

IN-ABC

Indiana Association of Behavioral Consultants
www.inabc.org

Through professional advocacy, support and development, IN-ABC promotes effective, ethical and quality behavioral services.

4/4/08 Meeting Minutes

Board Members Present:

North Central Region (Globe Star): Gail Kahl

Central Region (Meaningful Day Services): Sandra Givens, Kelly Hartman

Southern Region (Milestones): Rob Westcott, Sue Bauer

Call to order

Discussion Old Business: (no old business)

President: Gail Kahl - New Business

- **Legislative Action**
(see "Legislative" attachment)
- **IPMG Conference**
May 1, 2008. Register at www.gotoipmg.com
- **IN-Train**
IN-Train has completed the video taping of the FBA curriculum approved by DDRS. It will be offered as a web course through IIDC/IU-Bloomington in June 2008. IN-ABC members Mari Shawcroft, Ann Baloski, Jim Sanders and Gail Kahl co-wrote the curriculum with Dr. Steve Adelmeyer and participated in the video taping of each module. BSP module should be available by Fall 2008.
- **IN-ABC Conference**
The planning of the IN-ABC conference on October 29/30 should be completed by the end of April. All speakers, vendors, and exhibitors are completing contracts. Upon the receipt of those, fliers will be distributed.

Treasurer Report: Rob Westcott – financial report (see “Treasurer” attachment)

Secretary Report: Sue Bauer – 2008 membership (see “Secretary” attachment)

Liaison Report: Kelly Hartman (see “Liaison” attachment)

Committee Reports:

- **Ethics Committee:** Fritz Kruggel (see “Ethics” attachment)
- **Professional Credentialing Committee:** CJ Gallihugh (see “Credentialing” attachment)
- **Conference Committee:** Kelly Howard (see New Business)

Sub Committees:

- **Rate Setting:** Kelly Hartman (no updates)
- **Quality Outcomes:** Gail Kahl (see “Quality” attachment)
- **Self-Advocates:** Gail Kahl (no updates)

CEU Presentations:

North Central: Ways to Facilitate Communication
Trainer: John Harris, PhD., HSPP

Central: Selection of and Interpretation of Assessment Tools
Trainers: Linda Bell and Kristen Palmer, Opportunities for Positive Growth, Inc.

Southern: Autism
Trainer: Jennifer Heassig, MA, RBC

Respectfully submitted by: Sue Bauer, Secretary

INABC PROFESSIONAL LIAISON REPORT:

OASIS: This round of public forums have been well attended by providers and families. The HOT topic right now is DAYS rates. Some providers are happy with the proposed methodology - some are not. The big difference is that rates are more equal with RHSS rates (\$23.74/hour for community based)- and are billed based on **staffing hour**. This will certainly allow people that have high behavioral needs to get more individualized day programming - IF THEIR OASIS allocation allows for it. But for those people who are sitting at home (now DAYS, no job) with 1:1 staffing - for the same \$ amount per hour they can be participating in a day program working toward vocational objectives and community integration. Overall, the state is getting a lot of positive feedback from families who are beginning to feel empowered by the concept of OASIS and actually having some control over how resources are allocated for their loved one in services. There will be a web based interactive budgeting tool that families will test mid-April. This will show an individuals allocation amount - how it would be spent in a BEST PRACTICE situation - and allow families to move resources from service to service, based on the their wants/needs for the person in services. **It will be important in the next several weeks/months that you maintain close communication with case managers and families as they will be "allocating" their resources - and you want them to understand how much time in hours it takes for you to accomplish BMAN supports - as you don't want them to allocate only that time they SEE you.**

IPMG: May 1st at the Marriott East in Indianapolis, IPMG is having a one day conference that is all encompassing. All providers/case managers are invited. Break out session will cut across all disciplines and will be based on best practices and person centered planning. Both Gail and myself will be presenting that day on behalf of INABC. FSSA staff will also be presenting. The website for more information is <http://www.gotoipmg.com/2008/03/lets-collaborate-may-1-2008.php> I highly recommend attendance - we need to see lots of BC's there!!

InSync: As many of you know this web-based tool through IPMG is used to see if your geography/expertise matches up with potential new consumers who are looking for service providers. Many of you also know that the tool isn't used broadly and isn't especially user friendly - just an FYI that this tool is being overhauled is set to be released in the new and improved form on 5/1/08.

BMAN credentials: April 1st was your deadline. All credentials were to be provided to Arnetta Jackson in Provider Relations. Essentially - if you have not turned in your information - you are out of compliance with 460 IAC 6. While you likely can expect - as a first step - to hear from the state. There will be consequences for not submitting the appropriate documents. If you are reading this and have not turned in your paperwork - I would STRONGLY suggest you get this pulled together NOW and get it to Arnetta Jackson. Without these docs - you are in jeopardy of losing your status as a provider and could be forced to reapply to secure a provider number.

Psychiatrist capacity: We continue to struggle to find enough psychiatrists who are taking referrals - and who will see our folks on an ongoing basis. Outreach/Crisis has been informed of this and we continue to work with them and OMPP to work through this. Please feel free to let me know of resources that may be out there and struggles you continue to have as I will continue to work with the state to address this.

BMAN in school settings: A policy was issued by BDDS on March 4th and went into effect this week. You all received this via IndianaABC email - if you missed it, it might be something you want to check it out - especially if you work with school aged kids on your caseload. https://myshare.in.gov/fssa/ddrs/Quarterly%20Bulletins/20080304_DDRS%20Policy%20Bulletin%201Q08.rtf

Monthly reports are REQUIRED: There continues to be questions floating about on whether BMAN providers have to do monthly or quarterly documentation. We have communicated this

several times - again, do not put your compliance with 460 on the line. Please see the Annual Plan bulletin at https://myshare.in.gov/fssa/ddrs/Bulletins/20070518_BDDS%20Communication%20%20Annual%20Plan%20Finale.rtf

As always - if you have questions - or need anything whatsoever from me - please do not hesitate in letting me know. This year will be a bit more of a challenge for me to see you all as frequently - so I will rely on E-communications to hear of your concerns and needs. Hope 2008 is off to a great start for all of you!!

Kelly Hartman, MA

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March 30, 2008 (for 4/4/08 meeting)

Secretary Report

2008 Membership:

43 membership applications (28 individuals, 15 agencies) have been submitted as of 3/30/08.

There are 7 new memberships (5 individuals, 2 agencies) in 2008.

There are 143 consultants on the current 2008 membership list.

2008 Membership Detail:

34 members (19 individuals, 15 agencies) provided the requested information on the membership application pertaining to number of clients served and the funding source*.

In total, members reported that they serve:

2233 clients receiving behavioral supports via Waiver Funding.

55 clients receiving behavior supports via state-line funding.

454 clients receiving behavior supports via other funding.

*9 members (all individuals) did not report this information on the membership application.

2007 Membership:

15 memberships (6 agencies, 9 individuals) from 2007 have not renewed in 2008.

There were 120 consultants on the membership list in 2007.

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March 26, 2008 (for 4/4/08 meeting)

Treasurer Report

Current Balance / Funds as of 3/26/08: \$13,308 – for reference, the standing balance 3/07 was \$13,665

Expenditures for first quarter 2008: \$1100 conference display materials, \$4000 Liaison Stipend

Membership Revenue for 2008: Total Membership Revenue to date 2008 \$9477 – for reference Total Membership Revenue 2007 was \$9450 and Membership Revenue 2006 was \$6782

Membership information as of 3/26/08: Sue may have more accurate records, but treasurer records show that approximately 15 memberships from 2007 have not been renewed – including eight individual memberships and seven agency memberships.

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March 28, 2008

Ethics Committee Report to IN-ABC Executive Board

Ethics committee received one ethics violation report in early February. Complaint was reviewed and investigation was determined appropriate by ethics committee.

Investigation was concluded and findings forwarded to relevant parties. Additional follow up remains in process and it is anticipated issue will be resolved before end of April, 2008.

No other violation reports were received. A potential report was presented to Ethics Committee chair by an employee of the Bureau of Developmental Disabilities Services (BDDS), however ethical concerns are believed to involve non-member individual/entity. Violation report information was forwarded to BDDS employee as per discussions regarding follow up procedures in the event new information enables reporting of the matter.

Respectfully submitted,

Fritz Kruggel, M.S.
Ethics Committee Chair
IN-ABC

The Governor has signed two

Bills:

HB 1266 requires OMPP to apply for amended Medicaid waivers to allow a priority for services in certain “emergency” situations.

HB 1288 prohibits a person from calling themselves a “Certified Behavior Analyst” unless the person obtains and maintains the credential administered by the Behavior Analyst Certification Board, Inc.

The Governor has seven days after bills reach his desk to take action. The Speaker of the House and the President Pro Tempore of the Senate must sign the bills before forwarding them to the Governor.

All of these bills have passed both houses. To see the complete bills, go to <http://www.in.gov/apps/sos/legislator/search/>.

SB 42—*Extends and assigns topics to the Select Joint Commission on Medicaid Oversight.*

Sen. Miller/Rep. C. Brown. Awaiting leadership signatures.

HB 1171—*Autism training for EMS personnel.* Rep. Summers/
Sen. Charbonneau. Signed by the Governor

Professional Credentialing Committee (preliminary) Report
For "March" (4/4/08) IN ABC meeting

Addition of several new RBCs:

1. Diana Fentress
2. Charise Downs
3. Debra Farrar-Schneider
4. Amy Pickett
5. Tony Sweet
6. Gina Wilson Schenk
7. Micolea Jennings

Several more applications awaiting materials for final processing.

Submitted 3/21/08
CJ Gallihugh, Chair

DDRS/BQIS Quality Executive Committee met on Jan. 30, 2008. Gail Kahl attended for Rob Westcott. Committee meets once each quarter.

- 1) Liberty contract has been finalized with DDRS/BQIS. Contract recognized until June 30, 2009. Liberty is developing a comprehensive survey tool, consumer focused, for quality assurance/provider surveys. Will also do review of BQIS incident reports, mortality reviews, develop a satisfaction survey tool (personal outcome measures), post a “report card” of all provider agencies for consumer reference, and provide transition monitoring.
- 2) Follow-Along Services Team (FAST) followed 186 individuals discharged from FWSDC between October 1, 2005-April 18, 2007. 106 BSPs were reviewed. Specific issues related to behavioral supports for these individuals are:
 - ◆ Lack of evidence that staff were trained on implementation of BSP or BSP was not implemented correctly. (25%)
 - ◆ BSP did not address problem behaviors that prevented the individual from inclusion in the community; BSP did not address recognize the context/ environment that interventions were specifically appropriate; BSP not based on a FBA (25%)
 - ◆ FBA did not drive the development of a BSP (no BSP written); FBA did not include assessment completed in the person’s current living environment; BSP was ineffective and no FBA was done to make changes to BSP based on the function of behavior having changed (15%)
 - ◆ Data missing, inconsistent, unreliable and/or not graphically displayed. (15%)
 - ◆ Recommendations were made as the consumer was in need for specific interventions yet the consultant had not assisted with one of the following: revise BSP to include specific strategies; level of staff supervision; counseling; crisis procedures; skill training techniques or psychiatric referral. (10%)
 - ◆ Current BSP had one or more of the following issues: did not include teaching functionally equivalent behaviors; strategies not consistent with fundamental principles of behavior; BSP ineffective in changing behavior; procedures not clearly described for staff; no planned program for eliminating the need for restrictive strategies (9%)

Recommendations to DDRS/BQIS:

- ◆ provide training in completing FBA based on interview/ observation format
- ◆ provide training on developing a BSP using a simple format
- ◆ Provide training in using positive approaches to manage/ replace problem behaviors
- ◆ Provide training in how to use FBA info when developing BSP
- ◆ BSP needs to be user-friendly

- ◆ Mentoring and technical support in basic data collection, analysis, and reporting of data

DOJ completed a community tour in November 2007. It involved 19 individuals transitioned from FWSDC in 13 residential locations involving 5 residential agencies.

Successes related to behavior:

- ◆ Individuals with severe behavior are more calm and relaxed with fewer incidents of target behavior.
- ◆ Improvements in determining the need and reduction in the use of PRNs.
- ◆ Reduction in the amount of psychotropic medication or reductions being pursued by the support team.
- ◆ Qualifications of behavior consultants better than previous community visits.

Recommendations related to behavior:

- ◆ Behavior Support Specialist will prepare a report for each psychiatric appointment that graphically depicts the frequency of targeted behaviors and the following relationships: medication changes, health changes, sleep, seizure activity, symptoms identified by TD screening, etc.
- ◆ Behavior Support Specialist will develop a desensitization program when an individual's behavior interferes in the delivery of health services.