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CHIP Title: Autism: Breaking the cycle of health disparity in Los Angeles County

Project Description:

When a child receives an autism diagnosis, the work has just begun. Parents are faced with a myriad of challenges, many of which may persist across the lifespan. Social skill deficits is one of the hallmark features of the disorder. This can impair a baby's ability to give a social smile, or an adult's ability to obtain and maintain meaningful employment. Despite it being one of the persistent challenges and a critical area to intervene, many families and care providers, are unaware of treatment approaches focusing on social skill development and how to access or provide these types of services to the client.

In our center, we see each day how Cognitive Behavioral Therapy focusing on pragmatics changes the trajectory of our clients lives and sets them up for a successful and meaningful life as an adult. On the contrary, we see how many of our clients who have an autism diagnosis, are given speech therapy and ABA through insurance, but still struggle due to poor social skills. When asked why their child does not have social skills treatment, many parents respond, "my doctor only told me about ABA", "I can't get a hold of the regional centers", or "I didn't know this type of treatment exists".

This CHIP project seeks to demystify access to cognitive behavioral treatment for families in Los Angeles County who have children with Autism. In the fact finding and discovery process, I found the need to add an important element; bringing knowledge about treatment approaches to the primary care providers, so they can best help the client with autism and their family.

Key Findings and Lessons Learned:

- I launched the project in March 2022, and we are at the implementation stage now. We began with our Pilot stage where we identified 1 IPA group and 5 of their clients who had an autism diagnosis, were not connected with regional centers, and needed the service desperately.
- We experienced some push back as I sought to get into "good trouble". Challenges mostly came about with billing and receiving an acceptable rate for the service. However, with persistence, we were able to work with the IPA to identify a viable way to bill and to ensure the quality and time needed to deliver the service.
- These 5 clients now have direct access to this service and us as clinic providers are being paid an acceptable rate to sustain the staff needed to deliver high quality treatment.
- Primary Care Doctors and medical staff would benefit from knowledge of varying service approaches for neuro diverse individuals with autism.
- ABA is one of the most widely used evidenced based practice approaches for indiv w/ ASD
- Aside from speech therapy, ABA therapy is most widely referred and funded by Healthcare Providers, not Regional Centers.

To date, we will begin our implementation phase in September 2022. I would have hoped to have been through the implementation phase by now, but being a small practice, we are forced to pivot and prioritize in midst of the great hiring crisis. However, I'm hoping that Slow and Steady Wins the race on this one. The most amazing component of the CHIP has been the connections I have built with others in the fellowship to better understand and solve this problem along the way. I hope to encourage behavioral health therapists, especially in the clinic setting, to think creatively on how to collaborate with IPA's or health care plans to break down disparities and increase access to families in need. With that, I also find it critical, at the same time, to work creatively to identify a sustainable rate needed to retain and attract high quality therapists.

Next Steps:

I would hope that we increase our social skills client base by 20% and can include 2 other IPAs by Mach 2023. We will do our implementation in September and will continue to evaluate. Once we establish the system and increase awareness of the possibility, I would like this to scale throughout California, attracting more behavioral health clinicians to provide this service, increasing access of the service to clients who cannot or are not accessing regional center, and increase the primary care doctor's knowledge base and ability to offer this service to clients with autism in their practices.