

Behavior Seminar, April 2008

Minutes: George Zukotynski

With assistance from Judith Berry in the East Region

NOTE: THE THREE REGIONAL BEHAVIOR SEMINARS ARE CANCELED FOR MAY. THE WEST REGIONAL BEHAVIOR SEMINAR IN JUNE (6/5/08) IS CANCELED.

MINUTES

April 3, West Region: Canceled Due to UT Boling Center Presentation on Multiple Baseline Designs

April 17, Middle Region Participants: Jeremy Hardy, John Zhang, Keith Wreh, Jannet Murray, Emkea Nnadi, George Zukotynski

April 24, East Region Participants: Michael Tonos, Leia Blevins, James Fox, Joe Darling, Andy wood, Melissa Nosik, Tom Beeson, Holly Blanc Moses, Eric Chubb, Jason Otto, Robin Lunsford, George Zukotynski

1. Protocols: there is a great deal of effort in completing all the protocol, including revision of the clinical and behavioral protocols. TennCare staff are reviewing all of the drafts and providing input. TennCare must approve. We anticipate a revised behavior protocol sometime in May.
2. Managed Care: behavior analysts may be interested in contacting various managed care agencies. Applied behavior analysis services for children (under age 20) may be interesting to explore, since the current protocols emphasize that children are served through the Managed Care agencies and the Waiver is the payor of last resort. If interested, contact George. Also, I located some information on TRICARE, one of the agencies that serve children with autism whose parents are in the military.
3. Call for Papers: TN-NADD has released a Call for Papers. TN-NADD is the TN state chapter of NADD, the National Association for the Dually Diagnosed. This organization brings together groups that interested in serving persons with mental retardation and mental health needs. This year's theme is "Breaking the Boxes", emphasizing concepts and ideas to integrate services. The Call ends April 30, but there is some flexibility on this date. Those who present at the Conference have their registration fees waived. Contact George if interested.
4. Advisory Council: this is a public meeting of people interested in providing input to DMRS about concepts and operations. The participants are from all over the state. A recent appointee is Lori Wigginton, the Behavior Representative. The Advisory Council meeting takes place on the second Thursday of each month. George now attends those meetings, and that is why we have switched the East Regional meeting to the fourth Thursday of the month.

Information from the Advisory Council Meeting:

- Lori Wigginton was introduced.
- Medicaid Waiver Amendments are in pending status. These are going to processed later, target date: 2009.
- Self-Determination Waiver continues to be worked on. CMS has a new application form. TN is the first to use it.
- Centers for Medicare and Medicaid continue to consult with TN on the Self-Determination Waiver and new concepts regarding quality assurance and processing of corrections on deficiencies. Implementing their new concepts will mean some significant changes in standard report, surveying, quality assurance, and processing corrections. It will mean some adjustment in current procedures and the implementation of some new procedures.

- There was important discussion regarding the current budget and strategies to regain fiscal stability. Mr. Norris continues to monitor the budget closely. He hopes with the current interventions that he will be able to remove the 6.1% as soon as possible.
- There was discussion regarding the need for single placements and integrated living. Barbara Deberry, Central Office Residential Coordinator, has been meeting with a group of community providers to discuss the issues around these residential models. Lori Wigginton pointed out the issue of risk management, especially as it related to moving in an active aggressor with other residents. Barbara's group has been discussing these issues. George was drafted to join Barbara's residential task force.

5. Clinical Service Monthly Reviews: George has recently reviewed some from the Middle Region and found non-clinical statements in the document that related to Mr. Norris, DMRS, or funding issues. Some of these statements have appeared in the East documents also.

George expressed concerns that a clinical document that is part of the medical record contains these types of statements. The Clinical Service Monthly Review should focus on progress, clinical interpretations, and barriers to clinical progress. "Barriers to clinical progress" was placed in the form to allow the behavior provider to discuss what the team or agencies should consider to make the behavior support plan work better. There was never any intention to have political or budgetary statements to be placed in this clinical record. There was a discussion regarding whether this also was an ethical issue when a provider placed statements of this sort in a clinical record.

Also, there was a reminder that if an authorization does not match what the behavior provider projects are the levels of services needed, people should remember that there is an appeal process to allow for another review of the situation.

If a provider wishes to make these statements about funding or the DMRS system, George advised to not express their opinions of advocacy in the clinical record. The provider should express them in a different format, such as a memo to the relevant people that may be able to process this information or at least take it into account.

6. State Department of Human Resources Behavior Analyst Job Series: Over the years, there have been various attempts to set up state personnel classifications for behavior analysts and behavior analyst director. There are not state positions that reflect what regional or developmental center contractees provide as behavior analysts or the behavior analyst directors. George is working on this and some new drafts of the positions are being reviewed in Central Office. These drafts have not been distributed outside Central Office for input, but they will be soon.

7. Consumer Guide:

There were 9 responses to the Consumer/Professional SIG Questionnaire/Registration Form at the TABA annual conference and one of the suggestions was to develop a Consumer Guide. That was a very good idea.

Recently George was asked to present to the Autism Society of Middle Tennessee about applied behavior analysis. A Consumer Guide was drafted by George and included in the presentation.

If anyone is interested in a copy, please contact George. It is a work in progress and I anticipate additions and revisions.

8. Multiple Baseline Designs: A Primer.

George provided a paper and a power point presentation at the regional meetings on the multiple baseline design. The terminology, research design logic, and sample graphs were presented. In the East Region, TABA sponsored CEUs for the presentation.

If anyone is interested in a copy, please contact George.

9. Behavior Providers moving out of the DMRS System: Please notify the Regional Office and George regarding these decisions. As per the Provider Agreement, there is a requirement to assist in a prudent transition. We also discussed that there are ethical issues presented when a clinician just decides to drop all his or her cases and close down. This is very rare in Tennessee. There was a discussion about the current situation we are working under and the overwhelming challenges. I appreciate providers and their continued support.

10. TABA Meeting: In the East Region, there was a TABA Regional Meeting.