

The Need

• Early identification of autism spectrum disorder (ASD) is essential to ensure that children can access specialized, evidence-based interventions that can help to optimize longterm outcomes. (Zwaigenbaum, L, Bauman, M, et al. Early Identification of Autism Spectrum Disorder: Recommendations for Practice and Research. Pediatrics. 2015;136;S10)

In Washington State,

- The waitlist for an autism evaluation at a multidisciplinary diagnostic center is between six to twelve months.
- Access to Applied **Behavioral Analysis** (ABA) therapy for children on Medicaid can take as long as 2 years.

Applied Behavior Analysis (ABA) is the application of the principles of learning and motivation from Behavior Analysis, and the procedures and technology derived from those principles, to the solution of problems of social significance. Many decades of research have validated treatments based on ABA.

www.centerforautism.com/aba-therapy.aspx

The Background

The Community Asset Mapping (CAM) project is a collaboration between local communities and Washington State Maternal and Child Health Title V partners. These partners include the Washington State Department of Health, the Washington State Medical Home Partnerships Project (MHPP), and the University of Washington Leadership Education in Neurodevelopmental and Related Disabilities (LEND).

CAM staff and a network of state partners help communities strengthen local systems to screen, evaluate, diagnose and provide timely intervention services to children with autism and other developmental disabilities. CAM is a process and forum for communities to identify issues around serving all children, but especially children with special healthcare needs and their families. This is done through a community-driven process of identifying assets and challenges in how children are currently being identified and served, prioritizing opportunities to improve care, and moving forward as a community to pilot and implement improvements.

In response to the need to get children assessed for autism spectrum disorder as soon as possible within the local community, the Lewis County Autism Coalition developed the School Medical Autism Review Team (SMART). SMART is both a process and a tool for families, schools, and primary care providers to share information about a child to inform an assessment of ASD.

School Medical Autism Review Team (SMART) A Virtual Interdisciplinary Process for Autism Assessment in Washington State

The SMART Solution

School Medical Autism Review Team (SMART) is a:

- Process where primary care providers, schools, Early Intervention agencies, and families come together and share records in order to facilitate a virtual, comprehensive assessment of a child
- Process that provides a close link between a child's primary care provider (PCP) and school team, who sees the child on a daily basis
- Model that builds community capacity in rural and underserved communities who don't have access to a local multidisciplinary diagnostic center
- Mechanism that allows children to qualify for ABA therapy that is covered by Medicaid

This process reaches families who would be unable to get access to a timely assessment for autism and connected to services because of:

- distance to available diagnostic centers
- lack of transportation
- language barriers

The SMART tool

Using a shared document, the SMART tool, families are able to collect records of evaluations from their school, Early Intervention agency, local providers, and pediatrician to inform an interdisciplinary diagnosis of autism.

SMART tools

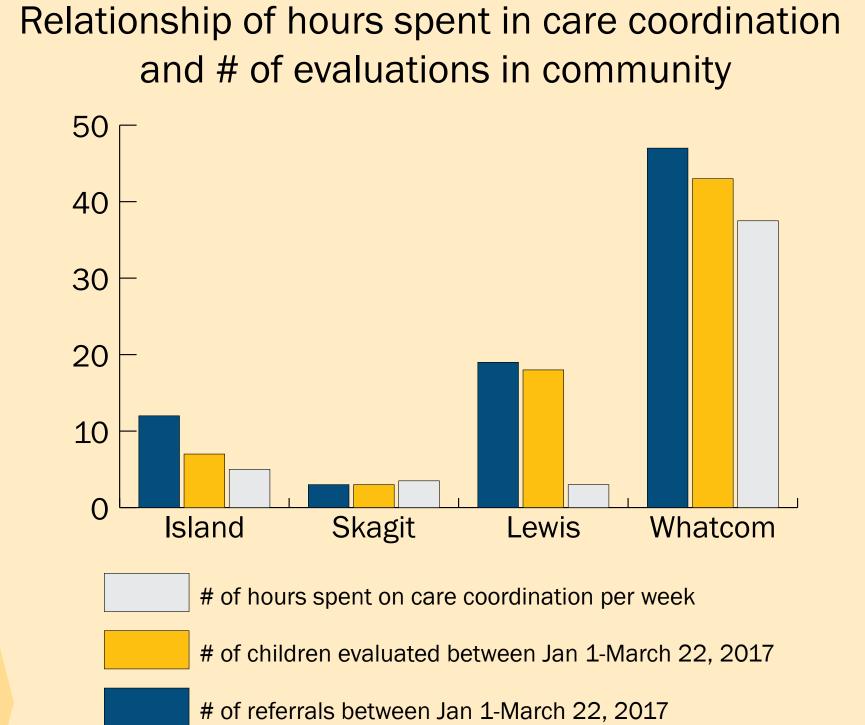
The SMART tool is available in English and Spanish and is a fillable online form.

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Care Coordination for the SMART Process

Four communities in Washington State are using the School Medical Autism Review Team(SMART) process to provide a comprehensive assessment for ASD for children in their local community.

Families are tasked with collecting all of the records from the primary care provider, the school, and other places where they receive services. The success of SMART is dependent on the ability of families to gather all of these records. This is often a barrier for families to get a timely evaluation. The mitigate this problem, communities have supported a care coordinator locally to support families in understanding the SMART process and collecting the necessary records. These local coordinators are registered nurses or community health workers.



The MHPP staff surveyed the four local coordinators to find out how much time they were spending supporting families in 🛛 🗖 CAM communities using the SMART tool gathering records for the SMART process.
CAM Communities who are starting to pilot the SMART tool

It is notable that Whatcom County's CAM community has a much higher number of referrals, evaluations, and other indicators compared to the other three CAM communities. This is because they have a full-time care coordinator (37.5 hours/week), while the other communities each have 5 or fewer hours/week available for care coordination. Rural CAM communities (Island, Skagit) get fewer referrals than CAM communities in more densely populated counties (Whatcom, Lewis).

Results

The SMART process has strengthened community collaborations and partnerships Communities reported:

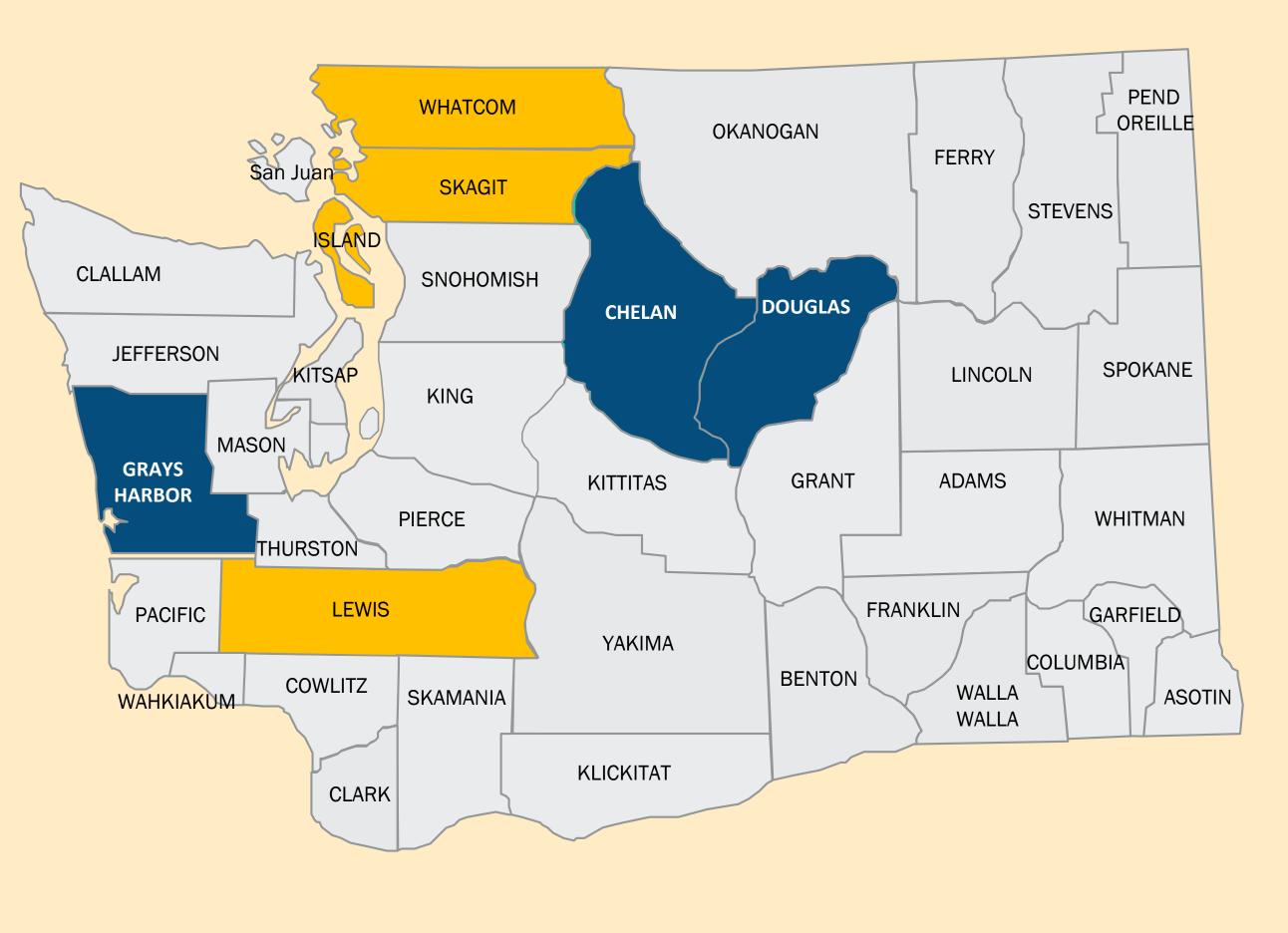
- of Health, and Lewis' work is supported by the pediatric practice in which they are located.
- The biggest challenges are:
- not enough time for the local coordinators
- a lack of needed specialty providers and services for families
- getting accurate and timely information needed from families and community provider partners

Next Steps

Plans are underway to pilot the SMART process in Chelan-Douglas Counties using HIPAA compliant ZOOM video conferencing to support virtual meetings. This will support the SMART team in doing community assessments via telemedicine.







• Most referrals come from primary care providers with a smaller number coming from parents/legal guardians and schools.

• Funding for the local coordinators comes from a variety of sources ranging from in-kind (Island) to multiple federal and community level funding sources (Whatcom). Skagit uses funding from Maternal and Child Health Block grant funds they receive from WA Department