

**HENRY FORD HEALTH SYSTEM  
CENTER FOR AUTISM & DEVELOPMENTAL DISABILITIES  
EXECUTIVE SUMMARY**

Henry Ford Health System (HFHS) is dedicated to transforming lives and communities through health and wellness – one person at a time. One of the ways in which Henry Ford engages and invests in the communities in which it operates is the Center for Autism and Developmental Disabilities (CADD). CADD was developed in July 2008 to provide children from birth through adolescence with Autism Spectrum Disorder and other developmental disabilities and their families much-needed quality diagnostic and intervention services to meet the many medical, behavioral, communication, support, and advocacy needs of this population.

CADD is one of the three original Approved Autism Evaluation Centers (AAECs) certified by Blue Cross Blue Shield and has clinical locations in Detroit, Southfield and Grosse Pointe. Diagnostic sessions comprise an evaluation of the child or adolescent through parent interviews, direct observations, physical examinations, and diagnostic tools. Depending on the individual's age and symptoms, a specific team is selected for the individual's diagnostic evaluation including one or more, of the following: pediatrician, neuropsychologist, speech-language pathologist, neurologist, psychiatrist. After the diagnostic session, the family meets with team members of the child's diagnostic team for a feedback and consultation session that features a detailed review of the evaluations of each specialist and the explanation of the treatment and therapeutic plan tailored to the individual's needs.

CADD employs three (3) Board Certified Behavior Analysts (BCBAs), approximately ten (10) Applied Behavior Analyst Therapists and other specialists who execute a personalized treatment and therapy plan for each patient which often includes the following programs:

- Applied behavior analysis (ABA therapy)
- Medical home clinic standard of primary care
- Speech-language therapy
- Center-based treatment
- Behavioral health
- Parent training programs
- Social skills groups

In addition, through CADD's community resource network, staff assist families in finding other needed services, including support and advocacy services.

To continue its development and growth, CADD seeks \$200,000 over a two year period from the Evidence-Based Practices Grant Program of The Ethel & James Flinn Foundation. If received, the funds from this grant will support CADD's next phase of development, the School Consultative Services Program. This program will provide a Board Certified Behavior Analyst to assist children and adolescents with Autism Spectrum Disorder in the school setting.

There is high demand for in-school services from the families of current CADD patients and from schools requesting support for the education of students with diagnoses of Autism Spectrum Disorder or developmental disabilities. Children and adolescents with these diagnoses

benefit from center-based ABA therapy, but have less success in a school setting because of the disconnect in therapy providers. Children with Autism Spectrum Disorder need assistance in a school-setting to manage challenging, intrusive, and interfering behaviors that impede learning by the patient or other students, such as tantrums, aggression, or repetitive behaviors, in order to improve the connection between center-based therapy and school behavior.

In order to improve each child's success, the proposed School Consultative Program will provide a BCBA therapist to implement the ABA therapy method in a school setting. This program will meet the child in their educational environment and remediate their impediments to learning through real time provision of behavioral intervention. Additionally, the program will provide teachers and service providers with a specialized toolbox of proven ABA strategies to enhance the quality and success of therapeutic services.

The Henry Ford Center for Autism and Developmental Disabilities' School Consultative Program will improve the connection between each child's center-based therapy and school services, therefore improving each child's overall success in treatment and education.

**From:** The Flinn Foundation [mailto:mail@grantapplication.com]

**Sent:** Thursday, July 16, 2015 3:53 PM

**To:** Harrison-Sears, Michele

**Subject:** Evidence-Based Request for Proposal

Thank you for your submission. Your application has been submitted successfully. If additional information is needed, we will contact you. For your records, here is a copy of the contents of your application.

### Proposal Cover Sheet

Organization Name

Please use full legal name as shown on your 501(c) (3)

Henry Ford Health System

Street Address

1 Ford Place. 5A

City

Detroit

State

MI

Zip Code + 4

To find your "zip + 4" code, please [click here](#) to open a window that will do a look up on your zipcode

48202-3450

Phone

3138746046

Fax

3138744044

Web Address

<http://www.henryford.com/body.cfm?id=48131>

Tax ID

381357020

### Primary Organization Contact

Person authorized to execute documents and sign checks

Prefix

<None> Ms.

First Name

Kathleen

Last Name

Conway

Title

Group Practice Director

Office Address

1 Ford Pl 4B

Office City

Detroit

Office State

MI

Zip Code + 4

To find your "zip + 4" code, please [click here](#) to open a window that will do a look up on your zipcode  
48202-3450

Office Phone

313-847-5483

E-mail

[kconway1@hfhs.org](mailto:kconway1@hfhs.org)

### **Project Director/Principal Investigator**

[This is the day to day person managing the project](#)

Check here if same as Primary Organization Contact

No

Prefix

Dr.

First Name

Tisa

Last Name

Johnson

Title

Pediatrician Medical Director, Center for Autism and Developmental Disabilities

Office Address

New Center One, RM 8625

Office City

Detroit

Office State

MI

Zip Code + 4

To find your "zip + 4" code, please [click here](#) to open a window that will do a look up on your zipcode  
48202-3450

Office Phone

313-916-2088

E-mail

[tjohnso2@hfhs.org](mailto:tjohnso2@hfhs.org)

**Secondary Project Director/Principal Investigator (optional)**

**Program Information**

Provide the Applicant's Email Address used for this Account

Email Address

[mharris3@hfhs.org](mailto:mharris3@hfhs.org)

Provide the Applicant's Password used for this Account

Password

HFH5Ph1l

Which of the following Evidence-Based Practices and Programs best fit the project?

Select One

Evidence-Based Practices and Programs-Diversion Programs

Brief description of Program

One sentence (You can describe program in more detail later)

The School Consultative Services Program will provide a Board Certified Behavior Analyst to collaborate with school-based service providers regarding strategies assisting children and adolescents with Autism Spectrum Disorder and other disabilities in implementing skills acquired during center-based therapy and to facilitate management of challenging and interfering behaviors that impede learning.

Total Program Cost

264,738

Amount Requested from Foundation

198,445

Year 1 Amount

98,841

Year 2 Amount

99,604

Amount from Other Sources

Can include In-kind contributions \$46,293

Primary Geographical Area Served

Please select the PRIMARY Geographic Area served by this proposal

Wayne County

Target Population Served

Please select the PRIMARY population served by this request.

Adolescents (12-20 yrs)

Projected Individuals to be Directly Served by the Program

Enter zero if program is not providing direct services

35

### Proposal Information

Select the appropriate category for your organization

SUPPORTED ORGANIZATIONS include Henry Ford Health System, Mental Health Association of Michigan, Michigan Department of Community Health, Community Mental Health Organizations in Macomb, Oakland, Washtenaw or Wayne County, Regents of the University of Michigan, Rose Hill Center, Trinity Health System and Wayne State University.

Supported Organizations

**The proposal should be clear and concise. Please note the word limits on various fields. If you exceed the limit, it will not be apparent until you submit your proposal. You can copy and paste information from other sources.**

**NOTE: For each question in this application, all bullet points contained in the Requirement Section of the RFP must be answered.**

### ***Mission, History, Accomplishments and Organizational Capacity***

Describe the organization's mission, accomplishments and capacity to implement program.

1000 words or less

The Henry Ford Center for Autism and Developmental Disabilities (CADD) is one of the three original Approved Autism Evaluation Centers (AAECs) certified by Blue Cross Blue Shield. CADD is a comprehensive center with clinical locations in Detroit, Southfield and Grosse Pointe that offer a variety of evaluation and treatment options for children with Autism Spectrum Disorder and developmental disabilities from birth through adolescence. At CADD, children and their families have access to diagnostic, treatment and support services that meet each child's unique developmental and medical needs.

Our mission is to provide specialized care, diagnosis and treatments to create life changing outcomes - one child at a time, one family at a time.

CADD aims to accomplish this mission through growth and development at a measured pace with a contemplative strategy that begins with a focus on establishing diagnostic excellence. CADD's Diagnostic Session comprises an evaluation of the child or adolescent through parent interviews, direct observations, physical examinations, and diagnostic tools. Depending on the individual's age and symptoms, a specific team is selected for the individual's diagnostic evaluation including one or more, of the following:

- . Pediatrician
- . Neuropsychologist
- . Speech-Language Pathologist
- . Neurologist
- . Psychiatrist

After the Diagnostic Session, the family meets with team members of the child's diagnostic team for a Feedback and Consultation Session that features a detailed review of the evaluations of each specialist and the explanation of the treatment and therapeutic plan tailored to the individual's needs.

CADD also accomplishes its mission through its growth and development as a center of excellence in the provision of treatment and therapy to children and adolescents with Autism Spectrum Disorder. CADD employs three (3) Board Certified Behavior Analysts (BCBAs), approximately ten (10) Applied Behavior Analyst Therapists and other specialists who execute a personalized treatment and therapy plan for each patient which often includes the following programs:

- . Applied behavior analysis (ABA therapy)
- . Medical home clinic standard of primary care
- . Speech-language therapy
- . Center-based treatment
- . Behavioral health
- . Parent training programs
- . Social skills groups

In addition, through CADD's community resource network, staff assist families in finding other needed services, including support and advocacy services.

Since the establishment of CADD in 2008, we have successfully implemented a multidisciplinary diagnostic and center-based ABA treatment service model with a cumulative patient panel of more than 550 children and adolescents. CADD has substantial experience with the delivery of non-center-based ABA therapeutic services as well, but is not currently conducting a program of that type. In all, CADD has demonstrated the capacity to successfully and efficiently implement a self-sustaining practice of primary care for children with Autism Spectrum Disorder and other disabilities.

CADD continues its mission through its tertiary stage of growth and development which is the School Consultative Services Program for which this proposal is submitted. The School Consultative Service Program will implement an ABA therapeutic paradigm in the school setting for children and adolescents with Autism Spectrum Disorder. BCBAs will provide ABA therapeutic services in a manner similar to the CADD center-based paradigm. The CADD executive team will implement and manage this with the benefit of:

- . CADD's previously mentioned experience in successful program and service design and execution,
- . The retained consultation of Dr. Bryan Davey, an expert in the sustainable provision of ABA therapeutic services.

The steps for the implementation of the School Consultative Service Program are as follows:

1. Selection and hiring of a BCBA with appropriate experience and expertise to conduct school-based consultative therapeutic services.

2. Development of a process map and program design reflecting the methodology discussed below.
3. Draft an operating budget including variable cost associated with off-site service delivery as well as reimbursement and grant funding.
4. Advertising and promotion of the Program through the CADD website, printed media (such as Metro Parent), community events, and CADD's community resource network.
5. Defining the initial patient base comprised of existing and former CADD patients, requests from schools for resources to support the education of students with diagnoses of Autism Spectrum Disorder, and referrals from third party service providers without BCBA in-school services.
6. Develop an insurance coding and billing paradigm to sustain the provision of services to each patient.
7. Develop tools to align with feedback, monitoring, and measuring of service outcomes.
8. Implement quarterly team meetings to monitor operational alignment of the program with the proposed objectives and outcomes.

### **Purpose/Need**

Describe the purpose, objectives and general methodology of your program, population served, and how it will improve the quality, scope, and delivery of mental health services. Cite and include the specific research that meets the standards of evidence-based defined as: demonstrating positive results in at least two randomized control studies or in a large series of single-case experiments.

2500 words or less

The purpose of the School Consultative Services Program is to assist children and adolescents with a diagnosis of Autism Spectrum Disorder in the school environment through the implementation of ABA methodology by a BCBA in order to manage challenging, intrusive and interfering behaviors that impede learning by the patient or other students, such as tantrums, aggression, or repetitive behaviors (hand flapping, spinning, etc.).

The objectives for the School Consultative Services Program are based on the prevailing body of research and evidence-based practices and are as follows:

1. Facilitate into the school setting, the transfer of skills gained by CADD patients during center-based ABA therapy through a standard three (3) month period of weekly consultations among the BCBA, teachers, and service providers. ok
2. Conduct appropriate Functional Behavior Assessments in the school setting and manage the implementation of Positive Behavior Support Plans for children and adolescents without previous ABA therapy during a standard five (5) month period of weekly consultations among the BCBA, teachers, and service providers.
3. Hold five (5) or more training sessions, as appropriate, with teachers and staff regarding management or prevention of challenging behaviors by implementing antecedent behavior management strategies and consequence-based strategies prior to the implementation of the Positive Behavior Support Plan.
4. Promote the implementation of replacement behaviors, such as Functional Communication Training, in the school settings to avoid challenging behaviors during the three (3) or five (5) month period of weekly consultations among the BCBA, teachers, and service providers.
5. Hold weekly training sessions, as appropriate, with teachers regarding basic differential reinforcement procedures, such as token economies, to help students visually mediate access to specific re-inforcers that will provide the self-motivation that students with Autism Spectrum Disorder need to learn during the three (3) or five (5) month period of weekly consultations among the BCBA, teachers, and service providers.
6. Monitor the integrity of implementation and efficacy of Positive Behavior Support Plans and provide ongoing performance feedback as needed during the three (3) or five (5) month therapeutic period of weekly consultations among the BCBA, teachers, and service providers.

The methodology of the School Consultative Services Program replicates, in large part, the most effective practices currently in use by other service providers for the delivery of ABA therapy in the



school setting. An appropriately trained BCBA with experience in the provision of school-based ABA services will undertake the following practices:

- . Identify and define challenging behaviors that are interfering with a student's learning based on teacher observations and parent reports utilizing specific tools designed for use during baseline and after implementation of intervention.
- . Collect two (2) weeks of baseline frequency, interval, or duration and Antecedent, Behavior, and Consequence (ABC) data (10 school days) and identify present levels of challenging behaviors, functions of behavior, and expected goals.
- . Collaborate with the appropriate teachers and staff to conduct a brief Functional Behavioral Assessment in the school setting to identify variables triggering and reinforcing the challenging behaviors and adaptive behaviors that need to be increased.
- . Develop and implement a Positive Behavior Support Plan in the school setting. Train teachers and staff regarding the patient's plan. Staff also will be trained on how to collect accurate data regarding outcomes, implement antecedent management interventions and how to respond to challenging behaviors.
- . Conduct weekly Treatment Fidelity Checks to ensure that the Positive Behavior Support Plan is being implemented with integrity.
- . Problem solve behavioral challenges during weekly visits for a standard course of treatment of three (3) months.
- . Analyze teacher observations and parent reports utilizing specific tools designed for use during baseline and after implementation of intervention to collect ongoing data and to monitor progress until achievement of the expected goals.

The efficacy of the general methodology has been demonstrated for the School Consultative Services Program in the prevailing body of research and evidence-based practices described in Grey, I.M., Honan, R., McLean, B. & Daly, M., (2005) Evaluating the effectiveness of teacher training in Applied Behavior Analysis. *Journal of Intellectual Disabilities*, 9(3), 209-227. Doi: 10.1177/1744629505056695. In Grey, the school-based research paradigm comprised 90 hours of teacher training in Applied Behavior Analysis. Teachers were then directed to identify a specific challenging behavior that impeded the learning of a student with a diagnosis of Autism Spectrum Disorder. The teachers developed and implemented a Positive Behavior Support Plan. As a result of this paradigm, the school-based ABA therapeutic methodology resulted in an 80% efficacy rate of the Positive Behavior Support Plan in reducing the challenging behavior with an overall reduction in frequency of occurrence of such behavior at greater than 66%.

The School Consultative Services Program as proposed augments the prevailing general methodology as described above to incorporate a BCBA to conduct the key functions of ABA methodology in lieu of teachers exposed to merely 90 hours of training. Potential intervening variables in the CADD methodology would be the efficacy of the teachers and staff in their respective collaborative roles and the continuity of the teachers and staff in conducting the Positive Behavior Support Plan. CADD's proposed methodology includes weekly Treatment Fidelity Checks to ensure that the Positive Behavior Support Plan is being implemented with integrity. Accordingly, CADD anticipates that the efficacy of the School Consultative Services Program would be not less than 80% regarding the success of the Positive Behavior Support Plan and not less than 66% regarding the reduction in the relevant metrics used to measure the intrusiveness of the challenging behavior.

The proposed School Consultative Services Program methodology more closely replicates the research and evidence-based practices described in Lalli, J. S., Browder, D. M., Mace, F. C., & Brown, D. K. (1993). Teacher use of descriptive analysis data to implement interventions to decrease students' problem behaviors. *Journal of Applied Behavior Analysis*, 26(2), 227--238. doi:10.1901/jaba.1993.26-227. In Lalli and Browder, the behavioral consultation approach was implemented to reduce children's problem behaviors in school settings. Much like the CADD paradigm, the ABA experts conducted analysis of each child's baseline condition while collecting data for a two (2) week period. Based on this analysis, a hypothesis of the function maintaining the challenging behaviors was developed. Subsequently, ABA behavior reduction strategies (such as extinction, reinforcement contingent upon appropriate behavior, and teaching more appropriate replacement behaviors) were implemented. Teachers were trained to implement the interventions

which proved effective in decreasing the student's problem behavior while concurrently increasing appropriate skills.

Although this proposal indicates Wayne County as the focus of services, the patient population of the School Consultative Services Program comprises children and adolescents attending schools in Wayne, Oakland and Macomb Counties. Currently, CADD provides center-based ABA therapy as do most of its peers. However, even with the most successful ABA therapeutic results, the transition to the school environment can present a profound challenge to a child with Autism Spectrum Disorder and perhaps even more so to those students who have not had the benefit of ABA therapy prior to the School Consultative Services Program. The School Consultative Services Program substantially broadens the scope of mental health and behavioral services to a population including school-based referrals, referrals from other non-school based programs and services, and patient referrals from health systems and practices without the capacity or desire to support such a program. For many students with Autism Spectrum Disorder, the School Consultative Services Program offers the first opportunity to receive ABA therapeutic services which are considered the pinnacle in behavioral intervention for this population.

Unlike center-based services, the School Consultative Service Program meets the child in their educational environment and attempts to remediate the impediments to learning using ABA therapy. The enhancement to the quality and delivery of therapeutic services derived from the School Consultative Service Program is based, in part, on the real time provision of behavioral intervention, in the educational environment, while the intrusive or interfering behavior is occurring and the stimulus for the behavior is present. ABA therapy, much like psycho-therapy, does not have clear timelines to success, however, behavioral therapies can experience greater efficacy when administered in times when intrusive or interfering behaviors are present and intervention strategies can be implemented and reinforced by services providers armed with an arsenal of remedial tactics.

The objectives of the School Consultation Services Program and the methodology are designed to provide teachers and service providers with a specialized toolbox of proven ABA strategies to enhance the quality and delivery of therapeutic services. CADD's program is not general nor are the implementing teachers and services providers without support. The School Consultative Service Program provides access to ABA therapy for an often untreated population in a manner that emphasizes the quality and delivery of therapeutic services to the individual. CADD's objectives are specific, measurable, aligned, realistic and time-bound but they are also reflective of the difficulties inherent in providing therapeutic services. With that said, we will reach an underserved population with a resource for children and adolescents in need of ABA therapeutic intervention who might otherwise lose the value of education without behavioral intervention.

### ***Activities and Outcomes***

Describe the outcomes you expect to achieve and the activities that will help accomplish these results.

2000 words or less

The anticipated outcomes of the School Consultative Services Program are the following:

1. An efficacy rate of at least 80% of implemented ABA strategies with a decrease in frequency and intensity of intrusive and interfering behaviors by 66% by the end of their program. As a result of the decrease in intrusive behavior, we anticipate an improvement in academic performance of both the patient and their peers.

Increased access to BCBAs and ABA therapy paradigms for the substantially underserved population of approximately 35\_ school-based adolescents with Autism Spectrum Disorder and other disabilities.

As discussed, the transition to the school environment can present a profound challenge to a child with Autism Spectrum Disorder and perhaps even more so to those students who have not had the benefit of ABA therapy prior to the School Consultative Services Program. The School Consultative Services Program will increase the scope of mental health and behavioral services to a population that lacked financial or insurance resources to acquire ABA therapy as children. For many students with Autism Spectrum Disorder, the School Consultative Services Program will be their first

opportunity to receive ABA therapeutic services which are considered the pinnacle in behavioral intervention for this population and the outcomes will be substantially beneficial socially, personally and academically.

2. Contribute to the existing substantial data regarding efficacy of ABA therapy paradigms implemented for adolescents by teachers and service providers in the school setting.

Although the School Consultative Services Program is evidence-based, adolescents with Autism Spectrum Disorder can exhibit an array of intrusive behaviors which are typically addressed by an ABA therapist in a center-based program. Often, intrusive behaviors are addressed in children concurrent with their diagnosis. Therefore, ABA methodology can be implemented in a standardized, single purpose environment in contrast to the school-based setting. Accordingly, there are three (3) data sets to be collected as outcomes during the grant term:

. Data regarding the volume and specificity of training required by teachers and services providers, including the benefit of institutional knowledge gained with multiple ASD student encounters.

. Data regarding the efficacy of certain ABA strategies implemented in the school-based setting v. the center-based setting regarding duration and level of remediation (e.g. Certain tactics may be counterintuitive to teachers and service providers resulting in poor implementation integrity or disruption to the educational purpose of the school based setting).

. Data regarding variables in the school-based setting that may impede efficacy of the proposed ABA strategy and effective intervening measures which may include center-based therapy for specific intervening behaviors.

3. Publication after the grant term of scholarly, statistically-valid research regarding the data sets defined above.

### ***Collaboration/Coordination of Resources***

Describe similar existing projects, if any, and explain how your program differs and what effort will be made to work cooperatively. Identify partners and their roles.

1000 words or less

Organizations serving the same population of children and adolescents with Autism Spectrum Disorder or other developmental disabilities are aiming and discussing implementing programs similar to this, but currently the service that will be provided by the School Consultative Program is not provided elsewhere in the community.

CADD will partner with individual public schools in order to create buy-in, staff training, and provide services to students within schools. The specific schools will be based on the current patient population of CADD.

### ***Evaluation***

Explain how the outcomes of your project will be measured and reported. State who will perform the evaluation and describe how the results will be used and disseminated.

1000 words or less

Dr. Tisa Johnson, Project Director and Principal Investigator, as well as relevant BCBA members of the CADD staff, will evaluate the outcomes of the School Consultative Services Programs using the following metrics:

The outcomes will be measured by comparing baseline behavior data to the behavior data collected after the Positive Behavior Support Plan implementation. If the program is effective, the patient's challenging behaviors should decrease over time. The BCBA's will also collect and graph these results as well as the data sets defined in outcomes.

Dr. Johnson will prepare a submission for publication in an appropriate media describing the School Consultative Service Program, the relevant methodology for service provision and its nexus to the prevailing body of research, the program's objectives, projected outcomes, and evaluation metrics, and conclusions based on the evaluation of the data collected during the grant term.

### ***Sustainability***

Outline the plan for securing other sources of support for the program following the end of the grant term. Explain how you will integrate the program into your core services.

1000 words or less

The School Consultative Services Program is designed to be integrated on a permanent basis into the core services provided by CADD. The BCBA services to be provided in this model are reimbursable insurance expenditures under numerous insurances, benefit plans, and programs. Currently, diagnostic services, treatment, and therapy comprise the core of CADD's services. However, these services are more efficacious for the pre-school-age child population. The School Consultative Services Program is a natural progression from the foundation developed by CADD and would comprise the core of services provided to adolescents who typically have exhausted the benefits of ABA therapy in the center-based setting and have matriculated into the school setting. The demand and viability for this addition to the core services of CADD has been substantiated, in large part, by the volume of schools requesting resources to support the education of students with diagnoses of Autism Spectrum Disorder or developmental disabilities, the constant requests received from the families of CADD patients for in-school services, and the support of reimbursement by third party payers. Therefore, CADD views the School Consultative Services Program as integral to its development and growth, complementary to sustainable revenue generation, and critical to our mission. Once fully implemented, any shortfall between cost and reimbursement would be covered by the Henry Ford Health System in order to maintain same level of services.

### **Attachments**

Title	File Name
Detailed Project Budget	<a href="#">15 FND Flinn Evidence-based CADD School Budget 071615.xls</a>
Executive Summary	<a href="#">15 FND Flinn Evidence-based CADD School Exec Summ 071615.doc</a>
Financial Audit	<a href="#">2014 HFHS Financial Statements.pdf</a>

Files attached to this form may be deleted 120 days after submission.

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CENTER FOR AUTISM & DEVELOPMENTAL DISABILITIES  
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