EIDBI advisory group Meeting minutes Nov. 2, 2018

- I. Message from Alex Bartolic
 - Thank you for all your work to help expand the EIDBI services over the past two years. Highlighted importance of the advisory group. We look forward to your continued participation in the EIDBI advisory group.
 - Presentation by Sheri Stronach on a new proposed EIDBI modality, Early Social Interaction (ESI)
 - Review of statute requirements for adding a modality
 - Combination of developmental and behavioral treatment approaches
 - Individualized treatments goals
 - Ongoing progress measurement
 - Systematic and structured approach
 - Parent is trained to be the primary therapist and is coached by the provider
 - Family-centered approach in the natural environment
 - Capitalizes on activities in the child's daily life to create learning opportunities
 - Makes the expectations predictable and motivating for the child
 - Focused on early intervention
 - Incorporates use of Autism Navigator online training
 - Free, two-hour online course on toddlers and young children with ASD for anyone
 - \circ 30-hour online course is \$625 for providers
 - Ensures child is clear on his or her role in the family routine
 - Evidence to support ESI: first study with 17 children with ASD in 2006
 - Next study had 82 children diagnosed with ASD between 16 months and 20 months of age.
 - Children received individual and group ESI.
 - Both groups showed increased expressive and receptive language skills.
 - Also increased speech and symbolic skills.
 - ESI developed at Florida State in the mid-2000s
 - Also currently doing research on school-age children using the ESI model
 - Also could look at adding modalities to serve older children
 - Ongoing research is also looking into using this modality in combination with tele-health services. No published studies yet
 - Parents reported they support it and that it meets the criteria. They liked that it could be provided via tele-health.
 - Academics and professionals felt that it met the criteria and is a combination of current modalities so why not add it?
 - Professionals liked that it was provided by parents and that services were immediate and could be incorporated with other services as well.
 - Advocates and self-advocates liked that it is provided early. Concerned about the measurable and achievable goals and felt examples could be more concrete. Thought evidence was early in development but does meet criteria. Terminology in state statute could be clarified more.
 - Providers thought it was well-researched modality and should be added. Not a specific certification level for providers beyond the 30-hour online course but could talk about how this fits into the structure of the EIDBI levels of providers.

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- III. Kim Hicks discussed adding variance for level II providers who meet registered behavior technician (RBT) requirement and received feedback:
 - Reviewed process for adding a variance
 - Providers now required to have a bachelor's degree and complete the RBT certification to be a level II provider.
 - DHS proposes to add a variance that they no longer need the bachelor's degree to be a level II provider, as long as they complete the RBT training requirements posted on the Behavior Analysis Certification Board website.
 - Parents thought this would help to address the provider shortage and retain staff.
 - Professionals and academics concerned that this might not increase the provider pool and we should caution against lowering education requirements. Should be minimum number of hours. Work should be current.
 - Professionals were concerned about the level of supervision and were not as clear on requirements since they are outside the board-certified behavior analyst field. Thought the requirement should include hours of experience vs. years.
 - Advocates said the state should lessen the restrictions to increase providers. As long as they keep background checks at current level, then it should be OK to lower the education requirement. Could also develop experience points to replace experience in years or time.
 - Providers thought it would address provider shortage and help to retain staff. This would enable greater promotion. Higher administrative task for training of staff. Should not compromise safety of clients.
- IV. Nicole Berning highlighted the EIDBI advisory group's accomplishments in the past two years:
 - Equivalent graduate coursework defined in policy
 - Medical evaluation of policy
 - ASD portal website redesign
 - Waiver Reimagine project input
 - Legislative input
 - Presentations to increase awareness and education to stakeholders:
 - MN ADDM data on ASD prevalence
 - o Medical cannabis awareness and education
 - o Panels of stakeholders
 - Parent meetings
 - o Tele-health outreach
 - Rights and responsibility documents developed with input
 - Legislation
 - EIDBI legislative amendment to statute 256B.0949 and State Plan passed in 2017
 - Background study legislation to be introduced
 - Provider shortage
 - \circ $\;$ Level II variance approved in the EIDBI State Plan amendment $\;$
 - Level 1 variance moving forward
 - Out-of-state providers moving forward
 - o College/university meet-and-greets held throughout the state
 - Focus for 2019
 - \circ $\;$ Align EIDBI services with SLP, OT and education services
 - Partner with EIDBI Learning Collaborative
 - o Increase providers and increase accessibility of services to greater Minnesota

- V. Closing:
 - Updates on member terms:
 - Some members' terms are ending. DHS will appoint new members, who will attend meetings in 2019. If your term is ending, please reapply on the Secretary of State website for another term. There is also a DSD statement of interest form. Professionals must submit a resume with their applications.
 - For questions about this process, contact DHS at <u>ASD.DSD@state.mn.us</u>
 - Current vacancies:
 - Adult with ASD or related condition
 - Managed-care organization representative
 - Parent/guardian/unpaid primary caregiver (3)
 - Professionals/academics/advocates (7)
 - Next meeting: Feb. 8, 2019, Room CC14, Conference Center A, Minnesota Department of Education, 1500 Highway 36 W., Roseville

Principles to Participate

As a member of the EIDBI Advisory Group, I agree to:

- Respect others
- Attend bimonthly meetings
- Complete assignments on time
- Participate constructively in discussions
- Collaborate in seeking solutions that meet the needs of all parties.

DHS Commitment

As Disability Services Division staff supporting the work of the EIDBI Advisory Group, we will:

- Distribute agendas and supporting documents in advance of advisory group meetings.
- Provide documents in alternate formats upon request.
- Provide context, communicate clearly, and facilitate effectively at advisory group meetings.
- Be available to answer questions and address concerns between meetings.
- If there are assignments between meetings, allow sufficient time to complete the work requested.
- Consider your recommendations in the context of our legal authority and mandates, alignment with the Department of Human Services' strategic direction, and financial feasibility.
- Report back to the advisory group on the status of your recommendations as decisions are made.