EXECUTIVE ORDER NO. 11-05

CONTINUING OREGON COMMISSION ON AUTISM SPECTRUM DISORDER

Oregon, like many states across the nation, has experienced a rapid increase in the number of individuals being diagnosed with Autism Spectrum Disorder (ASD) and both the public and private systems have had difficulty responding. Services are often fragmented and inconsistent around the state. Oregon is not taking full advantage of the wealth of knowledge, best practices and skill currently available in the state and elsewhere. Oregon lacks a means to provide accurate, up-to-date information to families and professionals regarding interventions, services, supports and expected outcomes. There is currently no consistent approach to increasing the capacity of agencies and communities to support individuals with ASD.

The rapid increase in the numbers of individuals being identified with ASD, the complexity and diversity of their needs, limited resources, and the consequent pressure on families, communities, existing education and social service systems, requires a more thoughtful, coordinated approach to funding, service development and delivery. Executive Order 09-07 established the Oregon Commission on Autism Spectrum Disorder and charged it with creating a 10 Year Strategic Plan on Autism Spectrum Disorder to address the issues confronting Oregon. This Plan was submitted to the Governor in December 2010. Executive Order 09-07 provides that the Oregon Commission on Autism Spectrum Disorder expires on July 1, 2011.

There exists an ongoing need to guide the implementation of the 10 Year Strategic Plan on Autism Spectrum Disorder. Therefore, this Order continues the Oregon Commission on Autism Spectrum Disorder to implement the 10 Year Strategic Plan.

NOW THEREFORE, IT IS HEREBY DIRECTED AND ORDERED:

1. The Oregon Commission on Autism Spectrum Disorder ("Commission") previously established in Executive Order 09-07 shall continue its work as modified by this Executive Order.

2. The purpose of the Commission shall be to:

   a. Guide implementation of the 10 Year Strategic Plan and identify biennial goals for the state of Oregon by providing leadership,
establishing priorities, creating key performance measures, facilitating collaboration, ensuring support and monitoring outcomes;
b. Expand and strengthen formal and informal partnerships among systems serving individuals with ASD, including any ASD related expert panels;
c. Identify and incorporate any needed revisions to the 10 Year Strategic Plan to address gaps, barriers, and solutions for individuals with ASD;
d. Convene, facilitate, and lead key stakeholders in developing, promoting, and implementing recommendations from the 10 Year Strategic Plan; and
e. Provide regular updates on the status of plan implementation and outcomes to the Governor, Legislative Assembly, and the public.

3. The Commission shall consist of 15 members, who are knowledgeable about Autism Spectrum Disorder or about systems that serve people with Autism Spectrum Disorder or both. The Governor shall appoint all members but will receive recommendations from the Senate President and Speaker(s) of the House in regard to Legislative members of the Commission. The members shall include:

   a. One member who is an individual with autism who shall be considered a self-advocate, appointed by the Governor;
   b. One member who is the parent of a child with autism below the age of 18 at the time of appointment, appointed by the Governor;
   c. One member who is a parent of an adult child with autism, appointed by the Governor;
   d. One member who represents autism or disability advocacy organizations, appointed by the Governor;
   e. One member who represents the medical community in Oregon, appointed by the Governor;
   f. One member who represents the Oregon Health Authority, recommended by the Director of the Authority and appointed by the Governor;
   g. One member who represents the Department of Human Services, recommended by the Director of the Department and appointed by the Governor;
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h. One member who represents the mental health community, appointed by the Governor;
i. One member who represents healthcare systems/insurance, appointed by the Governor;
j. One member who represents the Department of Education, recommended by the Superintendent of Public Instruction and appointed by the Governor;
k. One member who represents Higher Education, appointed by the Governor;
l. One member representing a local education entity, appointed by the Governor;
m. One member from the Oregon House of Representatives, appointed by the Governor;
n. One member from the Oregon Senate, appointed by the Governor; and
o. One public member at large, appointed by the Governor.

4. All appointments to the Commission shall be made on or before July 1, 2011. New appointments will typically be for two years, but reappointments of members from the existing Oregon Commission on Autism Spectrum Disorder in 2011 shall be for 1 year in order to establish staggered terms. Any subsequent reappointments shall be for two year terms. A minimum of 1/3 of the members of the existing Oregon Commission on Autism Spectrum Disorder whose terms expire in July, 2011 will be retained for a period of at least one year to assist in the transition of the new Commission.

5. All members serve at the pleasure of their appointing authority. If a vacancy should occur for any reason it shall be the responsibility of the appointing authority to make an appointment effective immediately that meets the requirements of section 3.

6. The Governor shall select a chair and vice-chair from the Commission’s membership.

7. The Commission may create as many subcommittees as it deems necessary to carry out the scope and mission of the Commission. Each subcommittee shall include a Commission member and may be composed of
members outside of the Commission. Subcommittees should strive for geographic
diversity in membership.

8. The Commission shall meet at least quarterly and more often as the
Commission determines is necessary and as funding allows. A quorum for
meetings shall consist of a majority of the appointed members. The Commission
shall strive to operate by consensus.

9. To facilitate meaningful participation by parents of individuals with
ASD and self-advocates, those members may be paid a per diem pursuant to ORS
292.495(1) and reimbursed for expenses incurred in attending Commission
meetings, pursuant to ORS 292.495(2), and subject to availability of funds. No
other members shall be eligible for a per diem or reimbursement of expenses.

10. The Director of the Department of Human Services, the Director of
the Oregon Health Authority and the Superintendent of Public Instruction shall
provide staff and support necessary to support the activities of the Commission and
its subcommittees, subject to availability of funds. All other agencies of state
government are ordered to assist the Commission in the performance of its duties
and to the extent possible, provide the Commission with representatives as outlined
in Commission membership as well as the information and advice considered
necessary by members of the Commission to meet their responsibilities.

11. The Oregon Council on Developmental Disabilities may accept, on
behalf of the Commission, contributions of moneys and assistance from the United
States Government or its agencies, or from any other source, public or private and
agree to conditions upon the monies, not inconsistent with the duties of this
Commission and as otherwise allowed by state and federal law.

12. The Commission shall use the 10 Year Strategic Plan to develop
goals, outcomes, and implementation strategies to ensure effective services to
individuals experiencing Autism Spectrum Disorder and their families. The
Commission shall continue to monitor implementation and amend the Strategic
Plan designed to:

a. Clarify the array and structure of necessary services and supports
that enable persons with Autism Spectrum Disorder to function to
their individual potentials across their lifespan;
b. Ensure effectively coordinated service systems for persons with
Autism Spectrum Disorder in Oregon through strategies that might include interagency agreements, braiding of funding, and other processes necessary to assure collaboration and coordination;

c. Define and recommend strategies for accessing and promoting best practices and research-based information to the professional community and the public;

d. Identify and recommend strategies to increase the capacity of agencies and the community to appropriately support individuals experiencing Autism Spectrum Disorder; and

e. Estimate and make recommendations regarding the long-term funding and the sources of funding needed to provide the necessary services and supports described in the 10 Year Strategic Plan.

13. The Commission shall submit a report to the Governor and the appropriate Legislative Committee each year, no later than the fall prior to the annual legislative session. The report shall include but need not be limited to:

a. An update on implementation and outcome priorities identified in the 10 Year Strategic Plan;

b. Biennial goals for providing services and supports to persons with Autism Spectrum Disorder in Oregon as outlined in section 12;

c. Proposals for legislation is necessary for implementation of the goals; and

d. Recommendations to applicable principal departments of the state concerning policies, procedures, and to improve services that benefit people with Autism Spectrum Disorder or to improve coordination among state agencies that provide services that benefit people with Autism Spectrum Disorder.
14. The Commission shall continue its work as set forth in this Executive Order until the Executive Order is revoked.

Done at Salem, Oregon, this 24th day of June, 2011.

John A. Kitzhaber, M.D.
GOVERNOR

ATTEST:

Kate Brown
SECRETARY OF STATE