#### **Office of Program Research**

# Early Learning & Children's Services Committee

## HB 3041

**Brief Description:** Creating pilot programs for learning disabilities, including autism spectrum disorder.

**Sponsors:** Representatives Roach, Williams, McCune, Hurst, Ahern, Darneille, Kenney, Roberts, Simpson, Kretz, Haler, Ormsby, Jarrett and Morrell.

### **Brief Summary of Bill**

• Creates a pilot program to implement a statewide system of screening, identification, and diagnosis of learning disabilities, including autism spectrum disorder (ASD).

#### Hearing Date: 2/1/08

Staff: Brian Considine (786-7290).

#### **Background:**

In 2005 the Legislature created the Caring for Washington Individuals with Autism Task Force, and the task force submitted a final report to the Legislature in December 2007. The task force report detailed a list of priority recommendations. One of the recommendations was to screen all Washington children before the age of three and establish a minimum of one trained autism technical assistance specialist in each of the nine educational service districts (ESD) in order to provide support to teachers and staff.

The Infant Toddler Early Intervention Program (ITEIP) provides early intervention services, including family resources coordination, for eligible children from birth to age three and their families. The ITEIP, located\_within the Department of Social and Health Services (DSHS) Division of Developmental Disabilities (DDD), is the DSHS program responsible for implementing the Individuals with Disabilities Education Act(IDEA), Part C in Washington. All children, birth to three, including children at risk for developmental delays, are entitled to participate in the following components with the consent of their parent(s): early identification,

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multi-disciplinary evaluation, and determination of eligibility for early intervention services. Some early intervention services are provided through contracts with county governments. Services related to the infant or toddler development are offered to families at no cost unless state law requires a system of payments by families, which includes a schedule of sliding fees. For example, some state medical services do have a sliding fee. These programs are medically defined and were in effect prior to the passing of the IDEA, Part C. All funds from IDEA, Part C, administered by the DSHS and the ITEIP, are payer of last resort and, as such, must be used last.

The Governor designated the DSHS as the lead agency, with the primary responsibility for planning and implementing the IDEA, Part C (then Part H) in Washington. The IDEA, Part C funds are used to enhance early intervention services for children, ages birth to three years, and their families, who meet Washington's eligibility criteria. The federal legislation provides financial assistance to Washington for facilitating the program.

#### **Summary of Bill:**

A pilot program is created to implement a statewide system of screening, identification, and diagnosis of learning disabilities, including autism spectrum disorder. The program will be administered through participating ESDs.

Two pilot programs are established, one in Eastern Washington and one in Western Washington. One program will be in an ESD that has a history of coordinated community involvement with special education, and is currently providing services for children with autism and other learning disabilities. The ESD currently providing services for children with disabilities will assist the other pilot program in developing its program.

At a minimum, each program will provide:

- screening and diagnostic services for children under three years old;
- community outreach to inform parents of the availability and value of early diagnosis and intervention; and
- technical assistance to public schools, daycare programs, and community agencies in the region.

The two pilot sites will submit a single report to the Legislature, and the report will include:

- a recommendation on expanding the program to all nine ESDs;
- a recommendation on staffing levels needed to provide adequate services; and
- any recommended changes to the program requirements.

The report is due to the legislature by December 2010

#### Appropriation: None.

Fiscal Note: Requested on January 29, 2008.

Effective Date: The bill takes effect 90 days after adjournment of session in which bill is passed.