

BHRS Partner's in Quality Workgroup Minutes
4/12/10
1:00 – 2:30 in Room 123
Lehigh County Government Center

Participants: Pat Theodore – CASSP; Tee Decker – CLIU 21; Catherine Gray – Recovery Partnership; Allison Frantz – LC HC; Kay Achenbach – LC; Robin Urenko – ARCH; Cathy Kunsch & Erin McCurdy – ASERT; Paulette Hunter – Parent; Suzanne McFadden – Access Services; Emily Leayman – Elwyn/ARCH; Samantha Walls – New Story; Ellen Hunt – ARCH/Parent; Lisa Sportelli – Parent; Corinna Bealer – CMH; Lynn Kovich – DHS; Diane Marciano – MBH

ARCH Focus Groups – feedback from parents

A list of trainings was compiled by parents and providers throughout several meetings. Areas of concern related to training were first identified. This was then prioritized and categorized to create a final list. They also identified different specialists in the area that they could start contacting.

The ARCH has not yet finalized their training contract with the County. They have already begun to offer some of the services and trainings that are on the list. Trainings given by ASERT as well as support groups and Spanish speaking support groups are already being provided.

Act 62:

Lisa put together the announcement that was distributed to advertise the Act 62 presentation. This presentation will take place on 4/16 at 10:45 in the Public Hearing Room at the Government Center. As of this meeting, 54 individuals will be attending the meeting.

Skill level of workers - trainings:

ASERT was provided a 2 year grant/contract by the Bureau of Autism Services. The purpose of this grant is to provide different trainings. ASERT provides a two day FBA training that is offered three times throughout the year. The next one will be offered next month in Bethlehem. The last one will be offered in Scranton during the summer. ASERT has also coordinated with the ARCH to offer trainings at their facility. These trainings were more informal and covered topics such as positive behavior support, what is an FBA, and antecedent interventions. Those trainings were offered both in the morning and in the evening. ASERT is currently doing a more intensive positive behavior support team leader training. This training is offered for five sessions over three months with the same group of 13 people for each session. ASERT has three regional centers. Their Lehigh center is partnered with CHOP and Drexel.

This group decided that their current focus would be on the concerns about the skill level of BHRS workers. The group will more specifically focus on BHRS providers who provide services to children with Autism and their families. By focusing on this issue, the group hopes to see better results for families and children who receive BHRS services.

It was questioned as to why the focus of the group was currently on education instead of on the results of the QIA surveys. It was clarified that providers who offer BHRS services for children with Autism were asked to commit to several of these meetings to provide their input. These providers were asked to bring to the meetings input on the different trainings they have to offer. It can then be examined what is already offered as well as what is/isn't working. The providers that were invited were specifically providers that offer BHRS services to children with Autism. The current focus of the group is to build a common curriculum resource for these providers. Once the group determines what trainings are required/needed, they can begin to look at how to find this common curriculum for providers and how it can be implemented. Providers will need to examine if they have the necessary staff to implement the curriculum.

Access Services: For newly hired TSS staff, they receive a basic training about the agency on their first day. On the second day they receive a more job specific training related to documentation, confidentiality, and their role as a TSS. Each TSS must complete 15 hours of training before they can begin working with a child.

Access also utilizes an online training program called Essential Learning. Access pays a monthly fee for the use of the trainings offered by Essential Learning. The website includes over 400 online trainings. When a TSS is assigned to work with a child, they are required to complete any additional online trainings that would be relevant to the child's diagnosis. By completing these additional trainings they can better understand the child's needs and what their diagnosis will require. Each training offered is roughly 3 hours and the worker must receive an 85 on the test to pass. The tests are generally not easy and the individual must really pay attention to the information to in order to pass the test. Once the individual completes the test, they meet with a Supervisor to review what they learned. Suzanne will provide information to the group on the Essential Learning website. Allison questioned as to whether there are published outcomes as to the effectiveness of the trainings this website offers. If this website is accredited and reliable, it could be utilized by other providers. Access reported that it is costly but it is very effective for their staff. Staff can access these trainings more easily and at a time convenient for them.

TSS staff are also required to complete trainings in the office on things such as safe crisis management, first aid, CPR, Autism, and Bi-polar diagnoses. TSS staff also sits in on FBA training prior to working with the child so that they are familiar with the FBA process. Access tries to match the TSS worker with the family/child in terms of their areas of expertise. Overall it is mandatory that all TSS staff are properly trained before they begin working with a child.

Emily reported that Temple has an online Bachelors level course on Autism. It is a full semester course that is free. The ARCH has requested additional information on this course. It can be troublesome to get staff to trainings and an online course would make it more convenient/accessible.

Catherine from Recovery Partnership questioned as to whether there is a training offered on how to interact with families. She felt there should be a training on respect/sensitivity when working with families. Access requires training for their TSS on their role as a TSS worker. That training does include information on how to interact with families. Access agreed that there should be a separate training specific to interacting with families. It is important that TSS workers know how to interact with parents in a respectful manner. The parents know their child best and the TSS should collaborate with the parents when working with the child. If a parent

says they tried it already, the TSS worker should work with the parent to figure out why it didn't work and if it could be done differently to be effective. Recovery Partnership offers sensitivity training but it is geared to the adult population. In the future the group should look at how the workers should interact with the family. The group should also examine the importance of inter-agency collaboration when working with the child.

IU: Tee will email Pat the trainings they have to offer at the IU. TSS staff at the IU do need to complete specific trainings and be informed of what an FBA is. They also receive an overview of Autism. Because the IU is also educationally based, they continually have different trainings offered to staff. These trainings are also offered to parents. The trainings are taped and can be viewed at another time. There is a week in August that is their Autism Networking which is offered to all staff. It has a different focus each year. For example one year it was focused on TEACCH. The TSS at the IU are also permitted to work during the school day with the child as behavior support. They can then work with the child at home as a TSS. Overlapping the school staff with the staff in the home has proven to be beneficial to their children with Autism. This connection between the work and the school system is important.

Elwyn: They offer basic trainings on FBA. They are also in the process of developing specific trainings as they start to see what areas need trainings. One area they are focusing on is training staff on typical development. This way they can have a perspective when working with children on the spectrum. They are also working on offering specific diagnostic trainings – such as characteristics of children with Aspergers diagnosis. They provide the typical trainings for new employees such as first aid, CPR, and fire safety. These types of trainings are mandated by the state for all providers to give to staff. They have also been sending staff to trainings on verbal behavior, integrated approach, and summer camps. They have partnered with ASERT to offer trainings at the ARCH which are available to their staff.

A parent questioned whether providers ever open up the trainings in their agency to other providers? This does occur in some cases; i.e. ASERT trainings offered at the ARCH. If these providers could share their trainings with each other it could be beneficial. This could take away costs from providers if they share their resources/trainings with each other. In Berks County there was something like this for any new TSS worker at New Story. However, the manner in which it was done did not work and a lot of individuals did not show up to the trainings.

New Story: They require 15 hours of training for TSS workers. They also have their BSCs attend specific trainings and relay that information to their TSS workers. TSS are encouraged to locate their own additional trainings to attend. The TSS workers give feedback on what types of trainings they think are most needed. At New Story, they also encourage online training, Drexel trainings, and Autism Society trainings. They also pay mileage for TSS to attend trainings that are offered outside of the County.

A parent questioned if the providers tier salaries to staff. i.e. a TSS with more trainings would receive a higher salary than a TSS with less trainings. Most of the providers stated that salary does not vary based on the level of trainings for TSS workers.

Tee suggested the idea of a Reward for Quality (RFQ) program. The IU has launched a RFQ program this past year. They did it with outpatient, drug and alcohol, mental health, ICM,

school-based partial, and an RTF program. Tee reported that RFQ is going to be one of the mandates CMS has moving forward because of budget restraints and the healthcare reform. MBH could look into this. Providers with staff giving high quality of care would receive compensation. The outcomes that would meet the RFQ program would need to be defined. For example, just because a child is not making dramatic progress does not mean the TSS or BSC is providing inadequate services. The outcomes as to what 'good quality care' is would need to be defined and relevant. This type of program could be utilized not only for BHRS, but for other services.

For the next meeting Pat will contact the providers who were unable to attend the meeting to receive their input on what trainings they offer. Providers that did attend the meeting should also send their information to Pat so that it can be compiled in one document. Once this is compiled, the group can begin to look at commonalties between the providers and identify which providers have expertise in different areas. The group can then begin to create a common curriculum for BHRS providers. Information on Essential Learning will also be forwarded to the group.