

# EIDBI advisory group

## Meeting minutes

**March 16, 2018**

### New member introductions

Introduced new members to advisory group, Julie Edwards and Yusuf Samatar

### Roles of EIDBI advisory group members

#### Introduction

Licensed professionals: Maggie Leshner and Sara Pahl

#### Questions

- What is your role related to ASD and related conditions?
- What are the challenges in your work?
- What recommendations do you have to DHS or others about improving the lives of people with ASD and related conditions?

Sara Pahl and Maggie Leshner shared their role on the advisory group, the challenges they face and recommendations they have for DHS.

They recommended that providers coordinate services across all treatments a child receives.

Challenges are that providers prioritize one type of intervention over another. When that occurs, children will discontinue treatments that have been effective for them (e.g., speech, OT, etc.)

### Medical evaluations

#### 1. Collected feedback on requiring an annual medical evaluation with the CMDE.

##### **Pros:**

- If the medical evaluation is not required, parents won't have the information.
- It's important to identify and rule out medical conditions.
- Evaluation is most important in the early childhood years.
- If there is no pre-evaluation, there is no baseline to compare to in the future.

##### **Cons:**

- Avoid duplicate exams and evaluations
- Multiple evaluations are a barrier for families. It is hard for them to navigate all of the requirements.
- When families have multiple children, all of the requirements are difficult to manage, especially when appointments are available only during business hours.
- Do children benefit from an ongoing recital of their deficits and violation of their desires not to be touched?

##### **Questions/comments/recommendations:**

- What is in the best interests of the children?
- What do the data show? How many comply with the medical evaluations?
- Would it be possible to consolidate exams and evaluations?
- Train medical providers to conduct the medical evaluation
- How do we include professionals who do not practice western medicine?
- We need continually to encourage coordination of services.
- Make sure if changing anything for medical evaluations, it does not affect CMS rules under Early Periodic Screening Treatment and Diagnosis guidelines.

2. Discussed strategies to help families access the evaluation and locate a provider who is trained or equipped to meet the needs of a child with autism or a related condition

### Provider shortage

1. Reviewed recent activities that EIDBI is working on to address provider shortage:
  - Roosevelt High School career day: If you are interested in participating in a future career day, go to <https://www.achievempls.org/>
  - Advisory group meeting at Concordia University: Met to develop bachelor’s degree programming for students to go into the field of autism and related conditions treatments and services.
  - Duluth provider meet and greet: Scheduled for 4:30-7 p.m. April 11 in Education building on UMD campus. Eight providers are attending.
2. Jay O’Neill from Behavioral Dimensions presented a possible variance to Level I providers.
3. Reviewed provider shortage topics that were scored for priority from the November meeting
4. Conducted a small-group exercise.

Advisory group participants worked together to brainstorm provider shortage action steps and identify potential partners who could assist with those steps. Additional followup with EIDBI advisory members will continue throughout the year.

**Strategy 1:** Provide incentives to qualified workers to work in greater Minnesota or with underserved communities

Action step	Who?
Investigate how to fund providers who relocate to an underserved area for loan forgiveness	Legislators
Talk to other professions who have providers in this	DHS staff

program (e.g., medical doctors)	
Consider additional funding to providers/agencies who relocate staff to underserved areas	Legislators
Paid training incentive for people in underserved areas who are interested in the field but cannot afford the travel/expenses	Legislators and DHS staff
Consider grants for agencies who are willing to provide services via telehealth to underserved communities	Legislators and DHS staff

**Strategy 2:** Pass legislation to increase pay rates for workers

Action step	Who?
Establish legislative strategy: Pass licensure standards as prerequisite to rate increases (Research other states' successes)	Legislators
Identify partners, mobilize community (families, providers, counties, DHS). Increase family testimonials, market the services, educate community on the issue (e.g., a person can make more money at Chick-Fil-A)	EIDBI advisory committee
Secure legislative champions (authors, sponsors, etc.) for budget increase	Coalition of supporters (other associations representing various stakeholders, such as ARC, LEND, etc.)

Shepherd legislation through process; pass bill	Coalition of supporters
Get CMS approval	DHS

**Strategy 3:** Engage students, colleges, universities to increase internships and job opportunities. Expand training in degree programs in applied behavior analysis.

**Benefits:** More people will be trained as providers

Action step	Who?
Expand programs beyond just ABA to include other EIDBI treatment modalities and services, e.g., Early Denver Start Model for toddlers, etc.	Other providers
Financial incentives: Identify funding sources for the universities for programs. Focus on smaller colleges.	DHS
Disseminate in tribal areas. Grants are available for work in this area	Tribal policy, tribal nations, tribal reps

**Strategy 4:** Increase training for caregivers so they can implement interventions

Action step	Who?
Schools need education in providing internships and practicums related to autism services.	School administrators
Online resources with videos to watch for parents. Autism Navigator provides online videos for training. What to look for	Requires trained professional to implement with parents

and how to implement strategies	
Live chat support, including billing support	DHS staff
Online resource library for parents	All

**Strategy 5:** Increase trainings to community members and other providers

Action step	Who?
Coordinate with other policy areas at DHS	DHS staff
Add ASD strategy online trainings to other trainings that DHS requires of these providers	DHS staff and ASD online users
Guest lectures at trainings (to help increase provider capacity of other professionals). Also, web-based training by guest lecturers	Professionals
Train-the-trainer model	State agencies to community members
Presence at other professional conferences	Providers, colleges specializing in the field and DHS staff
Presence at community events and live trainings	Colleges, state agencies

[Equivalent graduate coursework](#)

Ran out of time to review. We will review this topic at the next advisory group meeting in May.

[Closing](#)

Next advisory group meeting: 10 a.m. to noon, Friday, May 11, Department of Human Services, Elmer L. Andersen Building, Room 2370, 540 Cedar Ave., St. Paul, MN 55101. No visitor badge required.