

**Washington State Autism Diagnostic Teams  
Survey of Service Models**

*Sponsored by the Washington State Combating Autism Advisory Council*

<b>Background</b>
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**Name of Center/Clinic:** Children's Village- Yakima

**Location:** Yakima, Yakima County

**Clinic Director:** Diane Patterson, MN/MPH (Executive Director)

Diane Liebe, MD ( Medical Director)

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**Liaison for your clinic for survey:** Diane Patterson

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**Phone:** 509.574.3267

**Survey updated:** March 2011

<b>Schedule and Capacity</b>
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**What days and times does your clinic meet?**

All Fridays that can be staffed.

**How many diagnostic evaluation slots do you have per clinic day? 2**

**What is the age range of clients you accept for diagnostic evaluations? 2-19**

**What is the typical age of clients you evaluate?**

It is a triphasic distribution with peaks at 3 years of age, 5-6 years and 11-12 years of age (roughly).

**What geographic region do you serve (where do your families come from)?**

Families come from Walla Walla in the south, to Ellensburg/Cle-Elum. The majority of the population comes from Yakima County with another 25% coming from the Tri-Cities area. We have recently made some hard decisions about our ability to serve regions outside of Yakima County. We are no longer accepting referrals from areas which already have ASD Diagnostic Services, in an effort to reduce our "to be scheduled list" and improve capacity. This will include Spokane, Seattle and Tri-Cities. It has not been communicated yet, but we are planning to continue diagnostic services for families coming from rural areas without access to diagnostics (such as Walla Walla, Cle-Elum/Ellensburg, and Goldendale).

**Do you have a waiting list? Yes.**

**If yes, how long is the wait for families to obtain an appointment?** The current wait is 4-6 months, however, it has been as long as 9-12 months.

**Can a family get on a waiting list if they are currently applying for Medicaid, or do they have to wait until they have received Medicaid?** They can be in the process of applying.

## Personnel

**List the disciplines represented on your diagnostic team?**

- Occupational therapy
- speech therapy
- clinical psychology
- behavioral therapist
- autism education specialist,
- developmental and behavioral pediatrician.

**How long has your diagnostic team been in place?** It will be 4 years in October, 2011

**Are you able to offer bilingual administration of evaluation tools?** No

- **Do you use an interpreter?** We use an interpreter to gather the clinical history from parent, but we do not administer the ADOS through an interpreter. It is not considered standardized without a bilingual administrator. We are in the process of training one.
- **Do you have bilingual professional conducting assessments?** No

## Clinic Protocol

### Intake

**Briefly describe your intake process.**

All referrals for autism are screened by a triage team to determine appropriate pathway. This is either: the full multidisciplinary clinic evaluation (with ADOS), a team (ADOS) eval outside of clinic with consultation with physician, or an individual neurodevelopmental assessment with physician.

**Do you conduct a screening prior to child's appointment in the clinic?** No

**Do you require a primary care provider referral to the clinic?** – Yes

**Who typically makes referrals to your center?**

- Primary health care providers
- Public health nurse, CHN coordinator, FRC
- School personnel
- Family

Other: Treating therapists

**How do you prefer to receive records from families and providers?**

**(Check as many as apply)**

- Families bring the reports to the initial meeting.
- Families collect and send reports to clinic in advance.
- School/ medical personnel fax reports to clinic in advance.

**Is there other information or tests that are helpful to have before the clinic appointment?** We review Child Behavioral Check Lists, Teacher Rating Scales, and information from a personal phone interview. We also review medical records, IEP and school district information.

**Diagnostic Evaluation**

**What assessment tools do you use in your clinic?** ADOS

**Tool Discipline Administering** ADOS OT/ST/Behavior/Psych

**How long does the multidisciplinary assessment process take?** 3.5 – 4 hours

**Does your diagnosis process include a medical evaluation?** Yes

**How do you share evaluation results with the family?** All team members participate in family staffing.

**How do you share evaluation results with the primary health care provider/school district?** A copy is sent following clinic.

With parent permission, the diagnostic information is also shared with the school district given the support of the autism education specialist to work towards increasing positive behavioral supports and appropriate educational programming for children who are diagnosed with an autism spectrum disorder.

**How do you share evaluation results with the child's early intervention or program?**

We do not have a formal system for this, but our early intervention program is usually aware that the child is coming in for clinic. We have collaboration meetings that can be called by any provider working with the family to share new information. There is no formal process, but informal conversations and support.

**Follow-up**

**If a diagnosis of ASD is confirmed, what referrals and resources do you give to families?**

Typically, parent-parent services and individualized resources (books/websites) are shared with the family along with school district recommendations and/or community events and supports.

**If a diagnosis of ASD is not confirmed, but there are developmental delays of a different etiology, what referrals or resources do you offer the family?**

Same as above, but tailored to their diagnostic findings i.e. mental health services

**Do you follow-up again with families after the diagnostic process?** Yes, a family resource coordinator follows up within one month's time. Physician will typically see patient back within four months.

**Outcomes**

**Approximately what percentage of the clients referred to rule-in/rule-out autism receives an ASD diagnosis?** 60-70%

**If ASD is ruled out, what other diagnoses are given?**

FASD, mental health, cognitive delays, tic disorders, language delay, motor speech delays, mood disorders

**Funding**

**How is your clinic funded?**

We bill private insurance and Medicaid. Memorial Foundation funds the behavior therapist time. Without federal support we can no longer support therapists time (OT/ST) without seeking help from grants to off-set the cost of their participation. We are currently seeking funding for OT and ST.

**Which disciplines on your team bill for the diagnostic visit?**

ST/OT/Medical

**How are the evaluations paid for:**

Private insurance

Medicaid

There is no auth required. "Open Medicaid" (Fee-for-Service)

Auth is required if they have Healthy Options.

Healthy Options-if yes, with which plans are you affiliated?

Molina

Community Health Plan of WA

Group Health

Clark United Providers

Regence Blue Shield

Families pay some of fees out of pocket (whatever copays their insurance requires but no separate system for families coming to Autism clinic)

Families pay all of fees out of pocket

Other:

**If a family doesn't have insurance, do you offer a sliding fee?**

If a family needs a sliding fee scale it gets referred to Memorial business office.

**What general sources help financially subsidize your clinic?**

- Fund Raisers/Guild
- Institutional support
- Government contracts
- Medicaid reimbursement
- Private insurance
- Private grants
- Other: Memorial Foundation

<b>Challenges</b>
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**At this time, what are the key challenges your multidisciplinary diagnostic team faces?**

We struggle with capacity issues/wait time and appropriate follow up services. We also struggle to maintain consistency and inter-rater reliability. We do not currently have any funding for continued ongoing training opportunities such as ADOS. We would also like to increase our ability to provide more direct services following diagnosis. Funding for staff time is continually a struggle.