

# Linking the Medical & Educational Systems around Autism Spectrum Disorders

Sarah Hoffmeier, MSW  
Family Service & Training Coordinator  
Kansas Instructional Support Network &  
Families Together, Inc.



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# Background Information

- Kansas Instructional Support Network (KISN)
  - Formerly known as Neurological Disabilities Support Project (NDSP)
  - Mission
    - To assist Kansas school districts in building local capacity to serve students with diverse learning needs through results based on professional development and technical assistance. This mission is carried out through the creation of networks of individuals (mini-teams) with high levels of expertise in serving children with intense cognitive, communicative, and/or behavioral concerns; the development of Communities of Practice; and the identification of local resources.

- Kansas State Department of Education (KSDE)
  - KSTARS
    - Kansas Statewide Technical Assistance Resource System
    - One of multiple KSDE interventions intended to build the capacity of local districts, support evidence-based research practices and create self-sustaining efforts at the district and building levels for support to students with disabilities and their families.
    - IDEA Title VI-B set-aside and Preschool set-aside, IDEA Part D State Improvement Grant, and Department of Health and Environment Part C funds support the KSTARS network.

# Who is our Target Population?

- Children Birth to 21 years of age who are on or show characteristics of an autism spectrum disorder and children with or history of a traumatic brain injury
- Professionals
  - Birth-Three Programs (Tiny-K)
  - School District Teachers and Professionals
  - Administrators
  - Related Service Providers
- Families

# Services

- Tailored technical assistance at the district level designed to support those who are actively developing, implementing and evaluating programs serving students with autism spectrum disorders (ASD) and traumatic brain injury (TBI)
- Ongoing professional development training and support for established district level ASD and TBI mini-teams
- Professional development training to establish autism teams in Tiny-K networks and districts lacking local autism expertise
- Technical assistance on individual students to help increase the skills of mini-team members to provide future technical assistance
- A resource lending library

# The KISN Network

- KISN Team: 4 members
  - Regional Autism Consultants (RAC's): 10 members
    - Autism Interdisciplinary Teams (AIT's): throughout KS school districts
      - Beginning training on medical diagnosis of autism

# The Link between Medicine & Education

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# History

- In February 2008, leaders in autism throughout Kansas met for the Regional Center for Disease Control (CDC) Summit on Autism
  - Team outlined goals and identified the need for accessible and timely medical diagnostic services
    - Currently diagnostic services are available in Wichita and Kansas City

# Importance of Diagnosis

- A complex disorder that can sometimes involve other health, developmental, neurological and genetic conditions
- Growing body of evidence suggesting improved outcomes for most children and dramatic response to intervention for some children with characteristics of autism
- Resources and services that are only available to children diagnosed with an autism spectrum disorder in Kansas

# Autism Diagnostic Team Trainings

- KISN and KU's Center for Child Health & Development (CCHD) collaboratively came together to provide Autism Diagnostic Team Trainings for Part C networks, Autism Interdisciplinary Teams (AIT) located in the local school districts, and doctors throughout the state
  - Together they serve as a community autism diagnostic team
- Opportunity for Part C teams and AIT teams consisting of members of different disciplines to learn the diagnostic process, screening tools (M-CHAT, CARS, etc.) and assessment tools (ADOS & ADI-R)

# Telemedicine

- With support from CCHD & KU Telemedicine:
  - Teams can receive assistance
  - Children and families can receive a diagnosis
- Provides a strong collaboration and link between the family, the school and the doctors!

# 2009 Trainings

- July 9 & 10 in Hays, KS
- November 2 & 3 in Topeka, KS

More to come in 2010!!!!

# Early Childhood Intervention

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## Early Detection

- Early detection plays a significant role in enhancing the developmental outcomes of children with autism.

# Early Detection

- Research indicates that early identification facilitates early intervention
  - Early intervention is *essential* for better outcomes

# The Value of Early Detection & Intervention

- Research indicates that intervention provided before age 3 ½ has greater impact than that after age 5 (Fenske, Zalski, Krantz, & McClannahan, 1985; Harris & Handleman, 2000)
- Some suggest that intervention beginning before age 3 may have an even greater impact (McGee, Morrier, & Daly, 1999)
- Parents need accurate information so they can access resources and support systems and become educated on Autism Spectrum Disorders (ASD) therefore increasing their ability to make informed decisions

# Purpose of Early Childhood Intervention

- Early childhood intervention is to support care providers in developing the competence and confidence to help the child learn
  - (Rush & Sheldon, Natural Environments Call Series, 2004)
- Support and promote parents' competence and confidence in providing their children development-enhancing learning opportunities
  - (Dunst, Natural Environments Call Series, 2004)

# IDEA, Part C Regulations

- Sec. 303.12 Early intervention services
  - (a) General. As used in this part, early intervention services means services that--
  - Are designed to meet the developmental needs of each child eligible under this part and the needs of the family related to enhancing the child's development;
  - Are selected in collaboration with the parents; . . . .
  - (c) General role of service providers. To the extent appropriate, service providers in each area of early intervention. . . .are responsible for –
  - Consulting with parents, other service providers, and representatives of appropriate community agencies to ensure the effective provision of services in that area;
  - Training parents and others regarding the provision of those services; and
  - Participating in the multidisciplinary team's assessment of a child and the child's family, and in the development of integrated goals and outcomes for the individualized family service plan

# Main Components of IDEA, Part C Regulations

- In addition, requirements for:
  - Parent as key member of the team
  - Use of evidence based practices
  - Services in natural environments

# Evidence-Based Practices

- “Practices that are informed by research, in which the characteristics and consequences of environmental variables are empirically established and the relationship directly informs what a practitioner can do to produce a desired outcome.”
  - (Dunst, Trivette, & Cutspec, 2002 - as cited by Sheldon & Rush, 2005)

# Evidence-Based Practice: A National Effort

- Much of the research and national guidance has been occurring for over 2 decades, but for the first time is becoming cohesive, with the research threads being woven into “evidence based” practice guidance
- Professionals from many disciplines are reviewing and evaluating their own practices in light of this research and guidance

# A Paradigm Shift: Changing how EI Services are Provided to Families

## Traditional

Child-centered

Deficit-based

Segregated settings

Single agency  
collaboration

Direct service

Single practitioner

Therapeutic settings

Therapeutic goals

Lack of function

## Evidence-Based

Family-Centered

Strength-based

Inclusive communities

Interagency

Consultation

Team-based

Typical setting

Functional outcomes

Lack of access

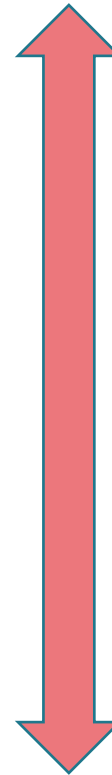
(Dunst, 2000; Eigsti & Rapport, 2008)

# Key Concepts

- Family Centered Care
  - Supporting the family to help the child vs. teaching the child specific skills
- Natural Learning Opportunities
  - Building on activity settings and learning opportunities vs. embedding therapy
- Integration of Services
  - Promoting integration of services

# Overview of Team Models

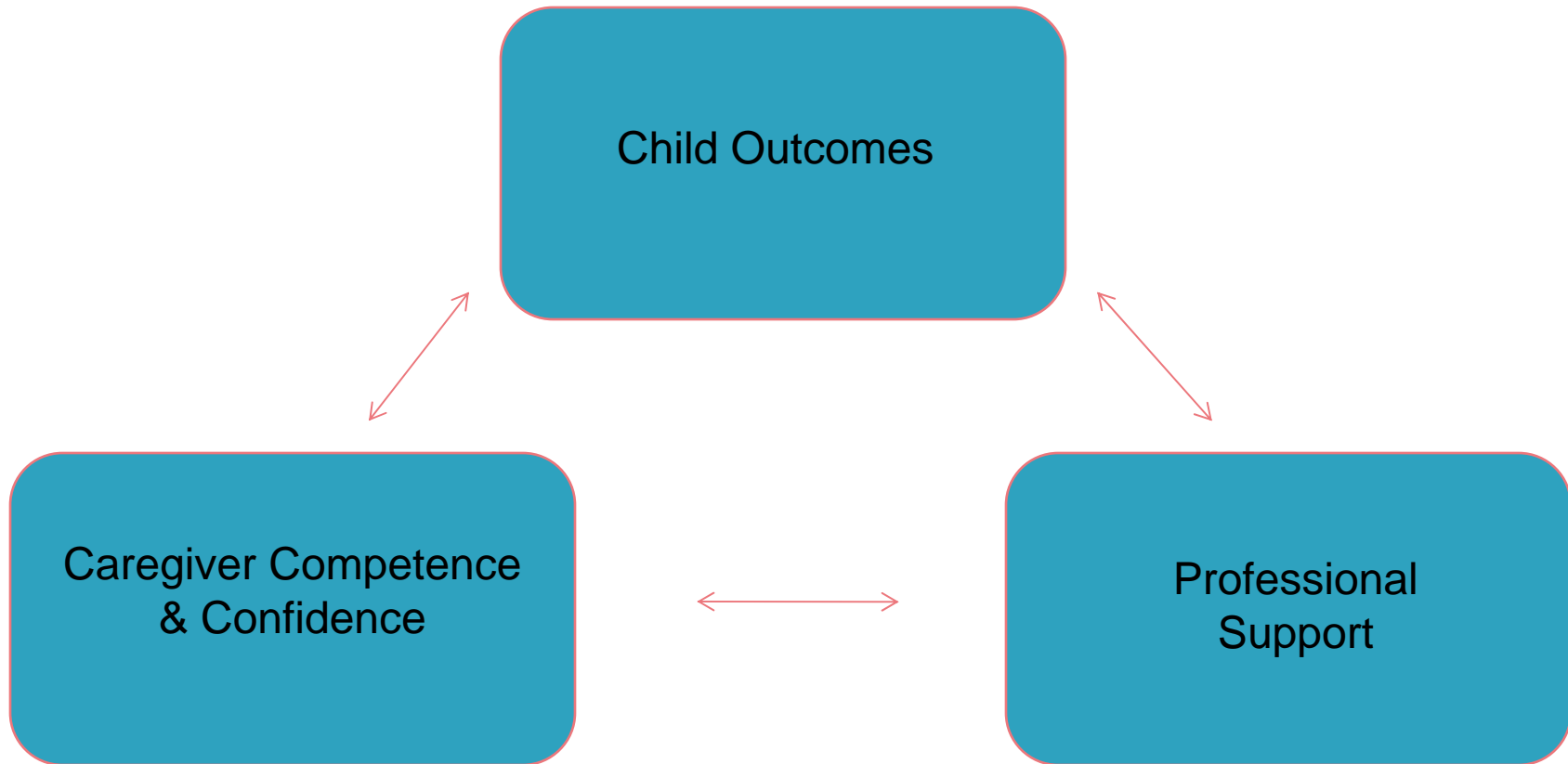
- Unidisciplinary
- Multidisciplinary
- Interdisciplinary
- Transdisciplinary or Primary Service Provider as Coach



# Why Integrate Services?

- Keeps the perspective on the whole child, in context of everyday activities and relationships
- Points intervention toward functional, integrated supports and services
- Helps avoid duplication and fragmentation
- Blends multiple perspectives and expertise

# It is ALL Interrelated



# Resources

- First Signs

[www.firstsigns.org](http://www.firstsigns.org)

- Zero to Three

[www.zerotothree.org](http://www.zerotothree.org)

- CDC Learn the Signs Act Early

<http://www.cdc.gov/ncbddd/autism/ActEarly/default.htm>

- Autism Speaks

[www.autismspeaks.org](http://www.autismspeaks.org)

- Kansas Early Autism

[www.ksearlyautism.org](http://www.ksearlyautism.org)

- Families Together, Inc.

[www.familiestogetherinc.org](http://www.familiestogetherinc.org)

- Kansas Instructional Support Network

[www.kansasasd.com](http://www.kansasasd.com)

# Contact Information

- Sarah Hoffmeier

University of Kansas Medical Center

Mail Stop 3055

3901 Rainbow Blvd.

Kansas City, KS 66160

913-588-5943