

Ontario Autism Program Q&A's

Key Messages:

- Our government is committed to improving the lives of children and youth with Autism Spectrum Disorder (ASD) by providing them with the services they need, when they need them the most.
- We recognize that children and families wait a long time to receive some ASD services and we are determined to make further progress for them.
- The cost of inaction is too high –young children with ASD need access to services that have the highest impact on their developmental needs.
- That is why we are investing an additional \$333 million over the next five years to create a continuum of behavioural supports that are flexible, and based on the individual needs of children and youth.
- With this new funding, 16,000 more children will receive the critical interventions they need each year.
- We're also improving the way we deliver ASD services, so that children receive services that are better matched to their needs.
- Within two years, we expect wait times to be reduced by 50 per cent.
- Our goal is to achieve average wait times of six months or less within five years through the new Ontario Autism Program.
- We will continue working across government to strengthen supports for all people with autism, including students while they are in school and youth transitioning to post-secondary education, employment and community life.

Top Questions:

Q.1 How is MCYS going to re-design and expand autism service in Ontario?

A.1 Families and clinical experts have told us that our current ASD programs are not flexible enough to meet the changing needs of children and youth with ASD.

Research shows that it is critically important to provide children with the appropriate interventions at the right time.

The cost of inaction is too high – young children with ASD need access to services that have the highest impact on their developmental needs.

That is why, our new Ontario Autism Program will provide families with a continuum of behavioural supports that are flexible in intensity and based on the individual needs of children and youth. .

In addition, families currently waiting for intensive services will receive direct funding to immediately purchase behavioural services and supports in their community.

With this new funding, 16,000 more children will receive the critical interventions they need each year.

The Ministry of Children and Youth Services will continue working with the Ministries of Education; Community and Social Services; and Training, Colleges and Universities to strengthen autism services for students and for youth as they transition into adulthood.

Q.2 Autism wait times have been an ongoing issue for years. Why is MCYS only addressing the problem now?

A.2 Our government has made important investments in autism services which have helped to improve service delivery and reduce wait times. Between 2004 and 2015-16, funding for autism has grown by 120 per cent.

While a lot of progress has been made, we recognize that there is still more work to be done.

The cost of inaction is too high – wait times are projected to increase to five years if we do nothing.

That is why we are acting on calls from families, clinical experts and stakeholders to address wait times and improve service delivery, by providing a continuum of supports that are flexible in intensity and based on the individual needs of children and youth with ASD.

Within two years, we expect wait times to be reduced by 50 per cent.

Our goal is to achieve average wait times of six months or less within five years through the new Ontario Autism Program.

Q.3 How many children are currently waiting for ASD services?

A.3 As of March 31, 2015, there were almost 15,000 children waiting for behavioural services.

Families are waiting as long as 2.5 years for more intensive supports.

If we do nothing, wait times are projected to increase to five years.

That is unacceptable.

That is why our new Ontario Autism Program will address increasing wait times, while ensuring that children are receiving the rights supports as soon as possible.

Q.4 What will happen to families with children that are currently on the wait list for IBI?

A.4 Clinical evidence has shown that intensive intervention is most effective for children between two to four years of age. This is because their development becomes more responsive to the intensive services between the ages of 2-4.

Wait times for intensive programs are increasing and children can spend a long time waiting for services that have the highest impact on their needs.

We don't want families to wait any longer to get the services they need.

That is why families will be given one-time funding of \$8,000 to purchase any service they choose in the community.

With this funding, families can immediately purchase important supports instead of continuing to sit on a wait list.

During this time, service providers will support children and their families as they transition to one-time funding arrangements and offer advice based on a child's needs.

In the new Ontario Autism Program, children will receive a continuum of behavioural supports that are flexible in intensity and based on their individual needs.

Q.5 What will happen to children over 5 that are currently receiving IBI?

A.5 I want to be very clear.

Children who are over the age of 5 and are currently receiving IBI services are not being removed from these programs.

These kids will continue to receive IBI.

At their next clinical assessment, which takes place every 6 months, they will gradually be transitioned into the programs that are age appropriate and best suited to their individual needs

This decision will be made by a clinician, based on each child's needs.

And any transition to more moderate services will be gradual and carefully planned based on clinical expertise.

Q.6 What will happen to families with children that are currently on the wait list for ABA-based services and supports?

A.6 New funding is being invested to reduce wait times during the transition to the new program. Children will remain on the current ABA wait list and receive service when a space is available, while children receiving one-time funding will be able to receive service once their one-time arrangement ends.

Beginning next year, families can access services that are tailored to their children's individual needs. Services will also become more intensive, available for a longer period of time and tailored to children's individual needs.

Q.7 How many children will be moved off the IBI wait list and what does it mean for their families?

A.7 There are currently almost 900 children who have been waiting for IBI and are not in the right developmental window, and will be removed from the wait list.

We don't want families to wait any longer to access appropriate services for their children – that is why we are providing them with one-time funding of \$8,000.

With this funding, families can immediately purchase behavioural services and other supports in their community.

In addition, there are over 1,300 children on the IBI wait list who will turn five during the two year transition phase. Families of children on the IBI wait list who turn five during these transition years will also receive the one-time funding.

Instead of contusing to wait, these children will have immediate access to key services under the new Ontario Autism Program

Service providers will support children and their families and offer advice on appropriate services based on each child's specific needs.

Q.8 Some children spent years on the IBI wait list and are now being kicked off, how is that fair?

A.8 The families of children over the age of five waiting for intensive services will receive immediate funding to purchase behavioural services and other supports.

Q.9 Why are families who are being taken off the IBI wait list only provided with \$8,000? How did MCYS choose this number and will it be enough for private care?

A.9 The \$8,000 in one-time funding will provide families to immediately purchase behavioural service that they would otherwise not be receiving, while on the wait list.

This funding can be used by families to purchase services and supports that best meet their child's specific needs.

During this time, service providers will support children and their families as they receive their funding and offer advice based on a child's specific needs.

Q.10 What types of services could families use the one-time funding for?

A.10 Families will have flexibility to use the one-time funding for a range of community services and supports that best meet their child's individual needs.

For example, with the one-time funding, families can purchase behavioural services, speech and language services, occupational therapy, and/or respite services that best meet their children's specific needs.

Families will receive more information about the one-time funding, including eligible services, from their Autism Intervention Program provider.

Q.11 Isn't MCYS just moving children from one wait list to another?

A.11 No, children are not being moved to another wait list. Families will receive one-time funding to immediately purchase services that meet their child's individual needs during the transition phase.

Q.12 If a child has aged past the developmental window but still requires intensive services, how will ABA help?

A.12 In the new Ontario Autism Program, children will receive services that respond directly to their individual needs.

This will create a continuum of behavioural supports that are responsive and adaptive to a child's changing development.

It will also focus on the key areas that will have the highest impact on a child's needs.

Q.13 How long will it take for these changes to directly impact wait times and service delivery?

A.13 We recognize that children and families wait a long time to receive some ASD services and we are determined to make further progress for them.

We also understand that the transition period may be difficult for some families.

But the cost of inaction is too high – wait times are projected to increase to five years if we do nothing – and that is unacceptable.

That is why we are making this historic investment that will create over 16,000 new spaces for children to receive ASD services.

Within two years, our reforms mean that provincial wait times for current ASD programs are projected to drop by 50 per cent on average in the next two years.

At the end of five years, we aim to achieve wait times of six months or less.

But more than that, our new Ontario Autism Program will provide families with services at the right time and are better matched to their needs.

Not only are we reducing wait times, we are making sure that children with ASD receive services sooner.

Q.14 Why did MCYS not just 'grandfather' the children in to the system?

A.14 The cost of inaction is too high – young children with ASD need access to services that have the highest impact on their developmental needs.

Grandfathering the children who are going to be transitioned off the waitlist would prevent those young children – the ones who will receive the greatest benefit from intensive intervention – from accessing these important services while they're most effective

In other words, if children five years and older were to remain on the current IBI wait list, it will take almost 4 years until children under the age of 5 begin receiving the programs they need.

More than that, grandfathering these children in would mean that they would continue to wait.

Instead, we are providing the families of children over the age of 5 who are on the current IBI waitlist with \$8000 in one time funding

This will let these families purchase behavioural supports in the community immediately. Instead of continuing to wait, these children will have immediate access to services.

Q.15 How will MCYS address the issue of sector capacity, will parents receiving one-time funding to purchase services have to wait again to get community services?

A.15 For families receiving one-time funding during the transition period, having the immediate flexibility to purchase a wide range of community services and supports based on their child's needs will help alleviate the risk of under-capacity for specific services.

Families will be better able to address their children's specific areas of need during this transition phase through the flexible one-time funding approach.

Q.16 What happens to families after they receive one-time funding? Can they get it again next year? Do they go back on the wait list?

A.16 Families can use the one-time funding to purchase any services they choose, in their community.

Once their one-time funding has ended, they will be able access a continuum of services in the Ontario Autism Program that are responsive to their child's direct needs.

Q.17 How will MCYS engage with the autism community during this process?

A.17 In 2013, The Ministry of Children and Youth Services held discussions with over 140 professionals and hosted a Provincial Solutions Roundtable to discuss barriers and solutions to improving early identification and increasing access to early intervention services.

In the same year, The Ministry of Children and Youth Services also engaged with families as part of an Autism Services Review which helped us gain valuable feedback on families' experiences and where they want to see improvements made.

These discussions have provided us with valuable insights and have helped inform our work to-date.

Building on these discussions, The Ministry of Children and Youth Services will establish an advisory group of service providers, parents and other experts to provide strategic advice as we transition to the new autism program.

Q.18 What supports will there be so that families receiving one-time funding can connect to and navigate available community services?

A.18 ASD service providers will work directly with families to provide guidance on relevant community services and supports based on their child's needs. Service providers can also provide families with information about existing and publicly-funded services in their community.

While receiving one-time funding, families will not be able to access publicly – funded autism services. However, families will still be able to access other ministry-funded services for children with special needs, such as healthy child development programs, children's rehabilitation services and respite services, as well as other provincially-funded children's services.

It is also important to note that these children will maintain their spot on the current ABA waitlist and will likely be close to the top of the list once they've spent their \$8,000.

Q.19 Why is an age cut-off being implemented for IBI?

A.19 Clinical evidence has shown that intensive intervention is most effective for children between two to four years of age.

Wait times for intensive programs are increasing and children are waiting too long for services that can have the highest impact on their needs.

We don't want families to wait any longer to get the services they need.

That is why families will be given one-time funding of \$8,000 to purchase services in the community.

With this funding, families can immediately purchase important services and supports.

Instead of continuing to wait, these children will have immediate access to services that will have the highest impact on their individual needs.

Service providers will support children and their families and offer advice on appropriate services based on each child's specific needs.

Q.20 How does the \$333M break down over the five year period?

A.20 Beginning in April 2016, The Ministry of Children and Youth Services will invest \$298.7 million over five years to significantly reduce wait times for autism services, and to expand autism services.

This includes investing \$166.1 million over five years to reduce wait times for ABA and expand the intensity and duration of ABA services; and investing \$132.6 million over five years to reduce wait times for IBI.

Beginning in April 2016, the ministry will also invest \$17.3 million over two years to transition children five years and older off the IBI waitlist. These families will receive one-time funding of \$8,000 to purchase community services or supports based on their children's specific needs.

Beginning in April 2019, the ministry will invest \$2 million growing to \$15 million in 2020-21 and ongoing to expand early intervention services.

The chart below shows the cumulative new investment over the five year period.

\$M	Year 1 2016- 17	Year 2 2017- 18	Year 3 2018- 19	Year 4 2019- 20	Year 5 2020- 21	TOTAL
Funding to Transition Children 5 Years and Older off IBI Waitlist						
One-Time Funding	12.5	4.8	-	-	-	17.3

Funding to Reduce Wait Times and Expand ABA						
IBI (Base)	5.3	15.5	29.0	41.5	41.5	132.6
ABA (Base)	5.3	16.3	33.5	46.5	64.5	166.1
TOTAL IBI and ABA Base Funding	10.5	31.7	62.5	88.0	106.0	298.7
Funding to Expand Early Intervention Services						
Early Intervention Base Funding	-	-	-	2.0	15.0	17.0
TOTAL One-Time and Base Funding	23.0	36.5	62.5	90.0	121.0	333.0

Q21. Is the government expanding the availability of IBI as well as ABA? If so, when does this expanded number of IBI spots begin and how is it increased over the five year period?

A21. Yes, both IBI and ABA services will be expanded with new investments over five years so that more children and youth can receive services.

Beginning in April 2016, the government will invest \$132.6 million over five years to increase the availability of IBI, in order to significantly reduce wait times for IBI. This will help provide young children in the appropriate developmental window with intensive intervention when they will benefit most.

With this investment, within two years, IBI wait times will be reduced by more than half, on average. By 2021, when this investment matures, the goal is to achieve average wait times of six months or less in the new Ontario Autism Program.

Q22. How many more children will receive IBI and ABA with this investment?

A.22. Our government is investing a significant portion of this new funding to increase the number of spaces in both IBI and ABA, so that more children receive services. \$298.7 million will be invested over the next five years to expand autism services. Over the next five years, an estimated additional 512 IBI spaces and an estimated additional 15,537 ABA spaces will be created with this investment.

With the move to an integrated program in 2018 where the intensity and duration of services will be delivered based on children's needs, it is difficult to estimate the number of additional children who will receive services in the new program. Within two years, provincial wait times are projected to drop by more than half, on average. By 2021, when this investment matures, the goal is to achieve average wait times of six months or less in the new autism program.

The chart below outlines the estimated number of new spaces that will be created in IBI and ABA with the new investment.

Year	IBI	ABA	
	<i>Estimated New IBI Spaces Per Year</i>	<i>Estimated New ABA Spaces Per Year</i>	<i>Maximum ABA Intensity</i>
2016-17	65	1,774	12 weeks
2017-18	126	3,438	20 weeks
2018-19	167	4,492	24 weeks
2019-20	154	2,708	30 weeks
2020-21	--	3,125	36 weeks
TOTAL	512	15,537	--

Notes:

- 1. Based on current program costs and projections for future demand based on historical trends.*
- 2. Projections are based on capacity in current IBI and ABA programs, although these programs will be combined into a single program in 2018-19, and number of children served in new program may differ depending on program design and needs of the children served.*

New ABA spaces decrease slightly in 2019-20 when ABA intensity increases to 30 weeks.

Q.23 Why did MCYS not grandfather in the approximately 2,200 children over five who will be removed from the IBI wait list?

A.23 The cost of inaction is too high – young children with ASD need access to services that have the highest impact on their developmental needs.

That is why we are providing the families of children over the age of 5 who are on the current IBI waitlist with \$8000 in one time funding

This will enable these families to purchase behavioural supports in the community immediately. Instead of continuing to wait, these children will have immediate access to services.

And once they've used this funding, these kids will still be eligible for publicly funded Autism supports, which are increasing in intensity and duration as we transition to the Ontario Autism Program.

Q.24 What is the role Regional Autism Providers of Ontario (RAPON) plays in coordinating with service agencies.

A.24 The Regional Autism Providers of Ontario Network (RAPON) includes representatives from all of the lead autism service providers.

The Ministry of Children and Youth Services is working closely with RAPON to plan for and manage implementation of the expanded services under the new Ontario Autism Program.

Q.25 How is your ministry working with the Ministry of Education to ensure that students with ASD have the right supports in school?

A.25 Families and autism service providers have highlighted the need to strengthen the capacity of teachers and educational assistants to effectively support students with ASD.

The new Ontario Autism Program will help improve the alignment of ASD services used in schools and in community-based services to better support student's learning needs.

The focus will be on improving the communication and collaboration between schools and community-based autism providers regarding students' needs.

Better communication and collaboration between schools and community-based ASD service providers will also support improved transitions for students with ASD.

Q.26 How will informational webinars for parents be structured?

A.26 In partnership with Autism Ontario, The Ministry of Children and Youth Services will be holding several webinars about the recent changes to children's autism services.

These sessions will provide information and address questions that families may have about the changes.

Below are the dates and times of the upcoming online engagement sessions.

Date	Time
Monday, April 11	7:30 – 8:30 p.m.
Wednesday, April 13	7:00 – 8:00 p.m.
Thursday, April 14	7:00 – 8:00 p.m.
Wednesday, April	7:00 – 8:00 p.m.

20	Note: This session will be accessible for those who are hearing impaired.
Tuesday, April 26	7:00 – 8:30 p.m. Note: This session will be conducted in French.
Wednesday, April 27	7:00 – 8:00 p.m.

Any questions parents have about their child’s personal case can be directed to their local autism service provider.

Q.27 Where can parents go if they have specific questions about services for their children?

A.27 Parents can contact their service provider if they are currently waiting for service.

If parents are not currently receiving service, they can contact their regional office for more information.

A list of regional offices and service providers can be found on our ministry website here:

<http://www.children.gov.on.ca/htdocs/english/about/regionaloffices.aspx>

Early Intervention

Q.28. The Toronto Star featured an article about the ministry providing more options for early intervention. What action is MCYS taking?

A.28. Research shows that providing the right early interventions as soon as the first signs of autism emerge, for infants and toddlers, has a significant impact on a child’s development.

The Ministry of Children and Youth Services is partnering with clinical experts and four children’s services organizations to demonstrate new early intervention services in Ontario over the next 3 years.

This will help to improve the range of early intervention services available to younger children with developmental concerns and/or showing the early signs of ASD, before a diagnosis is necessarily confirmed.

The models are play-based and are delivered in naturalistic settings (e.g., the child's home or the playground) to help children meet individualized goals. The interventions include parent coaching to support parents to develop skills that they can continue using with their children for years to come.

Q.29. What organizations have been selected to pilot these services?

A.29. Four children's services organizations have been selected to demonstrate the early intervention models. Each organization will demonstrate one of the four models. These sites and corresponding models are as follows:

- **ErinoakKids Centre for Treatment and Development** in Mississauga will demonstrate Early Social Interactions/Social Communication, Emotional Regulation, and Transaction Support (ESI/SCERTS);
- **One Kids Place Children's Treatment Centre** in North Bay will demonstrate the Early Start Denver Model (ESDM);
- **Child and Community Resource Centre** in Sudbury will demonstrate Joint Attention, Symbolic Play, Engagement and Regulation (JASPER); and
- **McMaster Children's Hospital** in Hamilton will demonstrate Social ABCs.

Q.30. When will these services be available for my child?

A.30 The demonstration sites will be launched in Summer 2016 and will run for three years.

Q.31. How many children will be served through the early intervention demonstrations?

A.31. The model experts and four children's services organizations are currently working together to develop an implementation plan for the demonstrations. Part of these plans will include an estimation of how many children will be served at each location. The goal is to serve as many children as possible within the funding that is available.

Q.32. How much funding is available?

A.32. Total available funding for all four demonstrations is up to \$2.5 million annually. Demonstrations will run for three years.

Q.33. Why is MCYS only funding demonstrations in four communities?

A.33. The Ministry of Children and Youth Services is moving forward to demonstrate and learn from new approaches to early intervention services in Ontario. These demonstrations are just one step of many that we are taking to improve services and supports in Ontario.

Q.34. How were these four models chosen for the demonstrations?

A.34. The Ministry of Children and Youth Services sought the advice of research experts and service providers including the ASD Clinical Expert Committee. These models are well suited for implementation in Ontario's community-based settings, are evidence-based, and will benefit young children in Ontario with the early signs of ASD.

Q.34. What happens at the end of three years when the demonstrations finish?

A.34. The Ministry of Children and Youth Services will review the outcomes of the early intervention demonstration sites in order to determine next steps for broader provincial implementation. Early intervention services will be expanded beginning in 2019-20 so toddlers and preschoolers receive early support.

Diagnosis

Q.35. The Toronto Star article said that families also wait a long time to access a diagnosis of ASD. Will the recent investment in autism deal with this issue?

A.35. The Ministry of Children and Youth Services has heard from families about their challenges in being able to access health care professionals to provide a diagnosis of Autism Spectrum Disorder.

Starting in 2016-17, The Ministry of Children and Youth Services, in partnership with the Ministry of Health and Long-term Care (MOHLTC), is investing \$0.5 million to pilot multi-disciplinary ASD diagnostic teams in Family Health Teams in select communities across the province for one year.

The goal is to help clinicians recognize the early signs of Autism Spectrum Disorder (ASD) and to increase capacity to diagnose autism.

Q.36. Why such a small investment in only select communities – certainly there are more areas that need this kind of support?

A.36. The goal of these pilot projects is to build capacity of primary health care professionals to diagnose ASD, and therefore the ministry is targeting communities with a higher probability of children with ASD and a limited number of clinicians in a position to diagnose.

We recognize that there may be interest in other communities, but at this time, we are focusing our efforts on these specific communities.

Q.37. When will these services be available?

A.37. The Ministry of Children and Youth Services is in the process of selecting sites to deliver the pilots. The sites are expected to be operational in Spring/Summer 2016.

Q.38. What happens after the pilots end after 12 months?

A.38. The Ministry of Children and Youth Services will review the outcomes of the pilots in partnership with MOHLTC to determine next steps to continue to improve access to early diagnostic services.