

**Division of Long Term Care
Treatment Intervention Advisory Committee (TIAC)
Autism and Other Developmental Disabilities**

November 22, 2013
10:00 AM to 12:00 PM
Department of Health Services
1 W. Wilson Street, Room B139
Madison, WI 53707

MEETING MINUTES

Committee Members: Jennifer Asmus, Mike Axelrod (via Adobe Connect), Roger Bass, Maribeth Gettinger, Lana Collet-Klingenberg (via Adobe Connect), Christine Peterson (via Adobe Connect)

DHS Staff: Julie Bryda, Lisa Kulow, Sue Larsen, Bill Murray, Alyssa Zirk

Members of the Public: Deb McKernan-Ace, Ruth Benedict, Teri Black, Mary Cerretti, Samantha Cerretti, Laurie Farnan, Kelly Forster, Mitchell Hagopian, Richelle Kroening, Beth Larson, Christy Moser, Mary Schneider, Jan Temple, Tiffany Vollrath

The meeting commenced at 10:11 AM.

1. Welcome

Roger Bass, acting chairperson, welcomed the Committee and members of the public.

2. Public Testimony

Three members of the public registered to speak.

- **Laurie Farnan**, Music Therapist – Board Certified (MT-BC), spoke on behalf of the Wisconsin Chapter of Music Therapy (WCMT):
 - Music therapy is a recognized undergraduate degree program and is not a “weekend degree program.”
 - She feels music therapy is not experimental based on the WCMT’s review of the research, which she summarized.
 - She commented on several entities that have approved music therapy for funding purposes.
- **Mary Cerretti**, mother of a boy with autism, shared that her son previously could not talk and she believes he showed outstanding improvement with the Tomatis Method. She has a letter from her pediatrician also supporting this belief. She would like the Tomatis Method to be included as a Children’s Long-Term Support (CLTS) Waiver covered service.
- **Mitchell Hagopian**, Attorney at Disability Rights Wisconsin, stated his intent to influence the next stage of this process, which is the DHS review of the TIAC recommendations. He shared the following testimony and beliefs:
 - DHS should engage in a dialogue with advocates prior to making any decision, and the Department should use the less rigorous Early and Periodic Screening, Diagnostic and Treatment (EPSDT) service standards of determining evidence, rather than the requirements detailed in DHS ch. 107.035 used by the TIAC, as instructed by DHS.
 - Only harmful therapies should be disallowed by DHS.
 - DHS should consider discontinuing therapies that are attempted but not proven to be beneficial.
 - He inquired regarding the status of the TIAC website. Sue L. reported that approval of the updated website is pending at the Secretary’s Office.

- He feels the public should have an opportunity to also comment at the end of each TIAC meeting.

3. Operational

The Committee reviewed minutes from the meeting held on July 26, 2013. The Social Communication, Emotional Regulation, Transactional Supports (SCERTS) Model date was questioned as having been reviewed in July 2013. Jennifer A. made a motion to approve the July 26, 2013, meeting minutes with any corrections needed regarding the SCERTS review. Maribeth G. seconded the motion, pending revision; motion carries.

4. Therapy Reviews

- **Developmental, Individual-Difference, Relationship-Based model (DIR/Floortime):** The Committee reviewed this therapy. Review was complicated due to overlapping comprehensive treatment approaches with other relationship-based therapies; this makes it important to examine how the therapy is defined.
 - The Committee reviewed the definition of DIR/Floortime and discussed the reviewed research (two pilot studies; third study was an applied behavior (AB) design, which is not experimental). This review indicates this is a Level 4 intervention, insufficient evidence.
 - Jennifer A. made a motion to accept DIR/Floortime as a Level 4 intervention; Chris P. seconded the motion; motion carries.
- **Equine-Assisted Psychotherapy (EAP):** Reviewers shared that it was a challenge to parse out EAP research from other related therapies (i.e., hippotherapy and therapeutic riding). There is not a clear distinction in the research literature, as authors describe these therapies differently, and some encapsulate EAP as a subset of the larger group of therapies that include horses. Review of the literature show there are no quality studies using randomized controls, there were a few AB designs with no scientific rigor, and with no independent variables identified. The recommendation is that EAP is a Level 4 intervention, insufficient evidence or experimental treatment.
 - Jennifer A. made a motion to accept EAP as a Level 4 intervention; Maribeth seconded the motion; motion carries.
- **Social Communication, Emotional Regulation, Transactional Supports (SCERTS) Model:** The SCERTS reviewer referenced a conversation with researcher Dr. Wetherby who has received a grant at a university in Texas to assess the efficacy of SCERTS in a randomized control study (will be conducted in 40 schools; results expected in 1-2 years). The researcher stated that the words used to describe SCERTS point to an acknowledgment that the evidence they rely on to support this therapy is the evidence for each of these separate components (SC: social communication, ER: emotional regulation, and TS: transactional supports), with an assumption that when combined, these components will be effective.
 - Currently, very limited research is available; other reviews have stated there is insufficient evidence to show SCERTS as being effective. It is recommended that SCERTS is a Level 4 intervention.
 - Jennifer A. made a motion to accept SCERTS as a Level 4 intervention; Mike A seconded the motion; motion carries.
- **Sensory Integration Therapy (SIT):** The Committee discussed the SIT review; the research confounds a number of variables making claims regarding children's progress that cannot be substantiated based on available evidence. Research review indicates that the data are inaccurately interpreted, and there is an acknowledgement that even the occupational therapists agree that multiple therapies are occurring simultaneously and they cannot discern the role of SIT. A recommendation was made that SIT is a Level 4 intervention.
 - Jennifer A. made a motion to accept SIT as a level 4 intervention; Chris P. seconded the motion; motion carries.

- **Training and Education of Autistic and Related Communication Handicapped Children (TEACCH):** Committee members reviewing TEACCH stated additional time is required; research literature reviewed thus far seems compelling. A December 2013 *Clinical Psychology Review* article may present good information.
 - Will be reviewed at the January 31, 2014, meeting.
- **Tomatis Method:** The Committee reviewed the Tomatis Method—a method of auditory stimulation to promote accelerated development of language and communication skills.
 - Much of the available literature reviews the theory behind this therapy—auditory input is given to the child via music or rhythmic recordings; this reportedly attenuates high frequency signals via an electronic ear. The theory is that by listening to this, the individual can increasingly focus on the frequency range of language.
 - DHS contacted the provider of this therapy in New York but did not receive a response.
 - Research reviewed did not support efficacy, and a number of confounding variables were present. A recommendation was made that this is a Level 4 intervention.
 - Jennifer A. made a motion to accept Tomatis Method as a Level 4 intervention; Lana C.K. seconded the motion; motion carries.

5. Therapy Updates

- **Music Therapy:** The Committee updated their review of the music therapy literature, which they obtained via a request from DHS to the Wisconsin Chapter of Music Therapy and from their own search of the available literature.
 - The National Autism Center’s National Standards Project classifies music therapy as an “emerging treatment,” but states that additional research is necessary to prove it is effective. There exists a gap between the theory and the behaviors being categorized as improving. Newer research is addressing issues regarding more empirical research versus case studies, showing promise for future development. It will be important that these studies maintain experimental control to demonstrate the change agent. Recommendation is that Music Therapy is a Level 3 intervention.
 - Jenny A. made a motion to accept Music Therapy as a Level 3 promising/emerging therapy; Maribeth G. seconded the motion; motion carries.
- **Relationship Development Intervention (RDI):** Committee members conducted a literature search for new research.
 - There exists no new research, data or research designs, and there remains a significant question as to what exactly practitioners of this therapy are doing. RDI practitioners have catalogued nearly 400 methods they use, yet they have no supporting data. A recommendation was made that this remains a Level 4 intervention.
 - Jennifer A. made a motion to keep RDI as a Level 4 intervention; Maribeth G. seconded the motion; motion carries.
- Committee members discussed their reviews of research and the integrity of treatment implementation, and how critical this step is. There is a belief that as a whole the field has been lenient, as there is a hunger for research in these areas related to autism and other developmental disabilities. Indices of fidelity are critical within the context of good research, and it is laudable that the field is moving in this direction.

6. Proposed Treatments

- **Mendability (<http://www.mendability.com/>):** Committee members Lana C.K., Roger B. and Maribeth G. agreed to review this for the January 31, 2014, TIAC meeting. Reviews will be updated; Committee members will be notified.

7. Meeting Adjournment

The meeting was adjourned at 11:21 AM.