authors went on to discuss Employment First and its focus of all states promoting a policy for integrated employment and preferred funding for these services in lieu of non-integrated employment (Callahan, Griffin, & Hammis, 2011). The idea of customized employment is also an emerging practice. According to Gerhardt & Lanier (2011) customized employment constitutes and promotes highly individualized, viable jobs through negotiation with potential employers and focuses on the needs, interests, and talents of the individual, akin to person-centered planning.

Recommendations

I. *Provide training and support systems that will allow individuals with ASD to obtain and sustain meaningful employment based on the interests and desires of the individual.*
• Engage in preparing students for transition who receive special education and/or related services in middle school; required when the student reaches 16 years and suggested at 14 years.

- Seek paid, competitive, and integrated employment experience while participating in secondary or post-secondary programming through a school or school district (and maintaining an IEP) for improving the outcome of maintaining long-term employment.
- Enlist support from Michigan Rehabilitative Services (MRS) and the Bureau of Services for Blind People (BSBP) and other agency programs in locating employment opportunities.
  - · Better off Working: strategic plan created by the Michigan Department of Health and Human Services (DHHS), disability advocates, and employers to advance employment opportunities for people with disabilities in Michigan.
  - · Michigan Career and Technical Institute (MCTI) is a program within MRS and operates as a part of MRS. MCTI offers vocational and technical training to prepare individuals with disabilities for competitive employment.
  - · The Talent Acquisition Portal (TAP) was designed for use by potential employers in locating qualified employees, and job seekers can add information to the portal. Online training, job fairs, and other resources are available.

II. *Training for educators, job developers, job coaches, and other support providers to better understand the depth and breadth of challenges of the disability, and the nature of how it affects each individual uniquely.*

- Promote greater success and overall outcomes for the individual for sustained employment by training in the following domains:
  - · Heterogeneity, complexity, and core deficits of ASD,
  - · Evidence-based practice interventions and supports,
  - · Tailoring supports and accommodations for the individual.

III. *Establish employment opportunities and environments through the use of available resources, natural support systems and promoting integration with co-workers.*

- Train the employer, staff, and job coaches working most closely with the individual with ASD to better understand the disability and needed supports for the individual, and promote more cohesive integration.
- Promote and provide supported employment opportunities versus segregated employment opportunities to assure maximum inclusion in the employment community.
- Increase the number of employers and employment opportunities in Michigan state government, and large and small organizations providing integrated and supportive work environments. Resources include employment tools such as Autism Speaks Employers Guide to Hiring and Retaining Employees with Autism Spectrum Disorders and Autism Speaks Autism in Big Business Report, which reviews corporate reports, diversity, and inclusion policies and events promoting hiring individuals with ASD in their work communities promoting more positive outcomes.
- Utilize and expand existing tools in Michigan to connect employers and potential employees with ASD, such as the *Pure Michigan Talent Connect website.*

IV. Policy and legislative considerations that may impact employment offerings, supports, interventions, or outcomes.

- Adopt *Employment First* policy through legislation or executive order, aligning with the language of the U.S. Department of Labor, Office of Disability Employment Policy and supported by the Michigan Developmental Disabilities Council and Michigan Autism Council, and aligns with the *State of Michigan Mental Health & Wellness Commission's Report (2013)* employment recommendation language to adopt a statewide policy, either through legislation and/or executive order, on employment that honors the choices and goals of the individual (p. 17). This policy helps ensure jobs of choice, and competitive pay and comparable earnings regardless whether the individual has a disability. The Michigan Protection and Services Agency created a report in collaboration with the Michigan Developmental Disabilities Council and Wayne State University (2014) *Employment First in Michigan*. This document provides the history, implications, assumptions, and other information pertaining to *Employment First*.
- Increase number of Project SEARCH sites in Michigan as referenced in the *Michigan mental Health & Wellness Commission Report (2013)*.
- Support the Michigan Executive Directive (No. 2014-1) issued by Governor Rick Snyder in October 2014 that requires the State of Michigan to adopt employment practices to employ individuals with disabilities in competitive settings, and to train all state employees to ensure better understanding and acceptance in the workplace.
- Promote employing individuals with disabilities per Section 503 of the Rehabilitation Act of 1973 which requires federal contractors and subcontractors to take affirmative action in recruiting, employing, training, and promoting qualified individuals with disabilities and prohibits discrimination based on a disability. Individuals with disabilities should account for at least seven percent of employees within a job group at a company.
- Investigate options through the Workforce Innovation and Opportunity Act (WIOA) considered landmark federal legislation (passed October 2014) for individualized job training with integration to post-secondary education, occupational learning, and links to employers.
- Enable greater preparation for longer-term employment and improved outcomes through by expanding training sites as defined by the *Pathways to Potential* program cited in the *State of Michigan Mental Health & Wellness Commission's Report (2013).*
  - Assign Michigan Department of Health and Human Services (MDHHS) workers in schools to help educate families in overcoming barriers to academic support. Include additional support in the school as needed in the form of mental health organizations, health clinics, employment agencies that offer training in job skills, resume writing, tutoring, mentoring, and other specific skills needed for the job.
- *Ticket to Work and Self-Sufficiency Program* (Work Incentives Improvement Act of 1999): assists eligible people with disabilities entering the workforce in accessing employment services, vocational rehabilitation, and other resources at no cost.
- Investigate impact of Workforce Innovation and Opportunity Act (WIOA).
- Design legislation supporting funding sources such as reimbursements to maintain integrated models, targeted reimbursement rates for community-based wrap around supports; expectation to fade supports as appropriate for the

individual.

Living Arrangements

Living arrangements are a significant consideration for families and individuals with ASD. Living arrangement types, models, structures, legal concerns, levels of support, financial obligations, and location are all considerations for finding an appropriate living arrangement.

With the Americans with Disabilities Act from 1990 acting as a catalyst, housing evolved from a time of large institutions to smaller, more intimate living arrangements where supervision may vary depending on the need of the individual with ASD (Cavanagh & VanBergeijk, 2014). The ultimate goal is for every person living with ASD to live in the least restrictive setting that affords a high quality of life and being an integral member of the community. This also means the individual having the ability to live in the housing situation and location of their own choosing. Gerhardt (2009) points out that there are a variety of models that provide progressive levels of support, from most to least supported in the living arrangement. The following is the order from most intensive supports, to least intensive supports:
- Institutional placement (segregated setting),
- Farmstead,
- Group homes,
- Supervised living,
- Supported living (independent setting).

The primary difference in the models listed is the number of people served in the "home" unit and subsequent community exposure for each person living in the arrangement. Gerhardt (2009) goes on to point out that these models may look differently depending on the offering agency or organization so quality cannot be ascertained by the model type itself; long term funding and ability to pay for living must be a consideration (Gerhardt, 2009).

A number of factors should be considered when evaluating housing models and options for people with ASD, including best and emerging practices, barriers and obstacles, securing adequate funding, and state and national policies.

Recommendations

I. **Provide a housing environment that meets the needs and desires of the individual, is safe and accessible to services, allows for choices by the individual, and provides the most independence possible for the individual.**
• Enhance training for direct care providers in the characteristics of ASD and how to support individuals at no cost to the provider.
• Increase direct care staff compensation to a living wage, allowing career advancement opportunities.

- Create a long-term housing plan for the individual with an annual review to address areas of dissatisfaction, needs, and challenges; determine whether a changes needed with safety as a paramount consideration.

- Close disparity among Community Mental Health (CMH) Regions and assure funds follow the individual upon moving to new geographic locations within Michigan.

- Utilize person-centered planning and the principles of self-determination to identify the needs and wants of the individual regarding their living arrangement choices. Choices should be made by the individual to the highest degree possible, in conjunction with guardians or family members.
  - Consider the *Getting My Own Address* online planning guide offered by Community Housing Network that covers creating an individualized long-term housing plan based in desired communities.

- Increase collaboration within the state with other groups working on housing initiatives to reduce duplication and increase efficiency and consistency in policy and practice.

- Investigate public and private funding sources to promote affordable housing options.

- Ensure standards for regional funding with defined, consistent eligibility for screening, programs, and services offered across Community Mental Health (CMH) and the allocation of funds (e.g. size and number of residents in licensed group homes, approval of licensed group homes, and services allowed in unlicensed group homes.

II. Policy and legislative considerations that may impact living arrangement options, supports, funding, or outcomes.

- Identify current supportive service models in housing through collaboration of Michigan Department of Community Health and the Michigan State Housing Development Authority to provide independent living services for housing developments as cited in the Housing recommendations of the *State of Michigan Mental Health & Wellness Commission's Report (2013).*
- Enact legislation to make individuals with mental illness and/or substance abuse disorders a priority population, as cited in the Housing recommendations of the *State of Michigan Mental Health & Wellness Commission's Report (2013).*

Public & Community Integration

Integration to the community is necessary for inclusion in many other aspects of life for adults with ASD. This includes the use of public transportation, accessing businesses, and safely participating in recreational life. Efforts for promoting community inclusion can start early in an individual's life, and be a part of more formal efforts in education and advocacy offerings.

Efforts to increase meaningful access to quality learning, work, recreation, civic and social experiences for those with ASD have been challenging and ongoing (Brown et al., 1979; Hunt & Goetz, 1997; Meyer, Peck, & Brown 1991). Over several decades, a constellation of advocacy efforts, court decisions, legislative initiatives, and research

developments have converged to shape the nation's ongoing pursuit of "equality of opportunity, full participation, independent living, and economic self-sufficiency for individuals with disabilities" (IDEA, 2004).

Current data suggest that many existing school, work, and community opportunities remain unavailable to children and adults with ASD. Participating in the community includes meaningful work, access to transportation, participating in recreational and volunteer activities, shopping and patronizing businesses, attaining financial independence, acquiring meaningful friendships, and maintaining self-pride and self-advocacy; but individuals need individualized supports and training, practice, and supports for increased success in these areas (Wehman Presentation, Autism Speaks). Community understanding and acceptance are also important and collaboration and education are needed.

Recommendations

I. Provide an inclusive community for individuals with ASD to safely and productively live, work, and recreate.
• Promote existing models of community inclusion to ensure a broader range of voices are represented and the assets existing within every community do not inadvertently get overlooked.
• Utilize the *Community Conversations* approach to draw upon the ideas, relationships, and resources of the wider community to generate creative solutions to integrate individuals with ASD in the community. *Community Conversations* involve teams within a local community which include people with ASD, parents, educators, disability agency representatives, civic leaders, employers, small business owners, and other citizens.
• Train law enforcement, families, educators, and the community on the needs and strategies for more positively interacting and communicating with individuals with ASD, reducing safety risks, increasing awareness, and promoting positive outcomes.
• Provide supports and training on social competency training in diverse and generalized settings in using social amenities such as please, thank you, excuse me, etc.; using appropriate greetings; terminating conversations; sharing a workspace; responding to correction and feedback and accepting suggestions; responding assertively; recognizing inappropriate behavior and bullying; and self-advocating; asking or help or alerting to a problem; waiting in line and turn taking (Wehman, Smith, & Schall, 2009).
• Educate the individual on self-advocacy in the community such as interacting with uniformed emergency responders, requests for assistance, disclosure, independent and supported living, becoming familiar with neighbors and businesses in the local community, transportation and getting to destinations, seeking out and participating in recreational opportunities, exercising and fitness, participating in faith-based organizations, social event clubs and opportunities, volunteering in the community, appropriate trips and outings, and other activities based on the interests or needs of the individual.
• Provide best practice behavior supports such as self-management skills for behaviors that may impede social integration and acceptance within the community.

II. **Policy and legislative considerations that may impact public and community integration supports, funding, or outcomes.**
• Implement Smart 911 across Michigan where families and individuals can voluntarily provide critical information to local emergency responders regarding their specific situation. Information would be confidential to those responding and more immediate, direct assistance can be provided with this information prior to responding on scene. This is cited in the Safety recommendations section of the *State of Michigan Mental Health & Wellness Commission's Report (2013).*

Outcomes

The following are projected outcomes based on the suggested recommendations in this document, with additional outcomes to be defined by workgroups in 2016:

Secondary Transition Programs
- Coordinate appropriate state departments, legislators, and/or stakeholders in modifying Michigan Pupil Accounting rules to accommodate individualized supports and programming for individuals with ASD. (By March 31, 2016).
- Create a checklist of the best practice recommendations to be shared with Secondary Transition Programs educating students with ASD (by March 31, 2016).
- Present secondary transition programming recommendations at the Statewide Autism and Resources Training (START) Building Your Futures (BYF) training as part of the module: *Looking at Adults with ASD Differently*. (By December 31, 2016).
- Facilitate 95 or more secondary transition students with ASD completing the discovery process (START's V3 Discovery). (By December 31, 2016).

Post-Secondary Education
- Create an online and/or printable resource guide for families and students pertaining to post-secondary education opportunities in Michigan including supports offered, student requirements, housing options, and programming for adults with ASD across at least 10 state universities and 15 community colleges in Michigan. (By December 31, 2016).

Employment
- Identify a minimum of two new Project SEARCH worksite locations within the state increasing employment training opportunities for individual with ASD. (By December 31, 2016).
- Research and document full impact of the Workforce Innovation and Opportunity Act (WIOA) by engaging key stakeholders in the process. (By March 31, 2016).

Living Arrangements
- Research and document collaborative opportunities with other groups within the state working on similar housing initiatives for people with ASD and other disabilities. (By September 30, 2016).

Public and Community Integration
- Implement 17 *Community* Conversations initiatives across the state based on the Statewide Autism and Training Regional (START) Regional Collaborative Networks (RCNs) geographic positioning, increasing community collaboration, awareness, safety, and integration for individuals with ASD (by December 31, 2016).

Next Steps

With the completion of the Phase I recommendations for secondary transition programming, post-secondary education, employment, living arrangements, and public and community integration, further work will continue in defining outcomes and creating useful outputs across the domains. Research has been conducted and extensive data collected across these areas that will be valuable in creating useful products for parents, educators, professionals, providers, and other stakeholders. Participants will be recruited as needed for their expertise and knowledge in these respective areas of focus.

Phase II recommendations will be compiled and drafted in 2016. In considering convening workgroups for Phase II and adhering to the recommendations in the *Michigan ASD State Plan (2013),* a thorough review of public systems integration, entry points, and processes will be evaluated involving representatives from the respective systems; family engagement and issues impacting families and adults with ASD; and health care issues across the lifespan with input from subject matter experts in this domain. Some meetings have taken place, and additional work groups will be formed with invested stakeholders and participants. A chair and co-chair will be assigned to each work group. Objectives will be established, research and information collected, review and feedback sought by the subcommittee, and finally documentation and presentation to the Michigan Autism Council for evaluation. Subsequent actions will be decided at that time.

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Appendix 1: Transition & Adult Services Subcommittee Members

Stacie Rulison, Michigan Autism Council, Transition & Adult Services Chair
Maureen Ziegler, Transition & Adult Services, Co-Chair

Committee Workgroups	Members
Employment	Stacie Rulison, MIAC, Lead Audra Parsons, DIFS Cynthia Wright, MRS and BSBP
Post-Secondary Education	Jan Graetz, Oakland University, Co-Lead Chris Conley Sowles, Ferris, Past Co-Lead Luana Greulich, Andrews University Kathy Hikock, Berrien ISD Kris Kastle, EMU (Past Member) Megan Lowe, SSISD Stacie Rulison, MIAC
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Public Systems	Stacie Rulison, Lead Joe Longcor, MDCH Pat Miller, CMH Audra Parsons, DIFS Maria Peak, MI-TOP Cynthia Wright, MRS and BSBP Lisa Woodcox, Disability Network
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Transportation/MI Identification	Megan Lowe, SSISD Audra Parsons, DIFS Cathy Schafer, Parent

Committee Workgroups	Members
Living Arrangements	**Linda Brown, CHN, Co-Lead** **Patrick Kemp, AAoM, Past Co-Lead** **Vickie Armstrong, Gratitude Grove Farm** **Randee Black, JARC** **Yasmina Bouraoui, Developmental Disabilities Council** **Larry Collette, Special Dreams Farms** **Anne Gerard, Homes for Autism** **Lisa Grost, Michigan Department of Health and Human Services (MDHHS)** **Mira Krishnan, HOPE Network** **Elise Lind, Parent** **Joe Loncor, MDCH** **Cathy Pinto, AACORN** **William Schram, Homes for Autism** **Scott Schrumm, Residential Opportunities, Inc.** **Diane Widlak, Angel's Place**

Appendix 2: Transition & Adult Services Subcommittee Members

Stacie Rulison, Michigan Autism Council, Transition & Adult Services Chair
Maureen Ziegler, Transition & Adult Services, Co-Chair

Name/Affiliation	Location
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Barb Byers, Parent	Washtenaw County
Mary Chaliman, MDHHS, Michigan Autism Council	
Lisa Espinoza, Parent	Ionia County
Marlowe Franklin, Parent	Grand Traverse County
Wayne Fuqua, PhD, Western Michigan University, Michigan Autism Council	Kalamazoo County
Scott Gilman, Network 180 Community Mental Health, Michigan Autism Council	Kent County
Brandy Goodwin-Kreisler, Shiawassee Community Mental Health	Shiawassee County
Diane Heinzelman, Char Em ISD, Michigan Autism Council	Charlevoix County
Brooke Ingersoll, PhD, Michigan State University ASD Lab	Ingham County
Katherine Kirby, Department of Insurance and Financial Services (DIFS), State of Michigan, Michigan Autism Council	Ingham County
Lisa Kowalski, Autism Society of Oakland County, Parent	Oakland County
Pamela Lemerand, Occupational Therapist	Washtenaw County
Barb LeRoy, Wayne State University, Developmental Disabilities Institute	Wayne County
Amy Matthews, PhD, Grand Valley State University, Statewide Autism Resources and Training (START), Michigan Autism Council	Kent County
Rhonda McGrath, Parent	Oakland County
George Mellos, Michigan Department of Health and Human Services, Michigan Autism Council	Ingham County
Amy Sanderson, Parent & Eastern Michigan University ACC, Parent	Washtenaw County
Steven Sparks, Kalamazoo Community Mental Health, Kalamazoo CMH	Kalamazoo County
Jane Turner, M.D., Michigan Department of Health and Human Services, Michigan Autism Council	Ingham County
Joanne Winkelman, MDE, Michigan Autism Council	Ingham County
Sarah Winslow, Special Education Administration, Ingham ISD	Ingham County