1. **How did you chose the members of the Clinical Expert Committee?**

Members of the Clinical Expert Committee were chosen both through a public competitive process and by appointment. On December 5, 2012, the Ministry of Children and Youth Services established the Autism Spectrum Disorder Clinical Expert Committee (the CEC) as an advisory agency comprised of up to ten members. Eight members, including a Chair and Vice Chair, were appointed through Orders-in-Council (OIC) based on their expertise in the field on August 25, 2015, three new members were appointed by OIC on September 8, 2015. This was a competitive process, based on who applied for the publicly posted positions.

2. **When you speak of IBI and ABA, will these programs look the same as before or will they be different? How will the new Ontario autism program compare to previous IBI and ABA services in Ontario? Will they be similar or different?**

The categories or terms ‘ABA’ and ‘IBI’ as we know them today will no longer exist under the new autism program. The new Ontario Autism Program will offer behavioural treatment that is responsive, flexible, and individualized. If a child requires more intensive services, they will get those intensive services, regardless of age, but based on their needs and on their clinical recommendations. Under the new Ontario Autism Program, families will have one point of entry into a more flexible and responsive program. Behavioural treatment for children diagnosed on the autism spectrum is evidence based, and we are improving how we deliver those services for both early intervention and along a continuum of care.

3. **How did you come up with the $8,000 for one time funding that will specifically go towards the children currently on the IBI waitlist that are 5 years and older? How much service do you anticipate this will provide?**

The $8,000 figure is based on a number of factors, including looking at what other jurisdictions provide. In BC for example, children six years of age and up receive approximately $6,000 in direct funding to purchase services. Under the new autism program in Ontario, $8,000 represents 36 weeks of behavioural services and can be spent on a variety of private services, such as respite and speech and language. What services the money is spent on is up to families. While this money is being spent, families will keep their place on autism program waitlist. When the money is gone, we expect these families will be at the top of the lists to re-enter into the new Ontario Autism Program. For those families on the current IBI waitlist and their child is turning 5 or over, the child will still enter the new system, regardless of their age. If a family isn’t already on an autism program waitlist, they should contact their service provider who can get them on a list.
4. How do you respond to the media and families saying that the new program cuts off hundreds of children from IBI support to reach their full potential?

No child is being removed from services. Any child being removed from a waitlist will be placed on the new Ontario Autism Program list. Under the new system, while it may not be called IBI anymore, children will receive the level of intensity that they require. If a child requires more intensive services, they will get those intensive services, regardless of age; but it will no longer be called IBI. Under the new program, parents will have one point of entry into a more individualized, flexible, responsive behavioural treatment for their children. Ontario is the only province that historically differentiates between IBI and ABA. We are modernizing, improving and simplifying how we deliver behavioural treatment for both early intervention and along a continuum of care.

5. How long do you anticipate the wait for the transition in service between those in IBI to the new autism program?

There will be no gap in service for those children moving from IBI services to the new Ontario Autism Program. While waiting for these new services and to support a smooth transition, there will be a gradual transition to the new services. A transition plan will be developed with the family and their service provider, based on that child’s specific needs at their regular six month clinical progress assessment. Their current services will continue on until a space becomes available for the child to the new program.

6. In the research you took into consideration, did any of the literature contradict that IBI was best suited for under age 5?

In 2013, the CEC conducted a targeted literature review and a series of broad stakeholder consultations across the province with parents, educators, clinicians and diagnosticians. This work informed the CEC’s first report, submitted to the Minister on January 30, 2014, which provided guidance to development of the strategy. Based on recent evidence, the ASD Clinical Expert Committee recommended that intensive services like IBI should be provided to children in the right developmental stage and when it will be most effective and that a comprehensive continuum of care for children should be developed.

7. How is MCYS working with the other ministries to further support a comprehensive plan to support all individuals across the lifespan?

We know that youth and adults with ASD need on-going supports that help them build life and social skills, resiliency and employability to reach their full potential. That’s why our ministry is working with the Ministry of Community and Social Services to pilot three employment programs that will help young people with ASD, between the ages of 14-30, to get paid jobs that are suited to their individual strengths and interests. The program was launched in March 2016 and will be delivered for a two-year period.
8. Most children with ASD do not get diagnosed until they’re already school age. There is a wait for diagnostic assessments. What is the plan to get more qualified professionals to do these assessments and decrease wait times?

We know that providing early interventions to children showing the early signs of ASD can make a big difference to their development. Beginning this summer, we will be launching four new pre-diagnosis, evidenced-based, early intervention demonstrations. These demonstrations will provide new behavioural interventions that are appropriate for children showing the early signs of ASD, before a diagnosis is necessarily confirmed.

9. Are there eligibility requirements for the new ABA program or will all children with a diagnosis be eligible to participate?

All children with an ASD diagnosis will be eligible for the new Ontario Autism program.

10. If someone is currently receiving funding and the child is over 5, will the funding stop immediately? Will the funding be cut off sooner?

If a child is 5 or over and is currently in IBI or has an offer of IBI, that child will continue in their IBI services until a transition plan to the new program can be developed. At the child’s next natural clinical assessment, the child will be put on a plan to gradually transition from IBI into the new Ontario Autism Program. The transition will not start until there is a space available for that child in the new program, ensuring there will be no gap in service.