

DRAFT #7: 10/12/15

Autism Center, Navicent Health Mission:

To remove barriers and increase access to early clinical diagnosis, and treatment services, for individuals living with autism spectrum disorder and related developmental disorders.

Autism Center, Navicent Health Family Support Services Guide

Welcome to the Autism Center, Navicent Health's Autism Family Support Services. As Autism Center, Navicent Health Family Support Services provider, we will assist you and your family in obtaining the best possible care for your child. The Autism Center, Navicent Health provides, supports and promotes evidence–based treatment and intervention strategies, to attain the earliest possible screening, diagnostics and intervention of individuals of all ages to help improve the lifetime development of children and adults with Autism Spectrum Disorder.

In addition to this Autism Family Support Services Guide, please find the link to the "Autism Resource Directory" for your area on the website <u>http://www.navicenthealth.org/ACNH</u>

Parents who have had concerns about their child's development most likely have already obtained some medical and therapeutic services. Even so, receiving an "official" diagnosis of autism spectrum disorder may be overwhelming. Most families struggle emotionally and by not knowing where to begin. They may be dealing with internal family issues while trying to figure out how to get everything done seemingly at the same time. You do not have to do everything at once. You will have a lot of information to sort through. Please remember, finding appropriate interventions is like running a marathon, not a sprint. A good plan seems to provide a road map for staying on track and making adjustments as your child grows and develops.

Autism: "Autism is a complex brain-based disorder that affects multiple areas of development, including social interaction, verbal and nonverbal communication,

imagination and behavior and interests. Its symptoms show up early in life, sometimes in infancy, but generally before 3 years of age."

Autism Family Support Services Planning

Introduction: This guide outlines the fundamental autism support services for children diagnosed with Autism Spectrum Disorder. This Autism Family Support Services Guide is going to be your family's tool to track and guide your family, service providers, clinicians, schools, support agencies, and insurance providers as you "navigate" your child's intervention map.

Not every child will need all of the services listed in the guide, but your medical provider **should** explain why a therapy or service is not warranted at this time. Often the most effective outcomes occur, whenever possible, when a family is able to team up with their child's clinicians, care providers, school system, state and federal agencies and the Autism Center, Navicent Health Family Support Services Coordinator.

If you are at your wits end and/or cannot find a solution to any autism service issue please call the Autism Center, Navicent Health. If you are not receiving the services listed in the guide, please call Autism Center, Navicent Health. The Navicent Health Family Support Services Coordinator will help you to the best of their ability (1-844-482-2264).

Autism Center, Navicent Health Family Support Services

Contact Information:

Family Support Services Coordinator: (O) 1-844-482-2264, (F) 478-633-8121, Email: <u>ritchieiii.william@navicenthealth.org</u> or <u>saunders.maureen@navicenthealth.org</u>

Family Information:

Parent's Name: Last:	First	<i>MI</i>	Age:
Address	Phone: H	C	
	County		
Child's Name: Last:	First	<i>MI</i>	Age
Date of BirthS	Sex Diagnosis		_
Diagnosed by	Date		
Other Medical			
Issues/Diagnoses:			

Insurance Information:

(Ava's Law is a law which requires insurance companies to cover treatments for autism spectrum disorders. The law states that insurance companies must provide up to \$30,000, annually, on behavioral therapy, up to the age of 6. The law provides coverage for various treatments, including Applied Behavior Analysis (ABA), physical therapy (PT), occupational therapy (OT), speech therapy (ST), and marriage and family therapy. Ava's Law also prohibits insurers from refusing other medical care to children because of their autism. The law does not apply to people who (or companies which) are self-insured.)

For more information, visit <u>https://www.autismsocietyga.org/get-help/in-georgia/autism-insurance-avas-law</u> and <u>http://www.atlspeechtherapy.com/georgias-autism-law-an-explanation-of-the-benefits-avas-law-provides-for-georgias-children</u>

Carrier:	Policy number:		_
Medicaid Number:	Contact:	Phone #:	
Services Covered:			
General Medical (Pediatrics	Medications		
Applied Behavioral Analysis			
Occupational Therapy			
Speech and Language Therapy_			
Physical Therapy			
Psychiatry			
Eating Therapy			
Respite Services			
Other , Other			

Babies Can't Wait:

If your child is under 3 years of age, contact GA DPH Babies Can't Wait. You can reach them at 1 (478) 745-9200 (Babies Can't Wait Macon Office); 1-404-657-2850 (Babies Can't Wait State Office); 1-800-229-2038 (Parent 2 Parent of Georgia); or 1-888-651-8224. You can get more information about their services at http://dph.georgia.gov/Babies-Cant-Wait/.

Babies Can't Wait of Georgia/Early Education Services is Part H of IDEA (Individuals with Disabilities Act) establishes a system of services from birth until three years of age, for children with special needs and their families. The law guarantees all children, regardless of their disability, access to services that will enhance their development. Multidisciplinary assessments are provided at no charge to the family. Each family is assigned a Service Coordinator and access to appropriate services is directed by the child's Individualized Family Service Plan (IFSP). Funds are available to cover mandated services for eligible children when no other resources are available. At age three, eligible children are transitioned to other public and private programs to insure ongoing provision of needed services. Local offices are assigned by county or health district. Referrals are accepted from parents, hospital nurseries, pediatricians or other medical personnel, child development centers, etc.

Medicaid Information:

Medicaid is a medical assistance program that helps many people who can't afford medical care pay for some or all of their medical bills. Medicaid is administered by the Georgia Department of Community Health (DCH) and pays medical bills with State and Federal tax money.

Medicaid application can be filed online at <u>www.compass.gov</u> or call 1-877-423-4746 for additional information about Medicaid.

Deeming Waiver (Formerly known as the Katie Beckett Waiver) is a program for children who have a marked or severe disability where it has been established that it is less expensive for a child to receive treatment at home than in an institution. The program provides only Medicaid coverage when SSI has been denied due to income. It involves a lengthy, and sometimes intimidating, application process. The Deeming Waiver is generally in place for children with large medical or therapy needs/expenses who are not covered by private medical insurance, or whose medical insurance does not cover the prescribed services at the recommended intensity or frequency.

For information or to apply, call the Centralized Katie Beckett Medicaid Team at (678) 248-7449 or apply online at <u>www.compass.gov</u>. You can also call the local office of Department of Family and Children Services (DFCS) listed under County Government in the blue pages of the phone book, or call Georgia Medical Care Foundation (GMCF) at 1-800-982-0411.

Pediatrician Information:

Doctor's Nam	ne:	<i>Phone</i> #		
		Next appoint	ment:	
Clinical Conc				
	cations/Dosage:	_		
1	//	2	/	
3	//	4	/	
Child's Refer	ral for Services / Do	ite:		
1	/	2	/	
3	/	4	/	

Occupational Therapist Information:

(Occupational therapists (OTs) typically focus on helping people develop fine motor skills (movements involving the smaller muscles of the arms, hands and face), process information from their senses, and carry out daily living activities, such as eating, dressing, and grooming. For young children with ASDs, OTs are often helpful in building their play skills, learning self-care skills, and coping with their sensory processing differences. For more information see the American Occupational Therapy website at: www.aota.org.)

Therapist's Name:	<i>Phone</i> #	
Address		
Clinical Concerns:		
Goals:		

Speech and Language Pathologist Information:

(Speech language pathologists (SLPs) are trained in the assessment, treatment and prevention of communication disorders. They typically assess and treat difficulties in language understanding and expression and also problems with speech (articulation and fluency). Since communicating with words and gestures is typically hard for young children with ASD, speech language pathologists are often crucial members of the intervention team. In addition to helping to develop practical communication skills and addressing speech difficulties, some SLPs also have training and experience in treating eating disorders. This is very useful for children with ASDs who may be picky eaters or have difficulty tolerating certain food tastes or textures. For more information see the American Speech and Hearing Association website at: www.asha.org.)

Therapist's Name:	<i>Phone</i> #	
Address		
Clinical Concerns:		
Goals:		

Physical Therapist Information:

(Physical therapists (PTs) are trained to treat problems with movement and posture. In contrast to OTs, they tend to focus on developing gross motor skills (movements that involve the larger muscles of the arms and legs). PTs can help children with ASDs who have difficulties with coordination, balance, or motor planning move about their environment and participate in play and recreational activities more effectively. For more information see the American Physical Therapy Association website at: www.apta.org.)

Therapist's Name:	<i>Phone</i> #	
Address		
Clinical Concerns:		
Goals:		

Applied Behavioral Analysis Therapist Information:

(Behavior therapists vary in their training backgrounds, "but it important to ensure your case will be supervised by a Board Certified Behaviors Analyst (BCBA)" with a certification through the Behavior Analyst Certification Board (BACB). Whether you are trying to locate a behavior therapist through the early intervention or school system or are looking to hire one privately, it is important to find out about their educational background and work experiences with children with ASDs.

Behavior therapists will likely implement a therapy called Applied Behavior Analysis (ABA). While the name sounds intimidating, it is basically an organized approach to behavior change where you increase positive behaviors or teach new skills by rewarding the behaviors you want to develop. There are a number of specific types of ABA (discrete trial training, pivotal response training, incidental teaching, etc.), but they all work on the same basic behavior principles.

The goals of ABA are to increase positive behaviors, to teach new skills, to decrease undesired behaviors, and to help children to use these new skills at home, school, and other settings where they play and interact with other people. Your behavior therapist should be aware of your child's IFSP or IEP goals and should keep records to track the progress being made. For more information about ABA and other treatment approaches, see the "Treating Autism" section of the "First 100 Days Kit" which is available at http://www.autismspeaks.org/ or the Behavior Analyst Certification Board at www.BACB.com.)

(Early Autism Project Contact Info)

Therapist's Name:	<i>Phone</i> #	
Address		
Clinical Concerns:		
Goals:		

Nutrition Information:

Nutrition is one of the cornerstones in the foundation of health. "Nutrition for kids is based on the same principles as nutrition for adults. Everyone needs the same types of nutrients — such as vitamins, minerals, carbohydrates, protein and fat. What's different about nutrition for kids, however, is the amount of specific nutrients needed at different ages.

So what's the best formula to fuel your child's growth and development? Click on the tabs to the left for nutrition basics for girls and boys at various ages, based on the 2010 Dietary Guidelines for Americans.

Consider these nutrient-dense foods:

Protein. Choose seafood, lean meat and poultry, eggs, beans, peas, soy products, and unsalted nuts and seeds.

Fruits. Encourage your child to eat a variety of fresh, canned, frozen or dried fruits — rather than fruit juice. If your child drinks juice, make sure it's 100 percent juice.

Vegetables. Serve a variety of fresh, canned or frozen vegetables — especially dark green, red and orange vegetables, beans and peas.

Grains. Choose whole grains, such as whole-wheat bread, oatmeal, popcorn, quinoa, or brown or wild rice.

Dairy. Encourage your child to eat and drink fat-free or low-fat dairy products, such as milk, yogurt, cheese or fortified soy beverages.

Aim to limit your child's calories from solids fats and added sugar, such as butter, cake, soda and pizza. Look for ways to replace solid fats with vegetable and nut oils, which provide essential fatty acids and vitamin E. Oils are naturally present in olives, nuts, avocados and seafood. For by age nutritional requirements go to (http://www.mayoclinic.com/health/nutrition-for-kids/NU00606)"

If you have questions about nutrition for kids or specific concerns about your child's diet, talk to your child's doctor or a registered dietitian.

Nutrition Information:

Dietician/Nutritionist's Name:	<i>Phone</i> #	
Address		
Clinical Concerns:		
Goals:		

Physical Fitness Information:

Physical Fitness is another cornerstone in the foundation of health. "The most widely used behavioral intervention programs focus on developing communication, social, and cognitive skills. However, new research and anecdotal evidence suggest that some alternative therapeutic choices that include sports, exercise, and other physical activities can be a useful adjunct to traditional behavioral interventions, leading to improvement in symptoms, behaviors, and quality of life for individuals with autism.

Physical activity is important for children with and without disabilities alike as it promotes a healthy lifestyle, but can benefit individuals with autism in unique ways. In the U.S., 16% of children ages 2-19 are overweight, whereas the prevalence of overweight among children with ASD is increased to 19% with an additional 36% at risk for being overweight.¹ This means that more than half of all children with ASD are either overweight or at risk. Being overweight can put children at increased risk for numerous health problems, both in childhood and as adults, including diabetes, cardiovascular disease, bone and joint problems, and even depression. The effects of these conditions may take an even greater toll on individuals with autism in combination with common autism symptoms and some highly co-morbid conditions such as gastrointestinal problems as well as depression and anxiety.

It has been suggested that decreased physical activity is the primary reason for the increased rate of overweight in children with autism, while unusual dietary patterns and the use of antipsychotic prescription drugs that can lead weight gain may also contribute.^{1,2} Participation in physical activity may be challenging for individuals with autism because of reasons such as limited motor functioning,³ low motivation,⁴ difficulty in planning,⁵ and difficulty in self-monitoring.⁶ Increased auditory, visual, and tactile stimuli may too prove challenging for affected individuals.⁷ Furthermore, physical activity involving social interaction such as team sports can present a difficult situation for someone with autism. However, if implemented appropriately, the addition of physical activity to an autism intervention program can help overcome many of these challenges and improve ones overall quality of life. (http://www.autismspeaks.org/science/science-news/sports-exercise-and-benefits-physical-activity-individuals-autism)"

Clinical Concerns:

Goals:

Other Therapist Information:

Therapist's Name:	<i>Phone</i> #	
Address		
Clinical Concerns:		
Goals:		

Education Support Information:

School:	Grade Level:			
Teacher	#	Principal:	#	
School District Sp	ecial Ed Coordinator:		Phone #	
Address				

Infants and toddlers with disabilities (birth-2) and their families receive early intervention services under IDEA Part C. Children and youth (ages 3-21) receive special education and related services under IDEA Part B. See <u>http://idea.ed.gov/</u>.

Parent to Parent of Georgia (P2P) offers families a variety of services for children with ASD. They provide information, parent training, and education regarding assistance with IEPs and 504 plans. They can be reached at 1-800-229-2038 or on the website at <u>http://p2pga.org</u>.

***If possible, establishing a positive and balanced relationship with your child's school, the school district and parent committees may provide the best results in the long run!

Individual Education Program (IEP) and 504 Plan:

An <u>Individualized Educational Program (IEP)</u> describes the special education and related services specifically designed to meet the unique educational needs of a student with Autism and other disabilities. An IEP is the guiding document for a student's educational program. It includes all of the goals, objectives, present levels of performance and related services that are recommended for the student.

A student with a disability may be eligible for a <u>Section 504</u> Accommodation plan if he or she requires accommodations in order to have equal access to school district classes and programs.

Date of Educational Assessment

Results:

Date of IEP and of Results:	r 504 established Next IEP/504 meeting date:
Date of Psycholog	ical-Educational Assessment:
	#
Results:	
Date of Functiona	l Behavioral Assessment (FBA):
Evaluator	#
Results:	
accompanying circu	of gathering and analyzing information about a student's behavior and mstances in order to determine the purpose or intent of the actions. This gned to help educators:
	opriateness of the student's present educational placement and services, and buld help the student to display more acceptable behavior
-identify positive int	erventions that would reduce the undesirable behavior
-identify appropriate	e behaviors to be substituted in the place of the inappropriate ones.

Emergency Contact Information

Emergency Contact	<i>Phone</i> #	
Evacuation Address	Phone#	
Coordinating and Special Instruct	ions:	

Parent Support Groups

Contact	Phone #	
Location / Address		Phone#
Coordinating and Special	Instructions:	
community with a child w	ith ASD. You can re	nt support groups to all parents in the each them at 1 (888) 227-7212.
Legal Assistance	: Wills – Gu	ardianship- Adult Care
Attorney:	Phone:	
Address:		
Coordinating and Special		

Autism Support Hotline:

If all else fails call 1-844-482-2264 for assistance.

This document has been created by the Autism Center, Navicent Health for the purpose of assisting families as they navigate through the challenges of providing therapeutic interventions for their children with ASD.

(Portions of this publication, in parenthesis, were authored by Evon Batey Lee, Ph.D., Associate Professor of Pediatrics at Vanderbilt University, who serves on the faculty of the Vanderbilt Leadership Education in Neurodevelopmental Disabilities Training Program. It was edited, designed, and produced by the Dissemination and Graphics staff of the Vanderbilt Kennedy Center for Excellence in Developmental Disabilities. We are grateful for review and suggestions by many, including by faculty of the Vanderbilt Kennedy Treatment and Research Institute for Autism Spectrum Disorders (TRIAD) and by the Autism Society of Middle Tennessee.

With permission of the author, portions of the text have been revised and edited by Karen van Bakergem, LMSW in the Division of Developmental and Behavioral Pediatrics, Medical University of South Carolina.