

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

To close



ACTION REFERRAL

TO <i>Myers / Waldrop</i>	DATE <i>10-15-09</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>0001177</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Cleared 10/26/09, letter attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>10-20-09</i> DATE DUE _____
	<input type="checkbox"/> FOIA DATE DUE _____
	<input type="checkbox"/> Necessary Action

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1. <i>Felicity Myers</i>			
2. <i>Sam Waldrop</i>			
3. <i>George Mackey</i>	<i>GM 10/20/09</i>		
4. <i>Ante Altural</i>	<i>aa</i>		

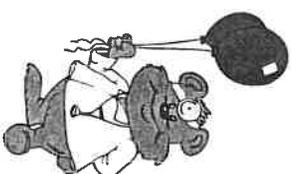
Carolina Pediatric Associates

301 West Pine Street • Blacksburg, SC 29702
864-839-HEAL (4325) • Fax 864-839-9901

Daren E. Carling, M.D.

RECEIVED

OCT 15 2009



To Whom It May Concern:

Department of Health & Human Services
OFFICE OF THE DIRECTOR

I am writing this letter in order to promote the use of music therapy in the treatment of Autistic Spectrum Disorders (ASD). ASD is a group of diagnoses that presents in random manners. Every patient experiences a different presentation of social dysfunction. Many treatments have been studied, but the mainstream treatment remains a systematic application of behavior therapy. I have had the pleasure of working with several autistic children. In my observation of them, some respond to random acts of normal play; while others respond to repetitive use of words. It stands to reason that a quality music-based therapy would be a great way to encourage more social interaction for many autistic children. I strongly believe music would inspire singing, dancing, or just a method of soothing autistic children when placed in new environments.

Thank you for your time and consideration in this matter.

Sincerely,

A handwritten signature in black ink that reads "Angela Welch". The signature is written in a cursive, flowing style.

Angela Welch, PA-C



October 26, 2009

Ms. Angela Welch
Carolina Pediatric Associates
301 West Pine Street
Blacksburg, S.C. 29702

RE: Music Therapy

Dear Ms. Welch,

This is in response to your letter received October 15, 2009 and sent to Ms. Emma Forkner, the Department's State Director. As the Pervasive Developmental Disorder (PDD) Waiver Administrator, I am responsible for the oversight of the PDD Waiver Program, in conjunction, with the operating agency the SC Department of Disabilities and Special Needs, which provides the state matching dollars for the waiver services that are received by this population group.

Currently, agencies are very concerned with the state budget. The outlook has not been positive and this brings up concerns with maintaining services and justifying the need for expansion of services.

I would be interested in receiving any further information about the effectiveness of this service, especially research data from other states that have applied music therapy as an essential part of the child's service plan.

By copy of this letter, I am also forwarding it to SCDDSN for future consideration.

Sincerely,



Anita M. Atwood, LMSW
PDD Waiver Administrator

cc: Daniel Davis, SCDDSN Autism Division

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Myers</i>	DATE <i>10-15-09</i>
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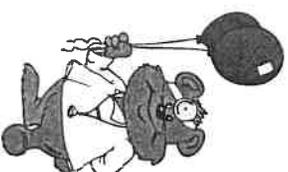
DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000177</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR 	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>10-20-09</i>
	<input type="checkbox"/> FOIA DATE DUE _____
	<input type="checkbox"/> Necessary Action

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1.			
2.			
3.			
4.			

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