

New Hampshire
Council on
Autism Spectrum Disorders

Annual Report
April 1, 2009

The New Hampshire Council on Autism Spectrum Disorder

Michelle Jarvis, *Chair*

Kirsten Murphy, *Administrative Director*

Robin Abbott	Paul Leather
Brian Balke	Maryellen MacKay
Teresa Bolick	Debra McQuade
MaryAnn Cooney	Jose Montero
Matthew Ertas	Kathleen Murphy
Amy Frechette	Erik Riera
Mary Heath	Mary Schuh
Brian Huckins	Patty Willis

April 1, 2009

Governor John H. Lynch
State House
25 Capitol Street
Concord, NH 03301

Dear Governor Lynch,

We are pleased to present the first annual report of the New Hampshire Council on Autism Spectrum Disorders, commonly known as ASD.

You will recall that this Council was established by the New Hampshire legislature last year in order to provide leadership in promoting comprehensive and quality education, health care, and services for individuals with autism spectrum disorders and their families. The Council's work is guided by the findings, recommendations and principles set out by the NH Commission on ASD, which were published in May, 2008.

Autism and related disabilities have gained considerable media attention in recent years due to the apparent increase in the incidence of ASD, which affects an individual's ability to communicate and to interact socially. ASD is increasingly understood as a neurobiological condition for which there are medically necessary, evidence-based treatments available. Early and intensive intervention is crucial to improving the lives of those affected and to lowering societal costs associated with ASD.

The organizational structure adopted by the Council has drawn in over 75 professionals, parents, and self-advocates who are volunteering their time and talent to assist us in developing action plans for each of the Commission's 43 recommendations. It is an honor and a pleasure to work with such a diverse and committed group of people.

Once the legislature has adjourned, we would welcome an opportunity to meet with you to discuss this report and the Council's plans for the coming year.

Yours Sincerely

Michelle Jarvis

Michelle Jarvis
Chair



Kirsten Murphy
Administrative Director

SCOPE AND PURPOSE OF THIS REPORT

Pursuant to RSA 171-A: 32, section II (h), the New Hampshire Council on Autism Spectrum Disorders (hereafter, “the Council”) is required, beginning April 1, 2009, to make an annual report to the Governor, the Commissioners of the Department of Health and Human Services and the Department of Education, and specified members of the NH House of Representatives and the NH Senate.

As the first of such annual reports, this review focuses on the organizational structure and planning process set forth by the Council during the four meetings held from September 19, 2008 to March 6, 2009. This document describes the accomplishments of the Council during this short period and its recommendations and priorities for fiscal year 2010 (July 1, 2009-June 30, 2010).

BACKGROUND

The New Hampshire Council on Autism Spectrum Disorders was created by the state legislature in response to the public health challenges posed to multiple public systems by an increase in the incidence of this neurobiological disability. Autism Spectrum Disorder (commonly referred to as “ASD”) is now the fastest growing developmental disability, occurring in 1 of every 150 children according to the Centers for Disease Control. At this rate, we can expect 100 New Hampshire children born each year to eventually have a diagnosis on the autism spectrum. Though ASD varies both in how it is manifest and in the severity of symptoms, all subtypes share challenges in both communication and social interaction. ASD is associated with significant stress on family systems, a wide range of co-occurring conditions -- including depression, seizure disorders, and gastrointestinal disorders -- and long term societal cost. For a single individual, the lifetime cost associated with autism has been estimated to be \$3.2 million dollars.¹

In May 2008, the New Hampshire Commission on Autism Spectrum Disorders published its findings and recommendations. Recognizing the continuing need to bring representatives from many state agencies and stakeholder groups together in addressing the service needs of this population, the Commission recommended establishing an advisory council dedicated to promoting comprehensive and quality education, health care, and services for individuals with ASD. With passage of HB 1634, the New Hampshire legislature established this leadership group.

The Commission’s 2008 report placed strong emphasis on improving the infrastructure that supports service delivery to those affected by ASD and their families. “If New Hampshire is to successfully address the challenges of ASD, it is clear that we must do far more than promote exemplary projects,” the Commission wrote. “A systematic review and redirection of the existing infrastructure will be necessary if we are to deliver effective treatment and supports throughout our community clinics, schools, area agencies, vocational centers, and other front line services.”²

New Hampshire has been well served by the legislature’s decision to begin the process of developing a state plan for ASD as early as 2007 with the establishment of the Commission and now an ongoing Council. Despite these difficult economic times, there are, in fact, emerging opportunities to invest in the human capital, technological supports, and knowledge base that inform the direct support of individuals with ASD. Although only recently appointed, the Council is moving ahead quickly to take best advantage of these changes in the funding environment at both the state and federal level.

¹ Ganz, Michael L. “The Lifetime Distribution of the Incremental Societal Costs of Autism.” Archives of Pediatrics & Adolescent Medicine 161.1 (2007): 343-349.

² New Hampshire Commission on Autism Spectrum Disorders. “Findings and Recommendations” (2008), p. 16.

ACCOMPLISHMENTS OF THE COUNCIL

At its November 4, 2008 meeting, the Council adopted as its primary work, the 41 Recommendations and 14 Guiding Principles of the New Hampshire Commission on Autism Spectrum Disorders, published May 2008. (For Guiding Principals, see Attachment IV). In order to accomplish this broad agenda, the following first steps have been completed:

- * Established an organizational structure that includes an active Coordinating Committee comprised of the chairs of each of the Council’s work groups. This group meets monthly to ensure coordination within and among work groups.
- * Established eight work groups that meet monthly to provide the Council with research and programmatic recommendations (organization chart, attachment IV).

WORK GROUP	CHAIR(S)
HUMAN SERVICES	<i>Brian Huckins Nancy Rollins</i>
EDUCATION	<i>Mary Schuh Santina Thibedeau</i>
EARLY SCREENING & DIAGNOSIS	<i>Liz Collins Lorene Reagan</i>
INDEPENDENT LIVING & EMPLOYMENT	<i>Amy Frechette Sheila Lambert</i>
PUBLIC AWARENESS	<i>Michelle Jarvis</i>
SAFETY	<i>Michelle Jarvis Elizabeth Webster</i>
DATA COLLECTION	<i>Matthew Ertas</i>
INSURANCE ISSUES	<i>Kirsten Murphy</i>

- * Raised financial support to hire a part time Administrative Director for 16 hours/week for 9 months or until September 30, 2009 (attachment III).
- * Established an independent website to enhance public access to the proceedings of the Council and its work groups in compliance with NH’s Public Right to Know Law (RSA 91-A). See www.nhcouncilonASD.org.
- * Reviewed Council expectations and the requirements of NH’s Public Right to Know Law (RSA 91-A) with all work groups.
- * In collaboration with its eight work groups, developed implementation plans for 30 of the 41 recommendations set out by the NH Commission on ASD.

OTHER COUNCIL ACTIONS

- * Elected Michelle Jarvis, President of the Autism Society of New Hampshire, as Council Chair; and Brian Balke, representative of the New Hampshire Association of Special Education Administrators, as Council Vice Chair, November 7, 2008.
- * Accepted a proposal by Kirsten Murphy to provide leadership and administrative support to the Council on a part-time basis, November 7, 2008. Ms. Murphy was a member of the NH Commission on ASD. She is a parent of two children on the autism spectrum, a member of the NH Council on Developmental Disabilities, and the Board of Directors of PathWays of the River Valley, developmental services area agency for Region 2.
- * Endorsed HB 569 requiring insurance coverage for diagnosis and treatment of autism spectrum disorders, and authorized Chair Michelle Jarvis to testify in support of the bill, March 6, 2009.

COUNCIL RECOMMENDATIONS FOR FY '10

At their meeting on March 6, 2009, the Council adopted the following recommendations:

- * That subsequent annual reports, as required by RSA 171-A:32, section II (h), be aligned with the State of New Hampshire's fiscal year in order to take advantage of the natural planning cycle of participating agencies.
- * That the Council consider as its highest funding priority the need to secure a full time Administrative Director as recommended by the NH Commission on Autism Spectrum Disorders and seek grants accordingly, as per RSA 171-A:32, section II (e),
- * That the Council use its website to develop a single portal to a comprehensive information base regarding local, state and national resources of interest to New Hampshire families and individuals affected by ASD, as per RSA 171-A:32, section II (f).
- * That the Council seek funding through federal and other sources in order to assist demonstration projects directed at enhancing one or more components of NH's infrastructure for the delivery of services and supports to individuals with ASD and their families, as per RSA 171-A:32, section II (e).

WORK GROUP PRIORITIES FOR FY '10

Each work group was asked to develop action plans based on the Commission recommendations assigned to them. Each group has met at least three times and their completed work plans are attached. These plans should be considered “snapshots” of each group’s current thinking; we expect groups to adjust their action steps in response to changing circumstances.

At the March 6, 2009 Coordinating Committee meeting, the work group Chairs outlined their group’s priorities for FY '10 as follows:

<p>COORDINATING COUNCIL</p>	<ul style="list-style-type: none"> ▪ Seek funds to support a full time Executive Director to support the work of the Council. ▪ Encourage and assist regional leadership in developing autism services collaboratives.
<p>HEALTH AND HUMAN SERVICES</p>	<ul style="list-style-type: none"> ▪ Advocate for funds to support individuals on the NH developmental services wait list, in compliance with SB 138. ▪ Advocate for an increased number of Children’s In Home Support Waivers and an increase in the Federal Medicaid Part C funds that are made available through Early Supports and Services Autism Proposal Program.
<p>EDUCATION</p>	<ul style="list-style-type: none"> ▪ Identify and seek federal personnel preparation grants. ▪ Enhance standards and training for paraprofessionals working with individuals with ASD. ▪ Work with NH’s community college system to enhance and support its human services degree program.
<p>EARLY SCREENING AND DIAGNOSIS</p>	<ul style="list-style-type: none"> ▪ Complete two statewide trainings for healthcare providers regarding: The American Academy of Pediatrics Guidelines for the screening, surveillance and treatment of ASD; the Medical Home model as it applies to children with ASD; and the requirements of the NH Registry for Autism Spectrum Disorders. ▪ Compile a resource list for use by staff at the five developmental clinics supported by the Bureau of Special Medical Services. ▪ Apply for grant funds as appropriate.
<p>INDEPENDENT LIVING AND EMPLOYMENT</p>	<ul style="list-style-type: none"> ▪ Assist the NH Job Corps initiative of the Council on Economic Development to develop opportunities for the ASD community. ▪ Identify and/or develop curricula, training materials and other supports specific to the needs of individuals with ASD in the work place. ▪ Develop promotional materials for potential employers specific to ASD. ▪ Develop curricula, training materials and other supports specific to the needs of individuals with ASD in post-secondary education.

<p>PUBLIC AWARENESS</p>	<ul style="list-style-type: none"> ▪ Apply for a grant through the Endowment for Health and embark on a statewide awareness initiative.
<p>SAFETY</p>	<ul style="list-style-type: none"> ▪ Pilot the first ASD training at the NH Police Academy, April 2009. ▪ Develop curricula and materials for training fire fighters and emergency medical technicians about ASD. ▪ Continue outreach to local municipalities to provide safety registration opportunities for families. ▪ Develop comprehensive tools to convey safety awareness to families supporting an individual with ASD.
<p>DATA COLLECTION</p>	<ul style="list-style-type: none"> ▪ Complete review of current state data sources regarding ASD. ▪ Work with the area agency system to ensure commitment re: collecting ASD data consistently; set up a process to access data from the area agencies. ▪ Develop a voluntary autism registry to capture individuals who had a diagnosis of autism prior to November 2008 and to enhance understanding of the experiences, needs, and preferences of NH citizens affected by ASD.
<p>INSURANCE</p>	<ul style="list-style-type: none"> ▪ In collaboration with the Insurance Department, elected officials, and industry representatives, develop a comprehensive understanding of the extent of private insurance coverage, the impact of federal and state parity law on coverage, the gaps in coverage and the cost and benefits associated with providing additional coverage. ▪ Develop a similar understanding for publicly funded insurance (New Hampshire Healthy Kids). ▪ Develop training and guidelines for consumers, area agencies, and vendors to insure that benefits are used to the maximum extent possible.

CHARGE TO THE NH COUNCIL ON AUTISM SPECTRUM DISORDERS

RSA 171-A:32, section II (a-h), The council shall:

- (a) Provide leadership on training, policy, research, and coordination of supports and services for individuals and their families.
- (b) Provide information to families and individuals with autism spectrum disorder about evidenced-based and promising practices for community-based education, support, and treatment.
- (c) Collaborate with schools and other service systems to identify exemplary supports and services and promote successful practices throughout New Hampshire.
- (d) Provide mediation, when needed, to ensure that individuals with autism spectrum disorders receive appropriate supports and services.
- (e) Increase resources for individuals with autism spectrum disorders and their families by accessing federal and state grants and pursuing development opportunities through foundations, corporations, and planned giving.
- (f) Serve as an information clearinghouse for individuals, families, and providers seeking diagnosticians, behavioral specialists, speech pathologists, occupational therapists, psychologists, and others who have expertise in working with individuals with autism spectrum disorders.
- (g) Encourage the establishment of regional collaboratives with representation from educational, health care, and community service providers to ensure that individuals with autism spectrum disorders and their families receive necessary services.
- (h) Make an annual report beginning on April 1, 2009 to the governor, the speaker of the house of representatives, the president of the senate, the commissioners of the department of health and human services and department of education, the members of the house committees on education, health, human services and elderly affairs, and finance, and the members of the senate committees on education, health and human services, and finance.

MEMBERSHIP OF THE NEW HAMPSHIRE COUNCIL
ON AUTISM SPECTRUM DISORDERS

COUNCIL LEADERSHIP

MICHELLE JARVIS, CHAIR *Representing the Autism Society of New Hampshire*
BRIAN BALKE, VICE-CHAIR *Representing the New Hampshire Association of
Special Education Administrators*
KIRSTEN MURPHY, ADMINISTRATIVE DIRECTOR (*EX OFFICIO*)

COUNCIL MEMBERS

ROBIN ABBOTT *Representing the Community Support Network, Inc.*
TERESA BOLICK, PHD *Representing the NH Psychological Association*
BRIAN HUCKINS *Parent, appointed by Governor John Lynch*
MARY ANNE COONEY *Deputy Commissioner
Department of Health & Human Services*
MATTHEW ERTAS *Administrator, Bureau of Developmental Services*
AMY FRECHETTE, A.S. *Self Advocate, Appointed by Governor John Lynch*
MARY HEATH *Deputy Commissioner, Department of Education*
PAUL LEATHER *Director, Division of Career Technology & Adult Learning
Department of Education*
MARIELLEN MACKAY *Representing the NH Council
on Developmental Disabilities*
DEBRA MCQUADE, MD, PHD *Representing the New Hampshire Medical Society*
JOSE MONTERO, MD *Director, Division of Public Health Services*
KATHLEEN MURPHY *Director, Division of Instruction
Department of Education*
ERIK RIERA *Administrator, Bureau of Behavioral Health*
MARY SCHUH, PHD *Representing the New Hampshire Institute on Disability
University of New Hampshire*
PATTY WILLIS *Appointed by Governor John Lynch*

THE NEW HAMPSHIRE COUNCIL ON ASD
FINANCIAL REPORT, APRIL 1, 2008

BALANCE SHEET

ASSETS (PLEDGES)		LIABILITIES EXPENSES	BALANCE
Bureau of Developmental Services FY '09	\$ 6,000		
Bureau of Developmental Services FY '10	\$ 6,000		\$12,000
Department of Education FY '09	\$ 2,400		
Department of Education FY '10	\$ 2,400		\$16,800
NH Council on Developmental Disabilities	\$ 5,000		\$21,800
January 64 hours & mileage	(\$2,200)		\$19,600
February 64 hours & mileage	(\$2,200)		\$17,400
March 64 hours & mileage	(\$2,200)		\$15,200

*At the current rate, the Council can sustain support for approximately
7 more months, or until Sept. 30, 2009.*

Guiding Principles for the Development and Delivery of Supports and Services for Individuals with Autism Spectrum Disorder

- •
- * Do no harm.
- * Listen to individuals with ASD and their families. Provide support, including assistive technology, to enable individuals with ASD to communicate their needs and preferences. Support individuals and families to participate in decisions concerning education and community supports and services.
- * Provide identification and intervention as early as possible for children with ASD. Investment in early intensive treatment results in the best clinical outcomes and significantly reduces the lifetime cost of care associated with ASD.
- * Recognize the dynamic and changing needs of individuals and families and assure that a seamless coordination of services and resources occurs across the lifespan.
- * Assure that comprehensive and coordinated services are available to individuals and their families throughout the state.
- * Assure that all individuals and families, including those with diverse cultural back-grounds, receive information and supports in accessible formats.
- * Provide support to families in order for their children to live safely at home and in their communities.
- * Provide resources to schools, communities, and families to ensure inclusive and meaningful participation in all environments.
- * Adapt physical and social environments in school, service, and community settings to meet the needs of individuals with ASD and their families.
- * Assure that all providers - medical, education, and human services - systematically assess progress and modify services and supports as needed to achieve individual and family goals.
- * Provide quality pre-service and in-service professional development, mentorship, and ongoing consultation on the best practices for treating, educating, and supporting individuals with ASD.
- * Support a workforce capable of meeting the needs of individuals with ASD and their families.
- * Maintain high expectations for individuals with ASD and provide the education, supports, services, and opportunities necessary to achieve a meaningful life, including employment.

Committee Structure for:
The NH Council on Autism
Spectrum Disorders

**NH Council
on ASD**

**17 Members as per HB 1634
Meets Bi-monthly**

**Coordinating
Committee**

**12 Members
Meets Monthly
5 recommendations**

**3 Recommendations
Cut Across all Work Groups**

Education
*10
Recommendations*

**Human
Services**
*6
Recommendations*

**Screening and
Diagnosis**
*2
Recommendations*

**Independent
Living/
Employment**
*4
Recommendations*

**Public
Awareness**
*2
Recommendations*

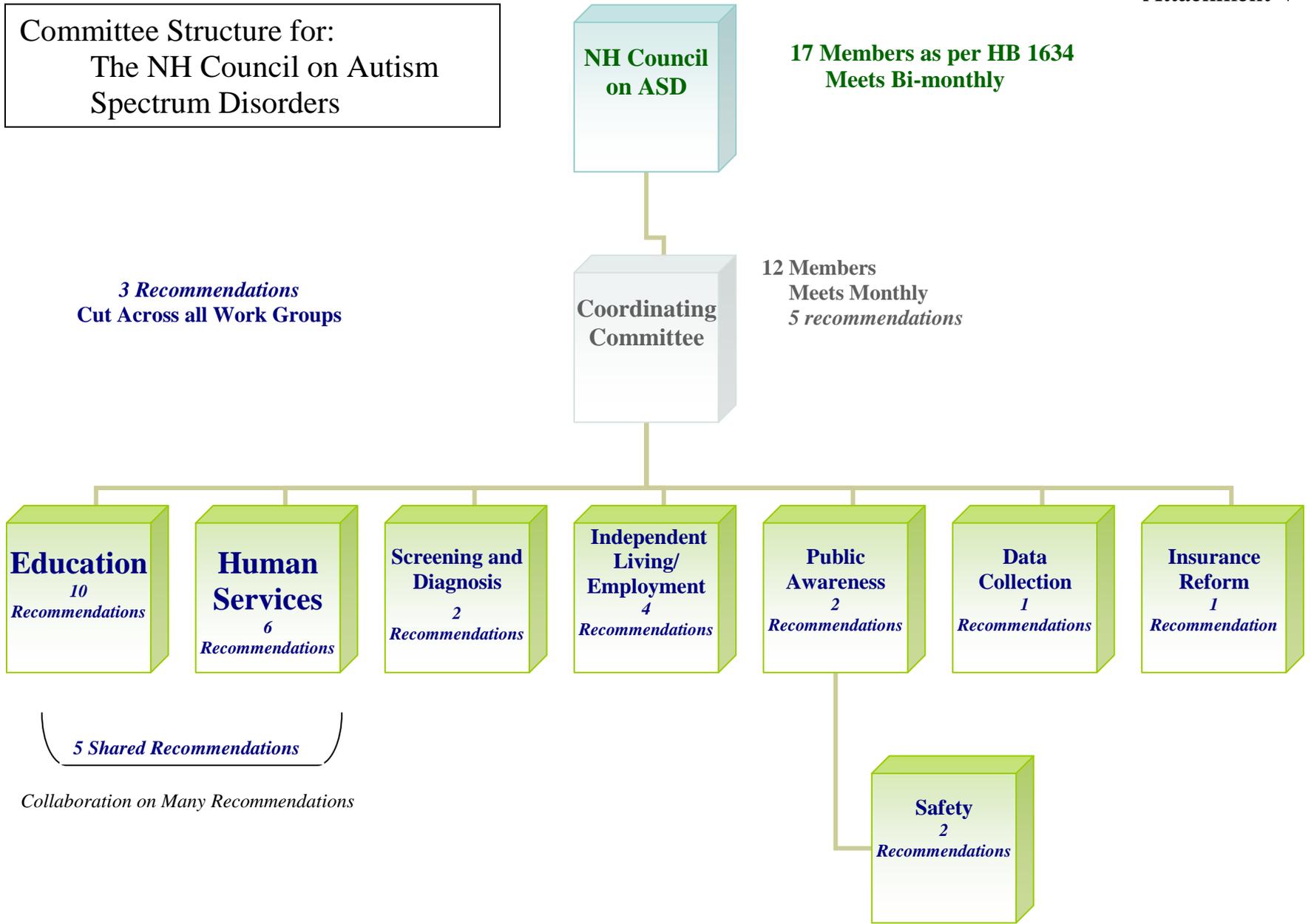
**Data
Collection**
*1
Recommendations*

**Insurance
Reform**
*1
Recommendation*

5 Shared Recommendations

Collaboration on Many Recommendations

Safety
*2
Recommendations*



Coordinating Committee: Recommendation I(A)2 and VI(C)

Recommended Priority: High

In collaboration with the New Hampshire Department of Health and Human Services (DHHS) and other stakeholders, the Council will identify and secure funding for an Executive Director; this will be a full-time position within the Bureau of Developmental Services in DHHS. Under the joint direction of the Bureau of Developmental Services and the Council on ASD, the Executive Director will provide leadership in pursuing the Commission recommendations set out in this report.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
1) Explore re-applying for federal grant under Combating Autism Act	Grant drafted for '08 submission; team that participated in '08 grant.	Deploy time of p/t Admin. Dir	Spring 2009	Revised grant proposal as needed.
2) Develop job description for ED as a part-time position; revise annually.	See job descriptions from similar positions in DHHS.	Clear guidelines from Council	March '09	Written job description
3) Solicit funding from all departments to fund part position for first year of funding (Jan. 1, 2009-Dec. 31, 2009)	\$14,500	\$15,500	ASAP	.4 FTE Adm. Support
4) Prepare & submit grant to the Endowment for Health and others foundations.	As 1 above	Deploy time of p/t Admin. Dir \$52,447 @ current rate of \$33.62/hour	May '09	.75 FTE by 9/'09
5) Develop plan for sustaining position at 1 FTE.	Technical assistance from Endowment for Health and/or NH Charitable Fund	\$70,000 annually, all inclusive	1-3 year	1 FTE by 1/1/10

Goal Restated: *A full time Executive Director by Jan. 1, 2010 at a professional pay grade, with clear guidelines and supervisory structure endorsed by Council; and a plan in place to sustain this position by Year 3.*

Outcomes for Families & Individuals with ASD: *The ASD population will have an effective and well coordinate Council able to implement the recommendation of the State Plan. There will be a central and highly visible office/ director to provide leadership for families and individual with ASD seeking systems change.*

Coordinating Committee: Recommendation I(A)3

Recommended Priority: High

*The New Hampshire Council on ASD will ensure that both the state **Senate and the House of Representatives** are well informed about the public health issues surrounding ASD and the initiatives of the Council, as per HB 1634.*

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
1) Prepare Annual Report 2009	Work Group templates; Administrative Director	\$28,000 for .4 FTE for Administrative Director.	April '09	\$13,500 raised as of 2/09
2) Develop Council policy for public postings; review and revise annually.			ASAP	Written policy adopted by vote of Council.
3) Develop website for the Council.	IOD has excellent design capabilities.	Technical assistance.	Summer '09	Website & policy for its maintenance.
4) Revise timeline for annual reports.			Request in April '09	Annual Report cycle will establish summer release date.
5) Develop council policy regarding support for specific legislation. Implement as needed.	Guidelines used by DD Council, DOE Advisory Board & others	Legal expertise	Ongoing	Written policy adopted by vote of Council.
6) Collaborate with family support councils and legislative liaisons in providing information & advocacy for specific bills, as per directive of the Council.	NH has a strong family support network and well-attended annual conference.	Increase Administrative Director's time to .75 FTE	Ongoing	Active outreach by Administrative Director & Council members.

Outcomes for Families & Individuals with ASD: *Individuals and families will benefit politically and materially from a state legislature that sees the work of the NH Council on ASD as valuable, fiscally prudent, and worthy of financial support. Our constituent population will benefit from a legislature that sees individuals with ASD – and those with developmental disabilities more broadly – as contributing in meaningful ways to NH's local communities and its economy.*

Coordinating Committee: Recommendation I(B)2

Recommended Priority: High & Difficult

*The New Hampshire Council on Autism Spectrum Disorders will identify and engage **local leaders** in a collaborative effort to create a statewide network of **regional autism collaboratives**. The regional collaboratives will include representation from schools, area agencies, community mental health centers, early supports and services, vocational rehabilitation services, health care providers, and other relevant public and private agencies. Regional collaboratives will serve as planning groups for services within their catchment areas and as points of contact between the Council and front-line service providers. As part of a statewide network, these collaboratives will be able to share information, maximize training and professional development opportunities, and coordinate efforts across regions.*

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
1) Map emergent autism collaboratives in NH; present to Council.	Coordinating Council & Administrative Director	Dedicated from the Adm. Director	Summer '09	
2) Build technical support for emerging collaboratives into grant proposals and/or existing programs.	IOD, UNH, CHaD, DHPA, etc. LEND funding from the IOD	“	Ongoing	
3) Administrative Director to write business plan for roll out of model over 3 year period.		“	Fall '09	
4) Seek grant funding to seed regional hubs.	Local foundations & businesses	Funding for technical support and leadership training	2010 forward or earlier depending upon funding opportunities	
5) Create opportunities for regional hubs to exchange information and engage in continuous quality improvements.	The Council		By 2011	

Outcomes for Families & Individuals with ASD: *Families and individuals will be directed to a local and easily accessible point of entry to services, supports and information. Providers will be more knowledgeable about local resources and therefore better able to support individuals and families.*

Note: *This goal necessarily precedes the creation of effective wrap around team, as per Recommendation I(3)b*

Coordinating Committee: Recommendation I(B)3

Recommended Priority: To be accomplished after I(B)2

The Department of Education, the Department of Health and Human Services, and the New Hampshire Council on Autism Spectrum Disorders will create regional multi-disciplinary teams to ensure that individuals with ASD and their families receive needed treatment and supports through a regional wraparound initiative.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
1) Council work group(s) to research best practice models.	IOD & existing wrap around models piloted by schools and/or community mental health. Research done by committee(s) under HB 661. Medical homes	Dedicate time of Adm. Dir.	2011 forward	Recommendation(s) for Council to consider/endorse.
2) Council will develop a core of common practices, principles and/or procedures that will apply to all regional wrap around teams.				
3) Council and Adm. Director will promote and support best practice models and common approach as per #2.	As per region	Grant funding. Training opportunities for regional hubs.	2011-15	All regional collaboratives will have a standing “wrap around team” that utilizes best practices to support children with ASD who are clinically complex and/or in transition. Adult planning may also be possible.
4) Regional hubs will develop a plan to create standing wrap around team for case conference on an individual basis.		As per regional plan.		
5) Council to develop plan for educating parents about the value of wrap around teams and person-centered planning – along with information about how to access this option, especially during times of transition.		Autism Society of NH, NH Medical Society DOE/PIC—NH Connects		

Note: Steps 3-5 are envisioned as a multi-year plan for “rollout” that begins with pilot project(s); utilizes continuous quality monitoring; and reaches all regions of NH, ideally by 2015.

Outcomes for Families & Individuals with ASD: *Individuals and families will have a means by which to centralize planning during times of transition and/or crisis. Other Outcomes:* The area agency and community mental health systems will be supported in providing an enhanced care option for clinically complex individuals; duplication of efforts will be avoided. Participating clinicians will have an increased understanding of complementary systems of care and the evidence-based interventions utilized by these systems. Public schools will have a mechanism by which to respond pro-actively to the needs of clinically complex children and youth.

Coordinating Committee: Recommendation V(A)2

Recommended Priority: High

The Department of Education and Department of Health and Human Services will identify resources to develop, deliver, and market pre-service and in-service professional development opportunities that promote nationally recognized evidence-based and other best practices for treatment and support for individuals with autism spectrum disorders. This training will be available to a wide constituency including: educators, service providers, therapists, physicians, public guardians, educational advocates, case managers, and individuals with ASD and their families.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
<p>PROJECT 1: Funding for Additional Training</p> <ol style="list-style-type: none"> 1. Consult all work groups RE: their funding needs. Provide preliminary grant research. 2. Council to review funding needs and to provide guidance RE: priorities, timeline and approach to potential sources of funding. 3. Administrative Director and others to draft proposals to fund training. 	<p>Work done by stakeholder committees under SB 138 and HB 661. Curricula by ARRO & IOD; curricula pending from College of Direct Support.</p> <p>LEND funding</p> <p>Expertise at IOD and others</p>	<p>Templates provided by work groups</p> <p>To be determined</p>	<p>May '09</p> <p>Summer '09 forward</p> <p>Ongoing</p>	<p>Coordinated approach to applications for funding projects.</p> <p>Preserve and strengthen collaboration among stakeholder groups.</p>
<p>PROJECT 2 Mapping Existing Training</p> <ol style="list-style-type: none"> 1. Coordinating Committee to work with Adm. Dir & stakeholders to develop resource "map" of existing and emerging trainings, curricula, and potential career paths. 2. Coordinating Committee to work with Autism Society & others in marketing training opportunities 	<p>Administrative Director. Technical and design assistance from IOD. NH's career ladders for Early Childhood providers to serve as model.</p> <p>Public Awareness campaign by Autism Society; Council Website.</p>	<p>-----</p> <p>----</p>	<p>Sept '09</p> <p>Ongoing</p>	<p>Published career guide</p> <p>Marketing network. Measure increase in attendance/enrollment</p>

<p>PROJECT 3 Enhanced On-line Learning</p> <p>1. Coordinating Committee to work with BDS and area agencies RE: online learning opportunities</p>	<p>Limited access to on-line learning established through community colleges. SERESC & other training sites</p>	<p>To be determined</p>	<p>2010 forward</p>	
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Outcomes for Families & Individuals with ASD: *Family members will have easily accessible training opportunities. Individuals and families will have well trained providers who are familiar with both established and emerging best practices, as well as an understanding of the impact of ASD upon family systems and an appreciation for the unique perspective and talents of those with ASD.*

Education: Recommendation 1(V(A)5)

Recommended Priority: 1 (easy and urgent)

New Hampshire’s institutions of higher education and the Department of Education’s Bureau of Credentialing will offer scholarships, loan forgiveness, and opportunities for alternative certification as incentives to encourage students in undergraduate and post graduate programs to pursue careers in the field of ASD in NH.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
Map existing resources for scholarships & loan forgiveness in NH	<p>UNH offers part and full-time scholarships for undergraduates and graduate students who are in a teacher preparation program and who are interested in ASD</p> <p>Antioch offers a small scholarship which Antioch funds for up to six students who are enrolled in the ASD</p> <p>Springfield College offers scholarships for individual in Human Services</p> <p>Other models: UNH teacher preparation for intellectually impaired (no cost to the individual); UMass teacher preparation for Blind and Visually (at little cost to the individual).</p>		Spring 2009	Resource map
Explore the “why” behind the critical shortage of certified special education teachers – is funding the issue or are there other drivers?		Access to administrators and educators for survey, focus group, or interview	Fall 2009	Report to Council
Consider grant to fund scholarships for both undergraduate and graduate students who will work in field of ASD	NH Institutions of Higher Education – possible joint application	Shared URL for announcements	Fall 2009	Funds for students in targeted fields.

Consider a recruitment campaign for individuals interested in teacher preparations, OT, school psychologists, SLP, human services	Many school districts hold job fairs (eg. Londonderry, Derry, Nashua, Hudson, Timberlane); Bureau of Credentialing attends to provide information.	Central point of access & organization of campaign	<i>To be determined</i>	On-line and other marketing materials making career path more legible
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* Of note: The Bureau of Credentialing is not in a position to offer scholarships, loan forgiveness or incentives.

Outcomes for Families & Individuals with ASD: *Individuals and families will have access to well trained professionals in all relevant fields; public funds will be put to the most efficient use.*

Education: Recommendation: 2 (V(A)10)

Recommended Priority: 1 (easy and urgent)

The NH Community College System will develop and promote a certification program for paraprofessionals working in schools and direct support professionals working in community-based services with individuals with ASD.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
<p>The NH Community College System will offer a certificate for individuals who are interested in working in the school system or community based programs with individuals with ASD.</p> <p>Assist Director of Certificate program, Gail Hall, in advocating for/developing Associate of Science in Early Intervention</p>	<p>NH Technical Institute (Concord) offers a certificate program for an Autism Early Intervention Specialist, with credits transferable to Associate degree in Early Childhood</p>	<p>As per Gail Hall, meeting with NH Council on ASD to request endorsement and data.</p>	<p>Beginning Spring 2010</p>	<p>Career path for advancement in Early Intervention that can include certification in ASD.</p>

Outcomes for Families & Individuals with ASD: *Children with ASD and their families will benefit from having a more stable and well trained work force providing one-on-one support in home, community and school settings.*

Education: Recommendation: 3 (V(A)13)

Recommended Priority: 1 (easy and urgent)

The Department of Education will revise its Paraprofessional Certification program to include information on best practices for supporting students with ASD

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
<p>Establish subcommittee to review implications for current certification program for paraprofessionals, including:</p> <ul style="list-style-type: none"> a) potential curricula and competencies b) venue(s) by which to make training in these competencies such as summer conference and/or technological enhancement of existing training c) Include perspective/voice of consumers, as per recommendation V(A)4 <p>A subcommittee will explore the use of technical/video conferencing for aids working with students with ASD.</p> <p>Consider providing professional development in ASD for paraprofessionals at the NH-NEA august academy.</p>	<p>Institute on Disability, Teresa Bolick, PhD (previously developed curricula).</p> <p>SERESC for technology</p> <p>-----</p> <p>Curriculum for paraprofessional training</p>	<p>Funding if technology supports are pursued</p> <p>-----</p> <p>Commitment to cover tuition costs for paraprofessionals</p>	<p>March 2009</p> <p>3/13/09 meeting w/ NHASEA for feedback</p> <p>August, 2009</p>	<p><i>To be determined by stakeholder input and subcommittee recommendations</i></p>

Outcomes for Families & Individuals with ASD: *Children with ASD who receive special education supports will benefit from having a more stable and well trained work force providing one-on-one assistance in public school settings and modeling best practices to the wider school community.*

Human Services: Recommendation VI(B)1

Recommended Priority: Low to High

The Department of Health and Human Services, Bureau of Developmental Services will request or identify additional funds to provide intensive autism treatment for children birth through age three.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
BDS has included additional resources in budgets for 2010 and 2011. Advocacy and education regarding the fact that Autism proposal funds alone are not sufficient to cover the recommended number of hours; consider insurance and alternative delivery of service models to reach the recommended minimum of 25 hours / week	Medicaid Part C funds Demonstration project by Gateways Community Services	\$300,000	Budget negotiations to determine next steps Ongoing	Pending

Outcomes for Families & Individuals with ASD: *Additional funds will be available to provide intensive autism treatment for children birth through age three; Autism Proposals fund approximately 10 hours/week.*

Human Services: Recommendation VI (A)1

Recommended Priority: Medium

Through the Department of Health and Human Services, Medicaid eligibility under HC-CSD (Katie Beckett) for children with ASD will be brought into parity with other neurologically based medical conditions.

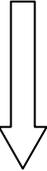
Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
Review RSA and 171	RSA and 171	N/A	1/7/09	Completed
Consult Medicaid Determination Unit	Mickie Grimes, Sree Katragadda		2/4/09	Completed
Determine if legislative action needed	-----		-----	Pending
Develop wording for new policy or legislation	Medicaid personnel; attorney for Bureau of Developmental Services		Summer 2009	Pending

Outcomes for Families & Individuals with ASD: *Medicaid eligibility under HC-CSD (Katie Beckett) for children with ASD will be brought into parity with other neurologically based medical conditions.*

Human Services: Recommendation V(A)6

Recommended Priority: Medium

The New Hampshire Board of Allied Health will amend professional certification requirements to include knowledge of best practices for supporting individuals with autism spectrum disorders.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
1. Invite Board of Allied Health representative to February meeting	Board of Allied Health		2/4/09	Completed: Board of Allied Health recommends no changes to certification requirement.
2. Review current certification requirement; consider recommendation of Board of Allied Health.			Spring 2009	Recommendation(s)
3. Consider next steps, including ways to make current licensing requirements more transparent to consumers; and whether competencies in ASD might be promoted outside of licensing requirements..			Spring 2009	

Outcomes for Families & Individuals with ASD: *Professional certification requirements will include knowledge of best practices for supporting individuals with autism spectrum disorders.*

Human Services: Recommendation VI(A)11

Recommended Priority: Low to High

The Department of Health and Human Services will increase the Medicaid reimbursement rate for paraprofessionals and direct service professionals trained in supporting individuals with autism spectrum disorders.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
<p>Bureau of Developmental Services has included additional money to increase direct support staff hourly rates in their proposed budget.</p> <p>Provide ongoing education and advocacy regarding this issue</p>	<p>Report by Committee under SB 138 regarding workforce development.</p> <p>CISNI, network of legislative liaisons through area agency system</p>	<p>Budget negotiations will determine what next steps.</p>	<p>Spring 2009</p>	<p>Pending</p>

Outcomes for Families & Individuals with ASD: *Individuals and families will have access to a more robust workforce providing one-on-one support to individuals with ASD.*

Human Services: Recommendation VI(B)4

Recommended Priority: Medium to High

The New Hampshire Council on ASD will advocate for improving the capacity of the area agency system and eliminating the waiting list for developmental services by July 1, 2010 as set out in SB 138.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
Bureau of Developmental Services has included funds to eliminate the wait list as per SB 138.	Area Agencies, legislative liaisons, CISNI	Budget negotiations will determine next steps.	Spring 2009	Pending
Educate Representatives and Senators about the urgent need for these funds through forums, legislative coffees etc.	Family advocates	.	Throughout spring 2009	
Work group to consider next steps			Summer 2009	

Outcomes for Families & Individuals with ASD: *No longer a wait list for adult services*

Human Services: Recommendation VI(B)3

Recommended Priority: Medium to High

The Department of Health and Human Services Bureau of Developmental Services will request or identify additional funds to expand the number of In-Home Supports Programs.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
The Bureau of Developmental Services included 80 additional In Home Support Waivers in its budget.		Budget negotiations to determine next steps	Spring 2009	Pending
Advocacy and education regarding the need for additional HIS waivers	Legislative links, Easter Seals, and internet.	N/A	Spring 2009	
Develop research base: Work group will review how other states support children 3 to 21.	Work group volunteers	N/A	1/7/09	Complete
Research grants to help support additional services; apply for grants as available.	Work group in collaboration with area agencies, Council Administrative Director	To be determined	Early summer	

Outcomes for Families & Individuals with ASD: *Children and the families that support them will have additional access to consumer-directed resources that can be utilized for treatment and support that is otherwise not funded.*

Screening & Diagnosis: Recommendation II(A)1

Recommended Priority: High

This recommendation has been broken down into three sub-levels (a,b&c).

A. Possible Collaborators will be identified and invited to participate in the work of the Screening and Diagnosis Work Group, including: Autism Society, parents, family support, NH AHEC, the Foundation for Healthy Communities, DHHS, DPH/MCH, BDS/SMS, NH Pediatric Society, NH Chapter of American Academy of Family Physicians.

Steps toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
All recommended stakeholders (as well as additional stakeholders) were identified and invited to participate in the Screening and Diagnosis Work Group.	N/A	N/A	Completed	Work Group convened with broad representation. (Note: several entities did not provide a representative).

Outcomes for Families & Individuals with ASD: *Families will benefit from having advocates of patient and family centered care as participants in this initiative.*

Screening & Diagnosis: Recommendation II(A)1(b)

Recommended Priority:

This recommendation has been broken down into three sub-levels (a,b&c).

B. DHHS, through DPH/MCH and SMS/BDS, will develop strong technical assistance for all pediatric primary care settings for the implementation of current nationally accepted autism screening and surveillance guidelines. This effort will include providing information and tools for screening, diagnostic evaluation referral, early intervention and preschool special education referral and individual autism program grants.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
<p>In collaboration with Special Medical Services and the NH Academy of Pediatrics, develop open forums to promote newly established, nationally recognized screening guidelines.</p>	<p>Grant funds secured</p>	<p>N/A</p>	<p><u>April 15, 2009</u>, Lebanon NH with outreach to stakeholders in the North Country. <u>October 23, 2009</u>, Hampton NH</p>	<p>Healthcare professionals trained in new screening guidelines.</p>
<p>LEASD Leadership Education in Autism Spectrum Disorder: targets community providers from a variety of settings (ESS, private practice, agencies that serve children and families, etc).</p>	<p>Grant Funds obtained to support the LEADS program through the federal Combating Autism Act.</p>	<p>N/A</p>	<p>2009 & 2010</p>	<p>Professional development for four advanced trainees 2009 and four additional trainees (2010)</p>
<p>Autism Summer Institute 2009 hosted by the Institute on Disability and LEASD program</p>		<p>N/A</p>	<p>August 10-13, 2009</p>	<p>Conference open to wide variety of stakeholders</p>
<p>ASD Medical Home Leading and Learning Collaborative: Goal is to educate primary care practices re: ASD and to implement screening procedures.</p>			<p>First session scheduled for April 3, 2009. Monthly sessions via webinars to be scheduled.</p>	<p>Six primary care practices to be trained</p>
<p>Healthy Babies/Healthy Children at Pathways/Region 2 area agency: Demonstration project on social/emotional supports for children from birth to six and their families in</p>	<p>Endowment for Health, other funding. Participants: Alice Peck Day Hospital-- Community Care, DHMC, and West Central Behavioral</p>		<p>2009-2011, with sustainability anticipated</p>	<p>Outcomes/Data will be shared upon completion of the demonstration</p>

<p>the Upper Valley region; use of standardized screening tools as per American Academy of Pediatrics guidelines</p> <p>Baby Steps Program: Implement training, technical assistance and support to health clinic staff in implementing Autism screening activities at the 18, 24 and 30 month well child visits using Modified Checklist for Toddlers (MCHAT); interface with computerized medical record (Logician).</p> <p>Watch Me Grow Pilot Project:</p>	<p>Health.</p> <p>Funding through County Incentive fund grants and support of community health centers.</p> <p>Supported collaboratively by Bureau of Developmental Services, Maternal & Child Health, and Dept. of Children, Youth and Families</p>		<p>January 2009</p>	<p>Five community care clinics enrolled; technical assistance available to others.</p>
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Outcomes for Families & Individuals with ASD:

Screening & Diagnosis: Recommendation II(A)1(c)

Recommended Priority: Medium

This recommendation has been broken down into three sub-levels (a,b&c).

C. DHHS, through DPH/MCH and SMS/BDS, will provide information about the NH Autism Registry

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
Launch NH Autism Registry with web-based and other information (including a brochure and Q&A document)	Initial funding from Bureau of Developmental Services for web & brochure content, development of on-line reporting tool, printing.	-----	Registry launched Nov. 2008. First outreach via email notification completed, Nov. '08	--Completed-- Individuals are being entered into the registry. Informational brochure & well-developed web content for both consumers & healthcare professionals
Follow up by “snail” mail, targeted specifically at “diagnosticians” and will include the ASD registry brochure.	-----	Funds to support printing additional brochures, mailing costs, staff costs and potential cost for mailing lists	March 2009 to reinforce/follow up on initial launch	-----
Assist in semi-annual report	Data work group as collaborators	----	-----	Data reports reflecting autism registry utilization will be evaluated at six months and twelve months post inception.

Outcomes for Families & Individuals with ASD: *The NH Registry data will help secure federal and other funding for NH public schools, developmental services, early intervention, vocational supports, and insurance coverage (from the NH Registry brochure).*

Screening & Diagnosis: Recommendation II(A) 3 (b)

Recommended Priority:

This recommendation has been broken down into two sub-levels (a &b)

A. DHHS, through BDS and in collaboration with the Department of Education, will identify and support leadership for a regionalized system of autism diagnostic clinics using or expanding upon available resources to increase access to timely diagnostic evaluations by improving geographic access and reducing wait times for clinical appointments.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
Grant opportunities to be pursued for the development & expansion of the system overall.	Grant opportunities: Combating Autism Act (for infrastructure building/regional hubs) and LEND program for Personnel Development	Administrative and clerical support to pursue additional grant funding opportunities	Applied 2008, did not receive grant	Completed CAA grant application: not awarded Successfully secured LEND grant for staff development.
Expand capacity of existing clinics in Manchester & North Country, with goal being to provide 72 evaluations for children, up to age 13, with/suspected of having autism	WalMart Foundation Grant awarded to Easter Seals	In kind space offered by a local physician. Seeking Heritage United Way grant to enhance this project as well as third party payment, Medicaid, sliding scale fees for families and school districts.	Ongoing	Funding secured
North Country diagnostic evaluation clinic based at Children Unlimited in collaboration with local schools, serving children and families from the North Country.	In kind donations; third party payment, Medicaid, sliding scale fees for families, private donations and school districts and donation of time for psychiatrist.	-----	Ongoing	Clinic in operation

Development of a listing identifying developmental evaluation resources	On-going: S&D team members are adding resources to the document	-----	On-going	Resource directory
Continued support of the Child Development Network Clinic system supported by Special Medical Services	Funded through Title V Block Grant, state funds and matching federal funds and third party billing.	-----	Ongoing	Four clinics in operation
Seacoast Developmental Clinic (5 children are seen per month): ASD Genetics Clinic (ChaD at Wentworth Douglass Hospital) with follow up consultation provided by staff from the Seacoast Child Development Clinic (between 5-6 children per month)	Funded in part through LEND program grant and through third party payment, Medicaid, sliding scale fees and school districts.	-----	Ongoing with first Genetics Clinic to begin March 2009 and to be held once monthly	Clinic in operation
Baby Steps program	Funding from County Incentive fund grants and through support of community health centers.	-----	On-going	

Outcomes for Families & Individuals with ASD: *Children and families will have timely access to comprehensive multi-disciplinary evaluation resource located within their region of New Hampshire, including the North Country; families and their clinical team will have access to up-to-date information regarding resources for further evaluation and/or follow up.*

Independent Living & Employment: Recommendation III(A)2

Sequence/priority: *To be Determined*

The Governor’s Task Force for Employment and Economic Opportunity for People with Disabilities and Department of Education Bureau of Career Development will work with New Hampshire’s business community to help them identify ways in which individuals with ASD can help meet New Hampshire’s workforce needs.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
1. Identify workforce needs in NH	ELMI Data; Internet, Job Corps research	none	July 1, 2009	Report to Work Group
2. Identify employment sectors that match the strengths, skills and interests of individuals with ASD	Work Group to discuss	none	Early fall ‘09	Report to Council
3. Develop an outreach program:				
a. Review existing marketing materials and outreach efforts (Governor’s Council; Job Corps) to identify opportunities for an ASD-specific message embedded in these broader initiatives – e.g. success stories.	IOD, DD Council, NH Job Corps; Governor’s Council	<i>Pro bono</i> marketing expertise	Fall ‘09	Revised work plan
b. Participate actively in design and development of NH Job Corps to insure it will be an attractive resource for individuals w/ASD.			ASAP	Membership on advisory groups working on Job Corps initiative. MEMBER IDENTIFIED
c. Identify resources in NH that can offer ASD-specific awareness training to employers.	IOD, NH Autism Society	Best practice curricula		

Outcomes for Families & Individuals with ASD: *Individuals and families will benefit from having a strong presence in NH’s Job Corps initiative. Employers will benefit from an awareness of the unique strengths of individuals with ASD and from having an identifiable resource to train their staff in accommodating and supporting workers w/ASD.*

Independent Living & Employment: Recommendation III(A)3

Sequence/priority: *To be Determined*

The New Hampshire Council on ASD will work with the Institute on Disability, the Department of Vocational Rehabilitation, and other organizations to pilot innovative supported employment initiatives for individuals with ASD. These programs should take full advantage of existing, evidence-based strategies for effective job development, placement, and retention.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
1. Identify best practices nationally in (1) job development, (2) job placement, and (3) retention.	IOD, Dept of Labor consultant (K Chaffee), work group participants		By May	Report by research team
2. Identify and/or cultivate potential funding	Council administrative dir, MIG grants.	Time of Adm. Director	April-May '09	5-7 potential funding sources. RFP(s) and/response to RFP(s)
3. In collaboration with potential funders develop RFP(s) or responses to RFP(s) for 3-5 pilot project(s)				
4. Work collaboratively with all stake holders to match funding w/pilots			July 1, 2009 – forward	Diverse demonstration projects.
5. Monitoring & assessment: (1) Identify means of capturing consumer input into ongoing quality improvement process. (2) Cultivate assessment team. (3) collect & analyze data (4) make recommendations to individual projects & the Council	Work group volunteers; People First & IOD (step 1); participants in pilot projects.		Ongoing w/ initial plan as part of RFP(s). Complete step 5(4) by April '10.	Team of reflective participants dedicated to improving the services that they access.
6. Repeat steps 1-4 cyclically and assist successful pilots in identifying resources for sustainability.				

Outcomes for Families & Individuals with ASD: *Through existing systems including the area agency system, vocational rehabilitation, job corp, individuals with ASD will have the opportunity to participate in pilot projects that are tailored to meet their unique needs and to share their experience as consumers of these services in an ongoing quality improvement process.*

Independent Living & Employment: Recommendation III(A)4-a

Sequence/priority: *To be Determined*

*The New Hampshire Council on Autism Spectrum Disorders will facilitate efforts to provide individuals with ASD with the supports necessary to participate in the same opportunities for **post secondary education [and] technical school and training ... that are available to their peers.***

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
1. Identify best practices nationally in supporting individuals with ASD in post-secondary education including technical schools, community colleges, 4 year college programs, on-line education, and graduate school programs. Consider residential and non-residential options.	Work group volunteers; IOD, DD Council; Asperger’s Association of New England.	Deploy time of Adm. Dir. To assist research team as needed in any of these steps.	By fall ‘09	Short report to work group and Council.
2. Identify the barriers to participation and develop strategy to reduce them.	As per above		Late fall ‘09	Short report
3. Identify partner organization(s) in both technical and higher education: Host ‘roundtable to cultivate interest by NH community college system, UNH, Plymouth State, Keene State, New England College, and other NH institutions of higher education.	Work group volunteers, Job Corp, Governor’s Council.	Modest financial support	Early 2010	Next Steps as per Roundtable
4. Develop a new work plan to include: (a) means of promoting participation in post-secondary education to individuals & families; (b) Specific pilot project(s); (c) Consumer advisory board for ongoing quality assessment; and (d) strengthening link(s) to high schools.	Information & partners developed by steps 1-3		April 2010	Well developed plan both to support more robust participation in existing programs and to assist partners in creating demonstration project(s).

Outcomes for Families & Individuals with ASD: Individuals and families will benefit from an enhanced knowledge base regarding post-secondary options and best practice supports; they will have an opportunity to share this knowledge and their interests & concerns directly with representatives from potential partner organizations, **resulting in concrete initiatives** such as demonstration project(s), targeted outreach, etc.

Independent Living & Employment: Recommendation III(A)4-b:

Sequence/priority: *To be Determined*

*The New Hampshire Council on Autism Spectrum Disorders will facilitate efforts to provide individuals with ASD with the supports necessary to participate in the same opportunities ... **community service, volunteerism, civic involvement, and independent living** that are available to their peers.*

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
1. Identify best practices nationally in supporting individuals a/ASD in living independently in a setting and with supports of his or her choice.	Work team volunteers, IOD, area agencies, existing programs in NH, People First, Granite State Independent Living	Deploy time of Adm. Dir. To assist research team as needed in any of these steps.	Early Fall '09	Preliminary report (power point)
2. Gather stakeholder input through a variety of mean regarding independent living, recreational opportunities, civic engagement, etc.	Work Group; Data collection work group.		Early summer '09	Statistical & anecdotal information; preliminary report (power point); share with public.
3. Identify barriers to utilizing best practices in NH and develop strategies to reduce these barriers including demonstration projects, legal or legislative initiatives, training & technical assistance, and enhanced public awareness.	Work group to analyze data from steps 1 and 2. Regional autism collaboratives.		Fall '09	Report highlighting a limited number of strategies, practices and/or projects that are especially well suited to NH.
4. Formulate new work plan based on step #3 above			Jan. 1, 2010	Plan to begin concrete initiatives w/ partner organizations.

Outcomes for Families & Individuals with ASD: *Individuals and families will benefit from an enhanced knowledge base regarding independent living, the cultivation of natural supports, and/or options for paid support. They will have well publicized opportunities to share their experiences, concerns and ideas directly with the work group during a period of data collection and stakeholder input, **resulting in concrete initiatives** such as demonstration project(s), targeted outreach, etc.*

Public Awareness: Recommendation VI(C) 1

Sequence/Priority: High

In collaboration with Department of Health and Human Services and the Autism Society of New Hampshire, the Commission will seek grant funding to initiate the New Hampshire Autism Awareness Campaign.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
Secure funding for organizational capacity building and strategic planning.	Autism Society of NH Board	\$10,000	Summer '08	Completed
Develop organizational strategic plan; expand organizational capacity	Consultants hired as per planning grant	To be determined	2009	Documentation of viability as agent to oversee Awareness campaign
Develop contacts in marketing & media to assist with Awareness campaign	-----	-----	ongoing	In-kind donations; improved access to media
Apply for theme Implementation Grant from the Endowment for Health.	Letters of endorsement by Council & other stakeholder groups	To be determined	Letter of intent due Jan, 2010; application due March 2010	Secured funding for multi-tiered campaign

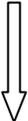
Outcomes for Families & Individuals with ASD: *Families and Individuals with ASD will benefit from a more robust state chapter of the Autism Society of America and from its leadership in educating all sectors of the public regarding the unique needs and the positive value of NH citizens with ASD.*

Public Awareness: Recommendation II (B) 1, steps 1-6:

Recommended Priority: High / longer term

*The Autism Society of New Hampshire, in partnership with the New Hampshire Division of Public Health Services and other public and private agencies, will launch the New Hampshire Autism Awareness Campaign **for (1) the general public, (2) all families of young children, (3) medical professionals, (4) child care providers, (5) early childhood educators, and (5) therapists.***

The Awareness Campaign will include multi-tiered messages about the prevalence of ASD, the earliest signs and symptoms, available sources of information and support, diagnostic services, and evidence-based and other promising approaches to treatment and intervention. In addition, the Awareness Campaign will emphasize the importance of family strength and resilience and recognize that families should be included as active partners in all matters regarding their children with autism spectrum disorders. Families and individuals with ASD will be involved in planning and delivering the awareness messages and information.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
<p>Apply for theme implementation grant through the Endowment for Health, as per recommendation VI (C) 1</p> <p><u>Interim Steps</u></p> <p>Review existing materials both from NH and from national organizations.</p> <p>Work with Council to improve website as a portal to broad base of ASD-related information</p> <p>Work with all Council work groups, esp. Screening & Diagnosis; Independent Living & Employment, to develop a common message; tailor message to specific audiences 1-6 as per recommendation above.</p>	<p>Partner organizations include:</p> <p>Autism Society of NH Bureau of Public Health Pre-school technical assistance network Health Education Centers Institute on Disability Crotched Mountain Foundation Easter Seals NH Dartmouth Hitchcock Medical Center Asperger Association of New England Antioch New England NH Dept of Education</p>	<p>To be determined</p>	<p>Letter of intent due Jan, 2010; application due March 2010</p> <p>2009</p> 	<p>Successfully secure multi-year funding</p>

Outcomes for Families & Individuals with ASD: Families and Individuals with ASD will benefit from a state culture that understands and values early diagnosis & evidence based treatment, access to appropriate resources, and greater acceptance & understanding of ASD that supports affected individuals in leading a self-directed, fulfilling, life.

Safety: Recommendation IV (A) 1, step 1, part A

Sequence/Priority: Medium

The New Hampshire Division of Fire Standards and Emergency Medical Services, collaborating with interested organizations and state agencies, will work to ensure that training about autism spectrum disorders is included in the curriculum of all first responders.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
Prepare ASD awareness training specific to Fire Rescue/EMS	Easter Seals, Dover Fire Rescue, ASNH, ARCH	Dennis Debbaudt video, Fire Academy and state EMS representatives	November 2009	Pending
Write and submit Proposal to Fire Academy and Emergency Medical Technicians	ARCH, ASNH, Easter Seals, Dover Fire/Rescue		November 2009	Pending
Present at Statewide EMS conference, Littleton, NH October 2009	Easter Seals, ASNH ARCH	Response to Call for Papers by conference organizers	October 2009	Pending

Outcomes for Families & Individuals with ASD: *ASD Awareness training for Fire/Rescue and EMS personnel state-wide will make their jobs easier and their interventions more helpful to families that are already dealing with a difficult situation.*

Safety: Recommendation IV (A) 1, step 2			Sequence/Priority: High	
<i>The New Hampshire Department of Safety Police Standards and Training Council, collaborating with interested organizations and state agencies, will work to ensure that training about autism spectrum disorders is included in the curriculum of the New Hampshire Police Academy.</i>				
Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
Initiation of Police Academy training	Easter Seals New Hampshire ARCH of the Upper Valley Autism Society of NH		April 2009	Near implementation

Outcomes for Families & Individuals with ASD: Graduates of the police academy will have the knowledge and skill to respond in an appropriate way when individuals with ASD and their families have an encounter with law enforcement personnel; graduates can act as “ambassadors” by demonstrating to their colleagues the value of having training specific to ASD.

Safety: Recommendation IV (A) 1, step 1, part B:			Sequence/Priority: High	
<i>The New Hampshire Department of Safety Police Standards and Training Council and Division of Fire Standards and Emergency Medical Services, collaborating with interested organizations and state agencies, will work to ensure that training about autism spectrum disorders is widely available to all first responders. [on-going training at local municipalities]</i>				
Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
On-going training at local towns	Autism Society of America Easter Seals NH Asperger’s Association of New England	Dennis Debbaudt DVD Staff for training budgeting for time of trainees widespread dissemination		Increased competency of First Responders
NH 911 Department of Safety trainings				

Outcomes for Families & Individuals with ASD:

Safety: Recommendation IV (A) 2:

Sequence/Priority: Medium

The Autism Society of New Hampshire, in collaboration with the New Hampshire Department of Health and Human Services, the Department of Education, and the New Hampshire Pediatric Society, will undertake an ASD safety awareness initiative. This effort will include distribution of Safety First and related materials to families and collaboration with primary care and mental health practitioners, educators, and childcare providers to encourage the discussion of safety issues in the routine care of children and youth with ASD. Other audiences for this awareness initiative will be school nurses, emergency room personnel, and search and rescue providers.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
<p>Enhance ‘Safety First’ & ‘Safe & Sound’ materials; test market with pediatricians and school nurses.</p> <p>Develop List of state and local resources</p> <p>Solicit involvement of NH Pediatric Association & Community Mental Health</p>	<p>911 Registration campaign and on-going training for law enforcement</p> <p>Partner organizations, including Easter Seals Autism Society of NH Autism Society of America area agencies NH Connections (PIC) Bedford Police Department ARCH of the Upper Valley</p>	<p>Modest funding for materials</p>	<p>2009</p> <p>2009</p> <p>2010</p>	<p>Widespread registration of individuals with ASD in 911 data base</p> <p>Widespread distribution of safety materials</p>

Outcomes for Families & Individuals with ASD: *Families will be aware of and take basic preventative measures to protect family members with ASD; First Responders will be better able to respond appropriately to emergency situations when they have information about the specific needs of someone involved who has ASD.*

Data Collection: Recommendation II(B)2

Sequence/Priority: High, difficulty

The Department of Health and Human Services and Department of Education, through an interagency agreement, will develop and periodically publish a report of autism-related data organized by state and by county. These data will be made transparent and publicly accessible in a user-friendly format and will include, but not be limited to, information contained in the NH Autism Registry.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
Review all existing data sources.	SPEDIS (Dept of Education), NESIS, NH Registry, area agency data, Insurance Dept. Data,	Deploy time of p/t Admin. Dir	By July, 2009	Report to Data Wk Gr.
Identify data needed to measure outcomes of Council initiatives.	Work plans developed by each work group (“resources needed”)	Same as above	March, 2009 & ongoing	-----
Pilot efforts to better align LEADS data with desired outcomes and to improve its accuracy at area agencies-- Nashua, first, and then expanding	Existing LEADS data,; Expertise of work group members	-----	Begin spring ‘09	-----
Work with Autism Society & stakeholders to craft voluntary registry. Review data quarterly.	IAN research; VT survey	Interested consumers for focus group	One year in development	Voluntary Registry & reports
Design “ASD Dashboard” to provide annual information.	National data sets to which NH data could be meaningfully compared.	-----	Two years in development	User-friendly format for display of data from multiple sources.
Develop interagency agreement as needed to support collection of data for the ASD Dashboard.	N/A	N/A	As needed	Agreement clarifying data sharing, roles, responsibilities, etc.
Publish annual findings on NH Council website & other venues.	N/A	Council Adm Dir.	2010 deadline for Council report	Public Report

Outcomes for Families & Individuals with ASD: *Families and individuals with ASD will have services and supports that are informed by the objective measurement of desired outcomes, including real life outcomes such as adult employment. Public agencies will have reliable population data for long range planning and for comparison of NH programs with national benchmarks.*

Insurance Work Group: Recommendation VI(A)2

Sequence/Priority: High & difficult

Both public and private insurance coverage for the evidence-based, intensive treatment of ASD will mirror coverage for the treatment of other neurological conditions. The New Hampshire Council on ASD will work with the New Hampshire Insurance Department, the New Hampshire Department of Health and Human Services, and New Hampshire Healthy Kids to identify where coverage and/or the rate of reimbursement is not comparable and shall consider strategies to address these gaps.

Steps Toward Completion	Resources Available	Resources Needed	Timeframe	Outcome / Status
<p><i>I. private insurance, NH regulated</i></p> <p>1) Review existing coverage through multiple sources if information.</p> <p>2) Analyze legislation from other states & national models</p> <p>3) Establish relationship with national associations (Autism Society of America, Autism Speaks) to enlist advice and resources.</p> <p>4) Establish working relationship with sponsors & potential sponsors; and NH-based attorney.</p> <p>5) Seek endorsement of relevant legislation by Council</p> <p>6) Advocate for Cost Benefit Analysis and actuarial review under NH RSA 400-A:39-a</p> <p>7) Advocate for guidance to be provided to insurance carriers, public education administrators and consumers with regard to the scope of responsibility for payment of services and supports specific to each party</p>	<p>Area agency system, ESS Vendors of SLP, OT and PT Parents, public input</p> <p>Expertise of Wk Grp chair</p> <p>Autism Society of NH</p> <p>Council contacts w/elected officials; Franklin Pierce Law, Center for Ethics</p> <p>HB 569, Connor’s Law</p> <p>Council representatives</p>	<p>N/A</p>	<p>By March, 2009 And ongoing</p> <p>Completed Dec 2008</p> <p>Completed Nov 2008</p> <p>Completed Oct. 2008</p> <p>Completed, March 2008</p> <p>Report to be completed by end of summer, 2009</p>	<p>Periodic reports to work group</p> <p>Report to work group</p> <p>-----</p> <p>-----</p> <p>Statement by Council</p> <p>Report</p>

II Publicly funded insurance				
1) Review existing coverage under Healthy Kids Gold and Silver through multiple sources of information.	Dept of Health & Human Ser. NH Healthy Kids Foundation Vendors of SLP, OT, & PT	N/A	Summer 2009	Periodic reports to work group
2) Analyze legislation/state plans from other states & national models	Expertise of Wrk Grp Chair		Summer 2009	Report to work group
3) Request legal opinion w/regard to existing state and federal parity law	Disability Rights Center Franklin Pierce Law Center for Ethics & Public Policy		Fall 2009	Report to work group
4) Develop recommendations for changes to extend coverage	Report regarding impact of HB 569		By Jan. 1, 2010	Recommendations to present to full Council
III Self-funded plans, federal				
1) Monitor relevant federal legislation	Contacts with the Autism Society of American and Autism Speaks		Ongoing	Periodic reports to Work Group
2) Direct advocacy with NH congressional representatives	Coaching from NH Council on Developmental Disabilities		As needed	

Outcomes for Families & Individuals with ASD: *A fair balance will be established between (1) private/public insurance, (2) public funds through Early Supports and Services, area agency funding, and public education under IDEA, and (3) parent out-of-pocket expenses such that every child with a diagnosis of ASD receives a robust and prevention-oriented course of treatment in accordance with the recommendations of the American Academy of Pediatrics as interpreted by the child's treating physician and team members.*