



DEPARTMENT OF ECONOMIC SECURITY

*Your Partner For A Stronger Arizona*

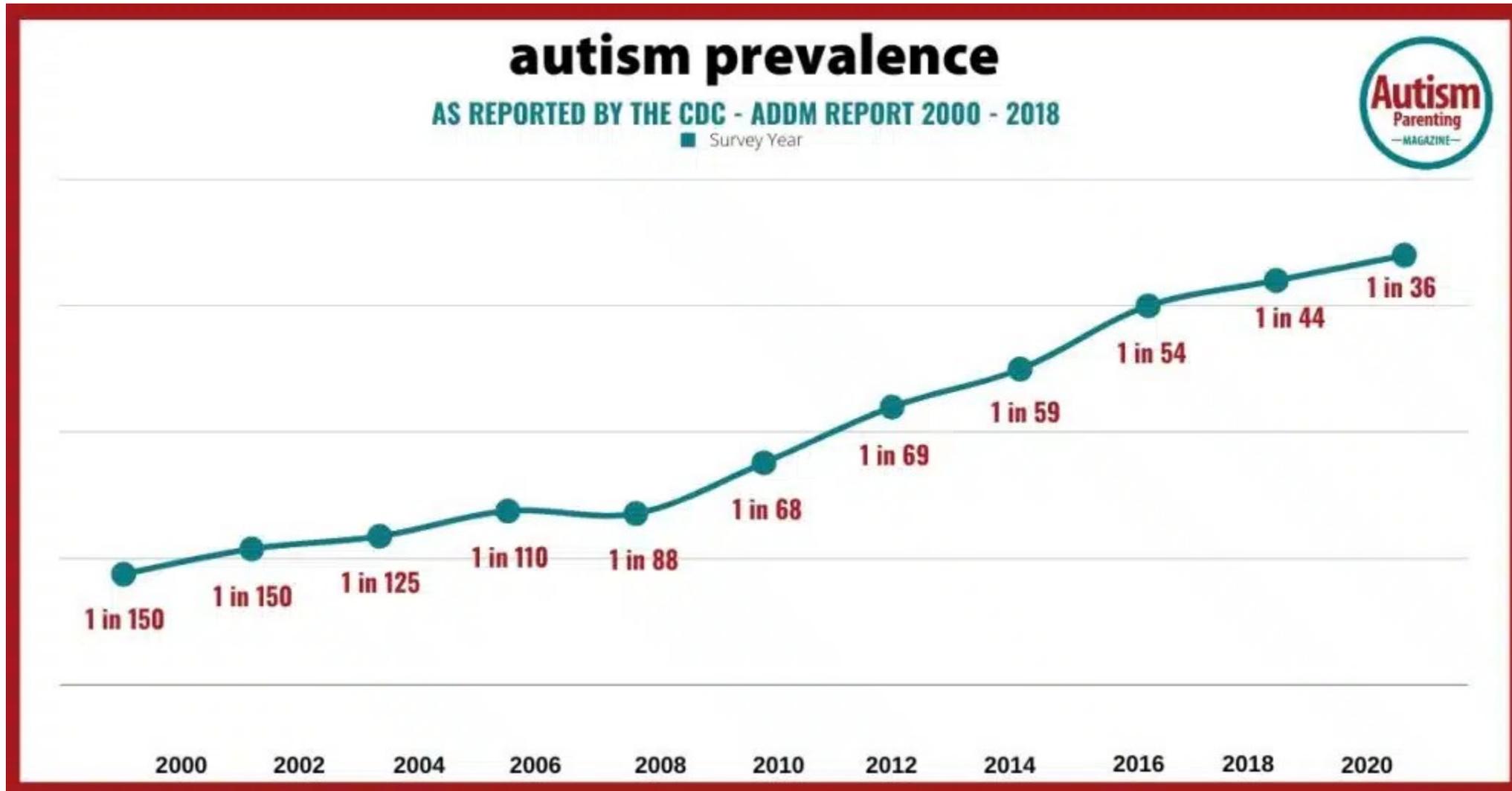


**AzEIP Programmatic Meeting - Autism Screenings**  
**October 24, 2023**

# Purpose of Today's Presentation

Improve the usage of screening tools for Autism Spectrum Disorder (ASD) to promote early identification of ASD in the state of Arizona.

# Autism Prevalence

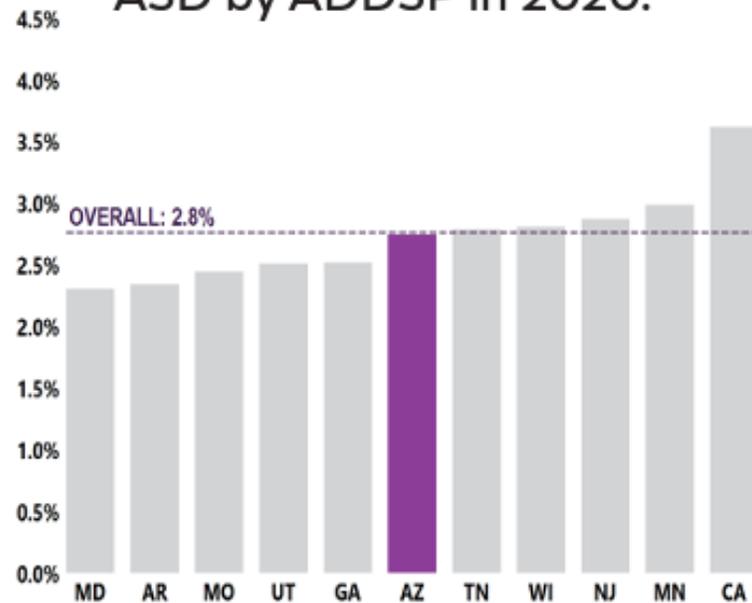


# Identification of ASD in Arizona

## Arizona Developmental Disabilities Surveillance Program (ADDSP)

### 1 in 36

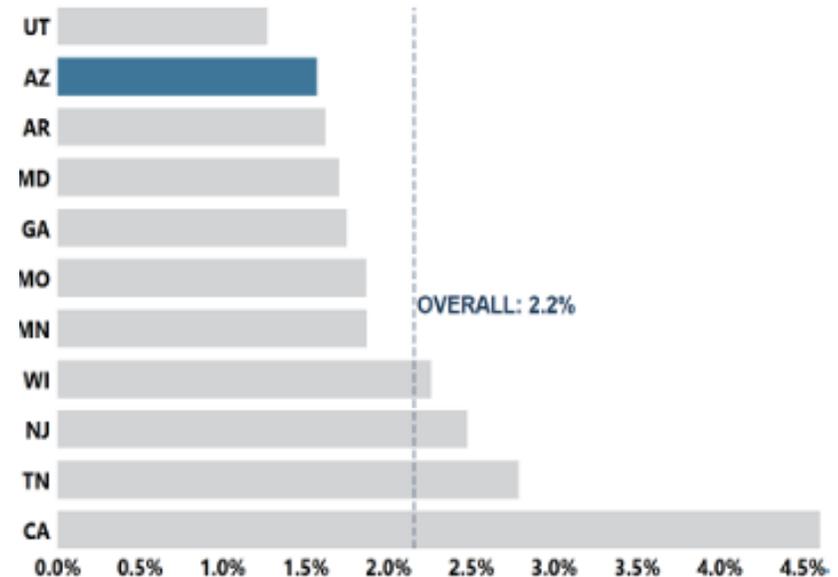
Or 2.7% of 8-year-old children were identified with ASD by ADDSP in 2020.



This percentage is similar to the overall percentage identified with ASD (2.8%) in all communities where CDC tracked ASD among 8-year-olds in 2020.

### 1 in 64

Or 1.6% of 4-year-old children were identified with ASD by ADDSP in 2020.



This percentage is lower than the overall percentage identified with ASD (2.2%) in all communities where CDC tracked ASD among 4-year-olds in 2020.

# AzEIP Policy Manual: 3.7.3 (c)

An autism screening will be offered to any AzEIP eligible child if autism is ever suspected to be the child's underlying diagnosis.

# When Service Providers Must Offer An Autism Screening

## The Child is AzEIP Eligible

- If a parent expresses concerns their AzEIP child may have autism
- Service Providers observe or identify characteristics in an AzEIP child
  - Child and Family Assessment
  - Individualized Family Service Plan Meeting
  - During home visits
  - Team Meeting discussions
- Combination of developmental delays typically associated with an Autism diagnosis

# When To Offer an Autism Screening Best Practice

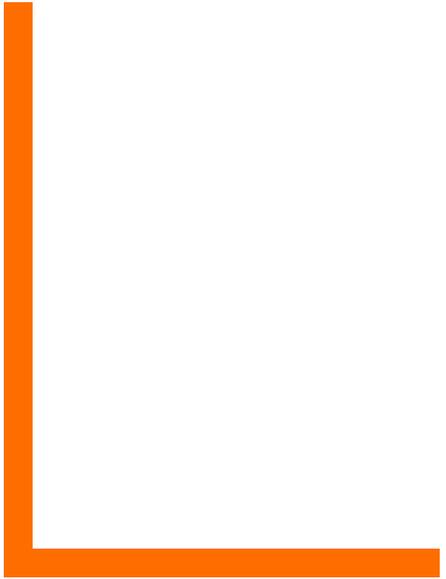
## **AzEIP Eligibility has not been determined**

### During Initial Visit or Evaluation

- If a parent expresses concerns their child may have autism
- Red flags are observed
  - During an Initial Visit
  - Evaluation
  - Team Meeting discussions (Welcome to the Program)
- Combination of developmental delays typically associated with an Autism diagnosis



# **Discussing an Autism Screening with the Family**



# Obtain Appropriate Consents

- Initial Visit - Consent to Screen
- Evaluation - Consent to Evaluate
- AzEIP Eligible Children - Consent for Assessment

# Approved AzEIP Autism Screening Tools

- [Modified Checklist for Autism in Toddlers Revised \(M-CHAT-R/F\)](#)
  - Parent-completed questionnaire designed to identify children at risk for autism in the general population
  - Designed for children 16 months to 30 months
  - Takes between 2 and 5 minutes to administer
- [Screening Tool for Autism in Toddlers and Young Children \(STAT\)](#)
  - Interactive screening tool designed for children when developmental concerns are suspected
  - Consists of 12 activities assessing play, communication, and imitation skills and takes 20 minutes to administer
  - Designed for children 24 months to 36 months

# What is the M-CHAT-R/F?

- “Modified Checklist for Autism in Toddlers, Revised with Follow-Up”  
Robins, Fein & Barton, 2009
- A screening tool used to identify young children at risk for autism
- Screens children whose diagnosis might be missed until much later
- A two-stage, parent-reporting tool
- Current version includes 20 Yes/No questions
- Written at the 6th grade reading level
- Available in multiple languages
- Scoring is easy and usually takes 2-5 minutes

# Developmental Components of the M-CHAT-R/F

- Social play
- Social interest
- Pretend play –using objects/ toys as though they have other properties or identities
- Joint attention –sharing of an activity with a partner
- Protodeclarative pointing –a joint attention behavior, in which the point is intended to share
- Use of expressive and receptive language
- Functional play –objects used as intended
- Protoimperative pointing –use of the index finger to obtain or name an object (a non-social purpose).
- Motor development
- Rough and tumble play
- Sensory Impairment

# Which Providers Can Complete an M-CHAT-R/F

- Service Coordinator
- Developmental Special Instructionist
- Occupational Therapist
- Physical Therapist
- Speech and Language Therapist
- Teacher of the Deaf
- Teacher of the Visually Impaired
- Social Worker
- Psychologist

# Completing the M-CHAT-R

- Obtain informed written consent from parent
- Ask parent how they would like to complete the M-CHAT-R
  - Emailed to parent
  - Provider Calls and supports parent over the phone
  - Provider visits with parent

# Sample Instructions for Parent

“We are sending you an Autism screening. There will be 20 yes/no questions. When answering these questions about your child, keep in mind how your child usually behaves. If you have seen your child do the behavior a few times, but he or she does not usually do it, then please answer no.”

# Parent Completion of M-CHAT-R

## M-CHAT

Please fill out the following about how your child usually is. Please try to answer every question. If the behavior is rare (e.g., you've seen it once or twice), please answer as if the child does not do it.

- |  |     |    |
|--|-----|----|
| 1. Does your child enjoy being swung, bounced on your knee, etc.?  | Yes | No |
| 2. Does your child take an interest in other children?   | Yes | No |
| 3. Does your child like climbing on things, such as up stairs?   | Yes | No |
| 4. Does your child enjoy playing peek-a-boo/hide-and-seek?   | Yes | No |
| 5. Does your child ever pretend, for example, to talk on the phone or take care of a doll or pretend other things?       | Yes | No |
| 6. Does your child ever use his/her index finger to point, to ask for something?   | Yes | No |
| 7. Does your child ever use his/her index finger to point, to indicate interest in something?                            | Yes | No |
| 8. Can your child play properly with small toys (e.g. cars or blocks) without just mouthing, fiddling, or dropping them? | Yes | No |
| 9. Does your child ever bring objects over to you (parent) to show you something?  | Yes | No |
| 10. Does your child look you in the eye for more than a second or two?   | Yes | No |
| 11. Does your child ever seem oversensitive to noise? (e.g., plugging ears)  | Yes | No |
| 12. Does your child smile in response to your face or your smile?  | Yes | No |
| 13. Does your child imitate you? (e.g., you make a face-will your child imitate it?)                                     | Yes | No |
| 14. Does your child respond to his/her name when you call?   | Yes | No |
| 15. If you point at a toy across the room, does your child look at it?   | Yes | No |
| 16. Does your child walk?  | Yes | No |
| 17. Does your child look at things you are looking at?   | Yes | No |
| 18. Does your child make unusual finger movements near his/her face?   | Yes | No |
| 19. Does your child try to attract your attention to his/her own activity?   | Yes | No |
| 20. Have you ever wondered if your child is deaf?  | Yes | No |
| 21. Does your child understand what people say?  | Yes | No |
| 22. Does your child sometimes stare at nothing or wander with no purpose?  | Yes | No |
| 23. Does your child look at your face to check your reaction when faced with something unfamiliar?                       | Yes | No |

- Answer based on how your child usually is
- Answer every question
- If you have only seen a behavior once or twice, mark it as the child does not do it

# Scoring the M-CHAT R/F

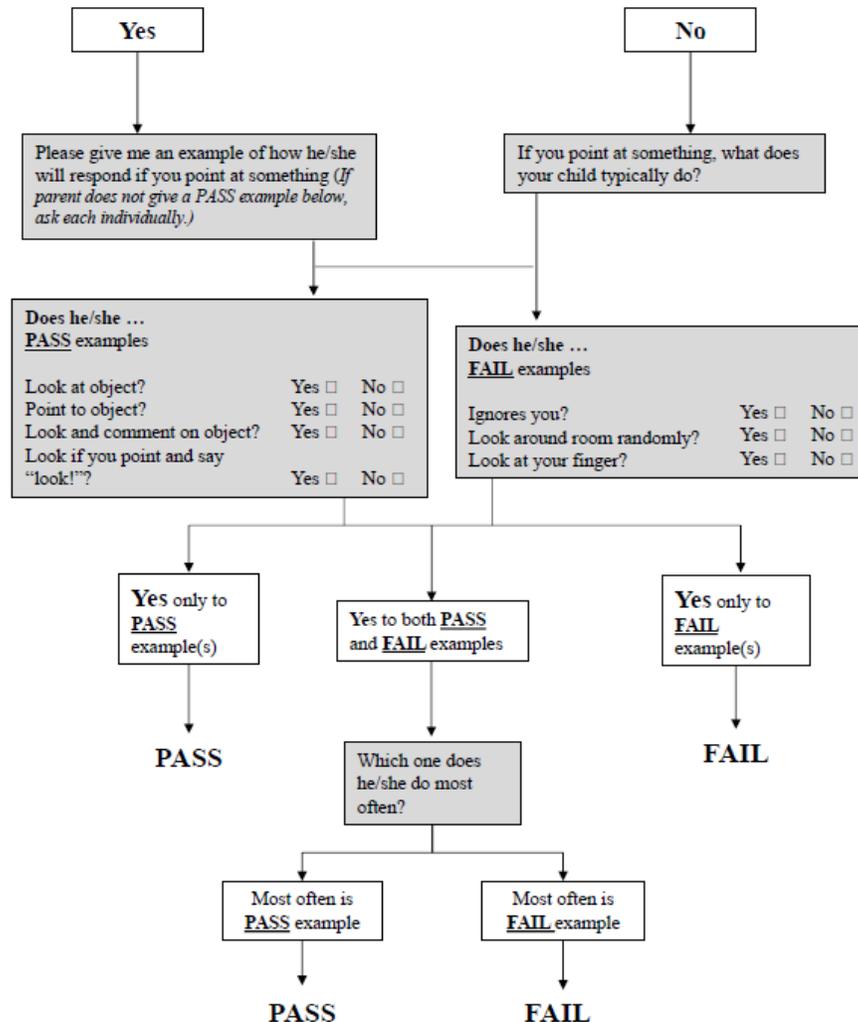
- › **LOW-RISK: Total Score is 0-2;** if child is younger than 24 months, screen again after second birthday. No further action required unless surveillance indicates risk for ASD.
- › **MEDIUM-RISK: Total Score is 3-7;** Administer the Follow-Up (second stage of M-CHAT-R/F) to get additional information about at-risk responses.
  - If M-CHAT-R/F score remains at 2 or higher, the child has screened positive. Action required: refer child for diagnostic evaluation.
  - If score on Follow-Up is 0-1, child has screened negative. No further action required unless surveillance indicates risk for ASD. If a child screened negative and the family and provider continues to have concerns a follow-up M-CHAT-R/F can be completed.
- › **HIGH-RISK: Total Score is 8-20;** It is acceptable to bypass the Follow-Up and refer immediately for diagnostic evaluation.

# Completing the M-CHAT-R/F

- Provider scores the M-CHAT-R
- If the child screens Medium Risk or High Risk
  - Select the Follow-Up Interview Questions based on which items the child failed
  - Only items that originally failed need to be administered for follow-up
- Provider conducts Follow-Up Interview following the flowchart format
- Provider scores responses to each item on the M-CHAT R/F Scoring Sheet
- Support family in identifying their decision on how to proceed

# M-CHAT-R Follow-Up questions

1. If you point at something across the room, does \_\_\_\_\_ look at it?



## Interview if Medium Risk or High Risk

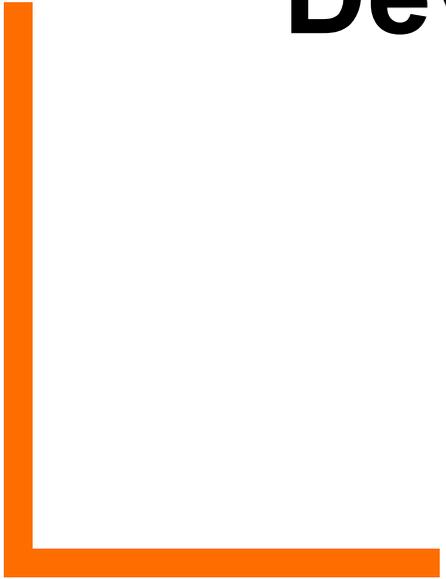
- Each item on the M-CHAT-R has a corresponding Follow-up interview question page
- For each failed item, go to the Follow-up Interview question page and go through the questions
- Follow-up on questions identified as “maybe”
- Depending on the responses, you may change a FAIL to a PASS or keep it as a FAIL
- Keep track of the total number of FAILS after the Interview

# Explaining the Results

- What the score is
- What were the at-risk items
- Validate parent concerns & observations
- What is the recommendation
- What are next steps



# **Developmental/Autism Evaluation**



# Preparing Families to Schedule an Evaluation

Discuss Developmental/Autism evaluation options:

- Developmental Pediatrician who has expertise in diagnosing Autism
- Licensed Psychologist
- Neurologist
- Pediatrician with specialized training in the diagnosis of Autism
- Psychiatrist

# Preparing Families to Schedule an Evaluation 2

Encourage family to contact insurance company to identify:

- Insurance coverage related to Developmental/Autism evaluations
- Providers that are in network

Explore community programs available to help with costs

# Preparing Families to Schedule an Evaluation 3

Questions for families to consider when contacting potential provider to complete a Developmental/Autism Evaluation:

- What does your evaluation process look like?
- How many sessions?
- How long is your wait list?
- What is the cost of an evaluation?
- Do you have scholarships available?
- Are you in network with my insurance?
- How long will it take to get the results?
- When can I expect a written report?

# Following Up With Families After the Evaluation

- Reviewing the evaluation report with the family
- Offering emotional support
- Add to agenda for team meeting/coaching
- How will we support this family
- Ask to have family provide us a copy of the report for child's file
- Support family in next steps/any upcoming appointments
- Discussing applying for DDD if not already DDD eligible

# Child has Received an Autism Diagnosis Now What

- DDD Eligibility Application Packet
- Connect families with resources and supports
- Raising Special Kids
- Apply for ALTCS:
  - If the IFSP team determines that the child may be eligible for the Arizona Long-Term Care System (ALTCS), the service coordinator will assist the family in applying
  - If the family requests assistance

# Remember the Documentation!

## Documentation in the child's record must include:

- Consent Form
- The screening tool used, date completed and the name of the providers who conducted the screening
- Contact Log including
  - Discussion of the screening results
  - Recommendations
  - Identification that copy of M-CHAT-R was provided to the family
  - Next steps taken to support the family

***Remember: If it is not documented, it did not happen***

# Remember the Documentation 2!

## Documentation in the child's record may include if completed

- Copies of the
  - Developmental/Autism Evaluation
  - DDD Eligibility Application
  - ALTCS application

*Again Remember: If it is not documented, it did not happen*

# Autism Screening Reminders

- An Autism screening must be offered to any AzEIP eligible child if the team suspects Autism as an underlying diagnosis or if a family requests one
- The AzEIP Team must follow up with the family on the results of the Developmental/Autism Evaluation

# General Reminders

- When a family resides in an Unorganized Territory and there is a question regarding which school district the PEA should be sent to, the SC should email ADE at [c2binbox@azed.gov](mailto:c2binbox@azed.gov) requesting assistance. The email should:
  - Be sent as soon as the SC is aware there is a question about the school district
  - Include the date of the scheduled TPM (or the TPM due date if not yet scheduled)
- Only one PEA form is completed for a child; updates when a family moves to a new address, new School District, new Service Coordinators, etc. should be made on the original form

# General Reminders 2

- Incident Reports - be sure to include DDD in the email and for notification of an incident
  - District Central: [DDDCentrallR@azdes.gov](mailto:DDDCentrallR@azdes.gov) Fax: 602-532-5511
    - AzEIP Regions 2, 4a, 4b, 5
  - District East: [DDDEastIR@azdes.gov](mailto:DDDEastIR@azdes.gov) Fax: 480-890-7138
    - AzEIP Regions: 7, 8, 9
  - District North: [DDDDistrictNorthIncidentReports@azdes.gov](mailto:DDDDistrictNorthIncidentReports@azdes.gov) Fax: 928-773-8496
    - AzEIP Regions: 10, 17, 18, 19, 20, 21, 22
  - District South: [DDD2IR@azdes.gov](mailto:DDD2IR@azdes.gov) Fax: 520-628-6682
    - AzEIP Regions: 11, 12, 13, 14, 15 16
  - District West: [DDDWestIR@azdes.gov](mailto:DDDWestIR@azdes.gov) Fax: 602-771-1857
    - AzEIP Regions: 1, 3, 6

# General Reminders 3

- Modality of services is based on the family's needs, preferences, and requests
  - If a family identifies virtual or hybrid services are preferred, the team members should document the decision in their Contact Logs
- Prior to the end of the IFSP meeting, all team members should ensure services are entered correctly on the IFSP Services Page as was discussed and agreed upon
- IFSP Team Member page:
  - All IFSP team members who were present for the IFSP meeting should initial the IFSP
  - All Core Team Members must be identified under the Core Team Members section

# General Reminders 4

- I-TEAMS data entry for AHCCCS ID #s when only a “P” number is available
  - On the Insurance page enter the AHCCCS ID as A99999999 and enter the “P” number under the Policy Number
  - Add a note in the comments section on the Child Demographics page
  - When the AHCCCS ID “A” number is obtained, update the AHCCCS ID on the Insurance page
  - Email [AzEIPITEAMS@azdes.gov](mailto:AzEIPITEAMS@azdes.gov) for assistance if needed

The screenshot displays a form with the following fields and values:

*Consent Start Date	07/27/2022	*Child's AHCCCS ID	A99999999	Plan Type	
Consent Expiry Date	02/16/2023	*Insured's Date of Birth		Policy Holder's Name	
*Insurance Type	Public	Policy Holder's Employer		*Policy Number	P12345678
*Insurance Name	MERCY CARE DCS CHP P.O. BOX 52089 PHOENI	Group Number			
*Coverage Start Date					

# Resources we would like to share

- AzEIP Policy Manual
- AzEIP Procedure Manual
- AzEIP Billing Manual
- M-CHAT-R/F
- STAT
- CDC Milestone Tracker App
- [AZ STEPS Expulsion Prevention - Southwest Human Development](#): If a child is facing potential expulsion from preschool or a childcare program this resource can help!

# Autism Resources

- Autism Society of America
- National Institutes of Health
- First Signs
- CDC/AAP ACT Early
- Identify-First language
- Data & Statistics on Autism Spectrum Disorder/CDC
- AAP Autism Toolkit
- Training Scenario: Talking with Families about Assessment Results
- CDC Community Report on Autism 2023
- CDC'S LEARN THE SIGNS. ACT EARLY.
- “Learn the Signs. Act Early” Autism Fact Sheet English Spanish
- First Concern to Action Tool Kit

# Glossary/Acronyms

**AADSP:** Arizona Developmental Disabilities Surveillance Program

**ADE:** Arizona Department of Education

**AHCCCS:** Arizona Health Care Cost Containment System

**ALTCS:** Arizona Long Term Care System

**ASD:** Autism Spectrum Disorder

**ASDB:** Arizona State Schools for the Deaf and the Blind

**AzEIP:** Arizona Early Intervention Program

**DDD:** Division of Developmental Disabilities

**Developmental/Autism Evaluation:** evaluation that is completed when autism is suspected

**IFSP:** Individualized Family Service Plan

**M-CHAT-R:** Modified Checklist for Autism in Toddlers - Revised

**M-CHAT-R/F-** Modified Checklist for Autism in Toddlers- Revised/ Follow Up

**PEA:** Public Education Agency

**QR:** Quick Reference

**SC:** Service Coordinator

**SPA:** Service Providing Agency

**STAT:** Screening Tool for Autism in Toddlers and Young Children

**TPM:** Transition Planning Meeting

# Thank you for attending!

## AzEIP Quality Improvement Team

- **Erica Melies**, AzEIP Quality Improvement Manager
- **Tanya Goitia**, AzEIP Continuous Quality Improvement Coordinator
- **Lidia Gonzales**, AzEIP Continuous Quality Improvement Coordinator
- **Pamela Meurer**, AzEIP Continuous Quality Improvement Coordinator
- **Anissa Albert**, AzEIP Technical Assistance Specialist
- **Amanda Tipotsch**, AzEIP Technical Assistance Specialist
- **Chantelle Curtis**, AzEIP Professional Development Coordinator
- **Amanda Honeywood**, AzEIP Administrative Assistant
- **Jessica Jimmerson**, AzEIP Policy Analyst