

### Compiled by Joan Danaher, Evelyn Shaw & Alex Lazara August 2008

In response to states' interest, NECTAC queried Part C and Section 619 Coordinators regarding certification or endorsements for personnel working with children diagnosed with Autism Spectrum Disorder<sup>1</sup> (ASD) and how states provide services for children diagnosed with ASD. NECTAC utilized stakeholders to develop and refine a series of questions related to these topics. Several Part C and Section 619 Coordinators then reviewed a draft on-line survey and their feedback was incorporated into a revised survey. The on-line survey was conducted during the period of June 18, 2008 until July 10, 2008. States were given the option to indicate whether they would like their state to be identified. Based on the responses, states have not been identified.

Responses were received from 19 Part C program coordinators, 15 Section 619 program coordinators, and 7 coordinators who represented both programs in their states. The findings of this informal survey are intended only to provide some useful information and ideas to Part C and Section 619 program coordinators. The findings are not purported to be representative of either program.

Across the three types of respondents, ten, or about one-fourth of those responding, reported to have an ASD certification, endorsement or credential available in their states. States commented on other ASD-related requirements for personnel (i.e., certified behavioral analysts, requiring the team to have one professional with experience with ASD or recommended competencies). Those who reported that their program did have an ASD certification, endorsement or credential were asked to give their perception of the number of children with ASD who received services from such professionals. Across the three types of respondents, the proportion of children with ASD diagnoses who received services from ASD certified or endorsed personnel, 3 said "few," 3 said "some," 3 said "many," and 1 said "nearly all/all."

The second topic in the survey addressed ASD specialty providers, defined as state-funded direct service agencies that provide specialized services to children with ASD. Part C and Section 619 Coordinators were asked if their states had ASD specialty providers and if so, their perception of the number of children with ASD who received services from those specialty providers. Thirteen of 19 Part C respondents reported having state funded direct service agencies that provide specialized services to children with ASD and about half of these reported "many" or "almost all" children with ASD received services from those providers. Half of the Section 619 respondents reported state-funded ASD specialty providers and four of the five reported "some" to "many" children with ASD received services from those providers. The findings of the survey follow.

<sup>&</sup>lt;sup>1</sup> Autism spectrum disorders, or ASD, is an umbrella term commonly used to describe several developmental disorders in which individuals have substantial differences in the nature of their social development and communication skills, as well as unusual behaviors and interests. ASD is not a diagnostic category, but is widely used to refer to three of the five diagnoses under the category of pervasive developmental disorders. Those three diagnoses are Autistic disorder, Asperger's disorder, and pervasive developmental disorder, not otherwise specified (PDD-NOS).



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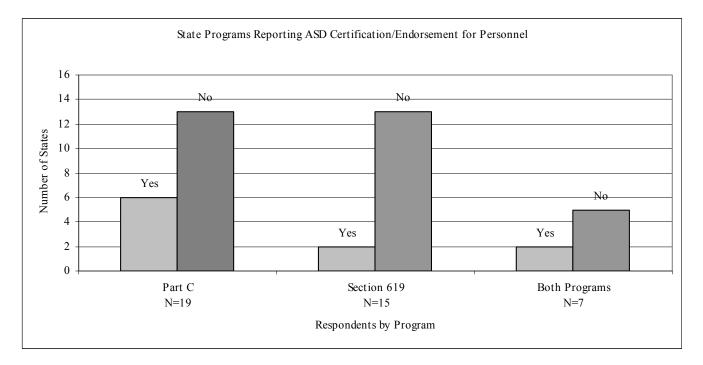
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# Autism Spectrum Disorders Certification/Endorsement for Personnel

State program coordinators were asked to respond with "yes" or "no" to "Does your state have ASD certification or an endorsement for personnel (credential is available, but not necessarily required to work with young children diagnosed with ASD)?" If the answer was "yes", they were asked to indicate their perception of the proportion of children with ASD diagnoses in their program who receive services from ASD certified/endorsed personnel, selecting from "Few," "Some," "Many," or "Nearly All/All." Coordinators could add optional comments.



For states with ASD certification or endorsement, the respondents' perception of the proportion of children served by ASD certified/endorsed personnel:

State Program	Number of Respondents	Few served	Some served	Many served	All/nearly all served
Part C	6	2	3	1	0
Section 619	2	1	0	0	1
Both Part C & Section 619	2	0	0	2	0
TOTAL	10	3	3	3	1

Comments from respondents

Part C respondent's comment:

1. While we do not have a specific ASD certification for personnel in Part C, we do enroll certified behavior analysts and certified associate behavior analysts and we do utilize individuals with DOE teacher certifications with pre-K and/or Autism Endorsement.

Section 619 respondents' comments:

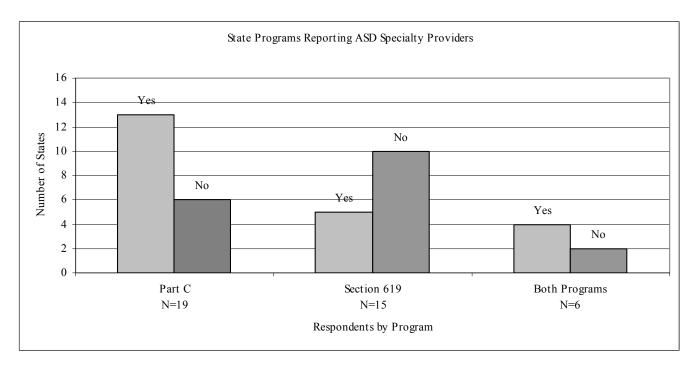
- 1. In our state, we have two certifications that address working with young children and those with autism. One certification is for those individuals working with children with autism and that certification is from kindergarten to age of 21. The second certification is for teachers working with children birth to grade two: Early Childhood Special Education Birth to Grade 2.
- 2. One IHE has a program with this "specialty area" with extra courses that I know of however, it is just in the early stages so I doubt many trained in this state have this designation; it is not on the State Department of Education licensure.
- 3. There are recommended competencies for working with ASD. Some colleges have a certificate program but it is not required nor is it an endorsement area on the state teaching license.
- 4. The State University has a certification for a Medicaid funded service called IBI intensive behavior intervention. Many teachers have not been trained in this model but it could be available perhaps. It is primarily being accessed for private providers called 'developmental disabilities' agencies (DDAs).
- 5. Our state has an interdisciplinary certification for preschool that is not specific to any one type of *disability*.
- 6. Our state requires an Early Childhood Special Education certificate to work with children ages 3-5 in early childhood special education programs.

Part C & Section 619 respondent's comment:

1. State criteria for ASD requires that: "The team determining eligibility and educational programming include at least one professional with experience in ASD due to the complexity of this disability and the specialized intervention methods".

### Autism Spectrum Disorders Specialty Providers

State program coordinators were asked to respond with "yes" or "no" to "Does your state have ASD specialty providers (state-funded direct service agencies that provide specialized services to children with ASD)?" If the answer was "yes," they were asked to indicate their perception of the proportion of children with ASD diagnoses in their program who receive services from ASD specialty providers, selecting from "Few," "Some," "Many," or "Nearly All/All." Coordinators could add optional comments.



For states with ASD specialty providers, the respondents' perception of the proportion of children served by ASD specialty providers:

State Program	Number of Respondents	Few served	Some served	Many served	All/nearly all served
Part C	13	4	3	4	2
Section 619	5	1	2	2	0
Both Part C & Section 619	5	1	0	4	0
TOTAL	23	6	5	10	2

Comments from respondents

#### Part C respondents' comments:

- 1. The specialty provider does evaluations and provides training and TA.
- 2. Department of Education regulations indicate that the age of eligibility for special education services for children with autism begins at birth. For our state, this is considered a birth mandate program and is a comprehensive program. Once a child with autism is eligible for special education services, Part C will provide early intervention services not otherwise offered by special education services.
- 3. Currently it's 35%, but four programs began 1/1/08, two more began 4/1/08, and another four will begin 9/1/08 so I expect that in another year the answer will be "nearly all."
- 4. While we do not have a specific ASD certification for personnel in Part C, we do enroll certified behavior analysts and certified associate behavior analysts and we do utilize individuals with a DOE teacher certifications with pre-K and/or Autism Endorsement. (Same comment provided to the certification question.)
- 5. *FYI* Our state is just implementing, effective 6/1/08, an autism screening at system entry and every 6 months thereafter while a child is in the program. We conducted training with our providers on the screening tools. We will be piloting some "evidenced-based" service delivery in 2 pilot sites in the state this year.
- 6. Parents have the option to choose enrollment with ASD specialty providers in addition to Early Intervention. Although most opt to include specialty providers in their IFSPs, some do not.

Section 619 respondents' comments:

- 1. Some specialty providers are contracted by some individual LEAs. They range from being providers attached to university programs both in and out of state to individuals or agencies who consider themselves specialty providers by virtue of their experience.
- 2. We have the Autism Scholarship Program which basically requires an LEA-developed IEP but the parent can choose an approved provider outside of the district to implement the IEP and funds are transferred from the district (payment requires signature of both parent and provider). Based upon the latest numbers, approximately 1-2% of the state's child count for preschool is served through this program.
- 3. Our state's public schools do not provide services by disability category, diagnostic label, or other construct. Children age three and older are entitled to free, appropriate public education and receive the full measure of benefit ensured by the IDEA. Currently, our state has no specific policy initiatives in place addressing ASD or diagnosed condition. The Department of Education proposed an expansion to increase public schools' capacity to meet needs of children with autism beginning next year. Both schoolage and preschool-age children will benefit from this proposal. The proposal aims at developing a cadre of specialists who can respond to public schools' requests for technical assistance. Likewise, the Department of Health and Human Services' Developmental Disabilities Program plans an expansion of its Medicaid Waiver to fund service delivery targeting the population of children with autism. Some infants and toddlers eligible for Part C and their families will benefit from this proposal, as well as children who are preschool-age and school-age independent of their participation in the IDEA Part B/Preschool Grants programs.

- 4. Our state has a statewide program for children with autism. We have three regions and there is a school for the autism program located in each region. Most children with autism receive services in one of these sites. However, there are a growing number of local school districts that are beginning to provide special education services to children with autism.
- 5. We have some centers that provide consultative and support services and receive some state grant funding. No direct services are provided through these groups.
- 6. The state university has a certification for a Medicaid funded service called IBI intensive behavior intervention. Many teachers have not been trained in this model but it could be available perhaps. It is primarily being accessed for private providers called 'developmental disabilities' agencies (DDAs). (Same comment provided to the certification question.)
- 7. The state Rehabilitative Services agency has an Autism Pilot Project to serve students ages 3-8 with Applied Behavior Analysis (ABA) as a part of the designed program. This project is not part of the education system and is not sponsored by the state Education Agency.

Part C & Section 619 respondents' comments:

- 1. In our state we have private vendors with ASD specialty that receive state funding to provide services to children in our early intervention program. We also have a university-based center for autism providing services regionally across the state for children with ASD.
- 2. Mostly the children receive services for evaluation and eligibility determination. Some or few receive direct services from the ASD providers.
- 3. These are state funded in that we pay providers to provide the services to children.

# Citation

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