

Family Advocates Case Presentation

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ECHO Autism: Advocates

Case Presentation Form

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Complete this form to the best of your ability. This survey is individualized and should only be completed and submitted by the listed presenter/s. If your presentation includes patient information all protective health information should be excluded. An ID number (ECHO ID) has been created for your presentation and must be utilized when identifying your case/patient during clinic.

Email our clinic coordinator Michael Hansen at michaelhansen@health.missouri.edu if you have any questions or comments.

PLEASE NOTE: Project ECHO case consultations do not create or otherwise establish a provider-patient relationship between any UMH clinician and any patient whose case is being presented in a Project ECHO setting.

ECHO ID Case Number:

* must provide value

Presentation Date:

* must provide value

Presenter Name:

* must provide value

Presenter City:

* must provide value

System Discussion Topic

* must provide value

Please provide example/s of what difficulties/barriers families face and what questions the group can answer to help you best support autistic people and/or families of children with autism.

Example 1

* must provide value

Working with a great grandmother who has 2 great grandchildren in her care. Both have significant disabilities. Boy age X has autism and a heart condition. Speech therapist is looking for information on how to explain his condition to him. It is a rare disease that the male proceeding him all passed from. He has to keep his activity level low. School banned him from recess and PE due to fear. Sister is almost 2 and has physical disabilities apparently. Grandmother is not sure if it may be due to neglect. Child is in First Steps. Needs to medical diagnostics. Grandmother care for children and only knows what the father tells her. CPS has removed children from mother, therefore placement with grandmother. She is wanting a medical stroller for child since she needs to be carried. Also, father of children has always let grandmother care for children. Allowing therapies and First Steps. He has a new girlfriend and will be moving 3.5 hours away. Father is planning to have the child 2 weeks, then return children to mother once she is cleared to have the children or grandmother for 2 weeks. During the children's stay with father he is not planning on doing any therapies. New girlfriend thinks the children don't need anything. Grandmother is concerned mostly for the youngest child due to her age and physical needs. Older child will not thrive but she does not feel he will be in danger.

Regarding this example, what question/s can we answer to help you best support autistic people and/or families of children with autism.

* must provide value

Can kinship be explained.
Needs a medical stroller.
Social stories or explanation for heart disease.
Working with school to still give him physical activity. What might legally bind school from letting him participate?

Do you have another example to provide?

* must provide value

Yes

No

Example 2

* must provide value

Update on previous grandmother with child who's mother died days after diagnosis. Second child in the family under grandparents care has been diagnosed with autism. Waiver that will provide self-directed-services is supposed to be approved by 2.15. Home modifications have not been started. First visit for modification planning was Wednesday. Approved for 20 hours a week ABA, but can only get 7 due to availability. The Arc is working on trying to cover more hours.

Regarding this example, what question/s can we answer to help you best support autistic people and/or families of children with autism.

* must provide value

Grandmother was told for sensory equipment recommendations the OT must come into the home to evaluate. Is this true? Grandmother is worried about summer time. They are approved for 61 hours a week for sds during summer and 51 sds during school year.

Have you recommended resources in the past that have been helpful to families experiencing challenges?

* must provide value

Yes

No

Please tell us more about the resources you have utilized.

* must provide value

Department of Mental Health and support coordination.
ABA referrals.
Talking to family about how and what to ask for through the waiver.
Explaining and introducing to Acumen.
Grants for equipment.
Community outreach.

Please rate how helpful these resources have been.

* must provide value

1 - Not helpful 2 - Somewhat helpful 3 - Very helpful

Are there any additional comments you would like to share?

* must provide value

Yes

No

Form Status

Complete?

Complete ▾