

Increasing Georgia's Capacity to Identify, Diagnosis, and Serve Young Children with Autism Spectrum Disorder:

Department of Public Health-University Collaborations

Michael J Morrier, PhD, BCBA-D¹, Donna M Johnson², Jennifer L. Stapel-Wax, PsyD³, Daniel Crimmins, PhD⁴, Lillie Huddleston, PhD⁴, & Catherine E Rice, PhD¹

- About **4 million babies** born in the US each year
- 1 in 4** are at moderate to high risk for developmental delays (NSCH, 2011/2012)
- 1 in 6** children will have a developmental disability (Boyle et al., 2011)
- 1 in 68** with ASD (US) (CDC, 2014)
- 1 in 64** with ASD (GA) (CDC, 2014)

Of children with ASD

89% had documented developmental concerns before age 3, but only **44%** had a comprehensive evaluation by the age of 3 (CDC, 2014)

Identified barriers in Georgia

Awareness, service models, and diagnostic capacity



The **Georgia Department of Public Health² Autism Initiative** is designed to improve Georgia's capacity for early identification, screening, diagnosis, early intervention, and family support for children suspected of having or diagnosed with ASD. Over the last year, the Georgia DPH entered into contractual agreements with three university partners to address these areas of need identified in the *Autism Plan for Georgia*. Projects are unique in design, but based on evidence-based strategies proven to be effective in improving the system of care for children with autism and their families.

Project 1: Early Intervention Training

Marcus Autism Center³



Project 2: Positive Behavior and Visual Supports (PBVS) Project

Center for Leadership in Disability and GaLEND



Project 3: Georgia Autism Assessment Collaborative

Emory Autism Center¹



Interactive Web-Based Instruction

- Train-the-trainer model
- Interactive media illustrating effective evidence-based practice
- Five units with more than 30 hours of instruction and comprehensive evaluations

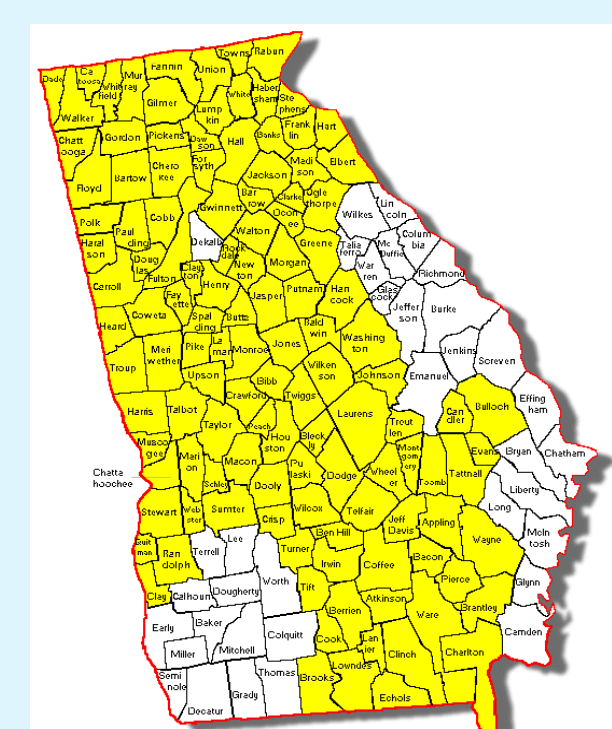
Expert Coaching

- Providers demonstrate competencies and receive feedback – either in-person or via teleconferencing with video review

Project 1 Impact

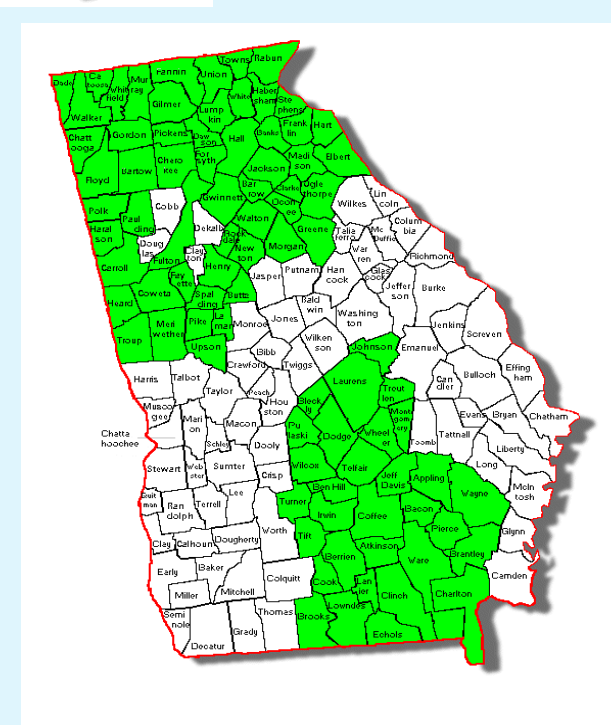
Web-Based Instruction

- 125 providers** statewide
- 12 months** of access



Expert Coaching

- 25 providers** statewide
- 12 months** (2 hrs/wk)



Initial Rollout

- 125 families** – received five, 2-hour, in-home sessions, every one to two weeks
- Brief Behavior Questionnaire and Intervention Plan** (modified) used to structure intervention
- Visual Supports** toolkits provided
- Parent coaching**

Project 2 Impact

Parent Satisfaction Ratings

- >90% agree that materials and skills were helpful
- >90% gained knowledge or skills
- >90% found sessions useful and enjoyable

In-home Interventionists Ratings

- 56% of children made gains in self-regulation
- 53% of children made gains in communication
- 56% of families implemented structured routines

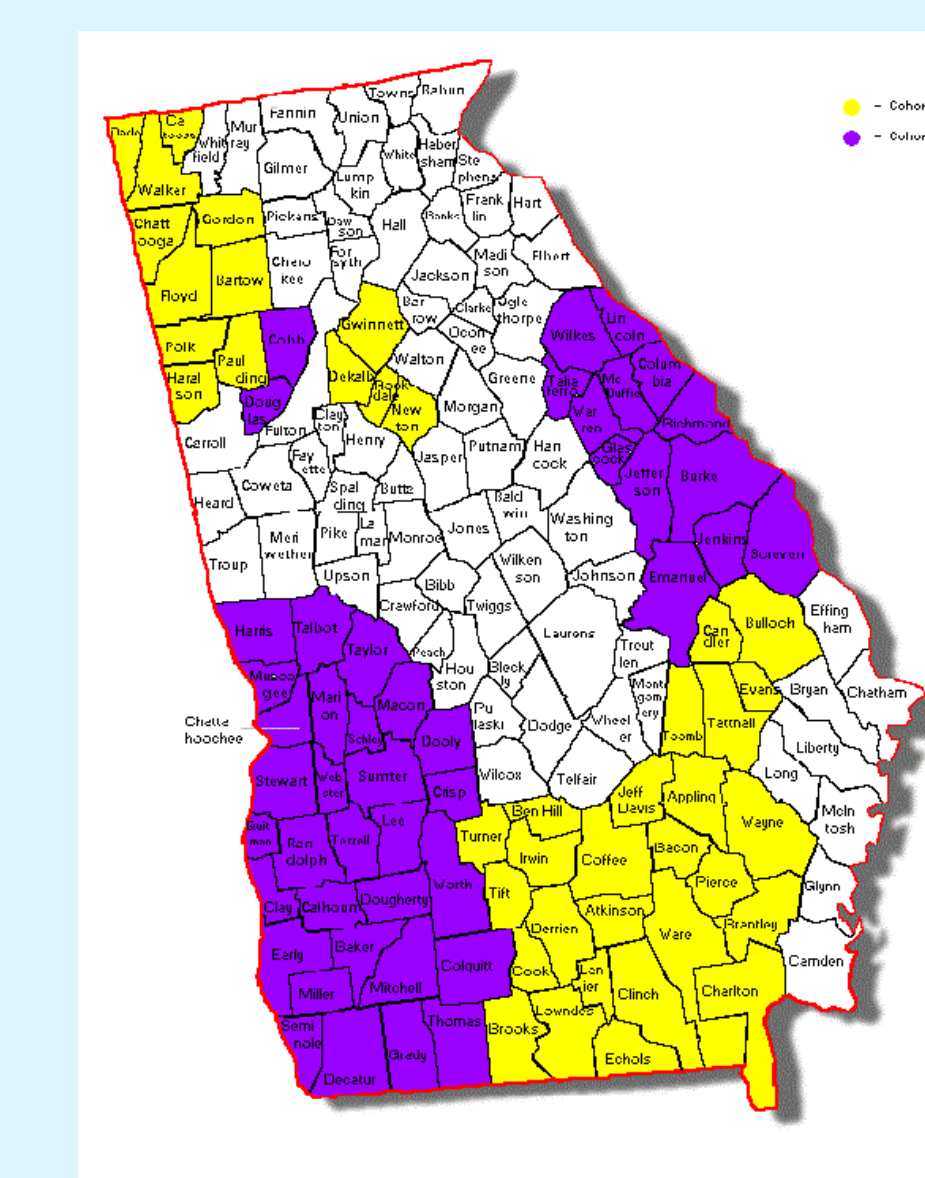


Use a QR reader to scan the code for a text document. Use the text to speech feature to have the contents of this poster read to you.

The Training Program

- 25 licensed professionals** (cohort 1)
- 20 licensed psychologists** (cohort 2)
- Focused on **ADOS-2** (Lord et al., 2012a; Lord et al., 2012b)
 - Toddler Module
 - Module 1
 - Module 2
- 2-day large group** (whole cohort) at Emory
- 2-day hands-on coaching** in health district region

Project 3 Impact



Health District	Licensed Psychologists Participating	Other Licensed Health Professionals Participating
1-1	4	0
3-4	4	1 LCSW
3-4	3	1 LCSW; 1 LPC
8-1	2	1 LPC*
9-2	2	1 LPC*
3-1	8	-
6	5	-
7	4	1 PsyD under license supervision
8-2	2	-