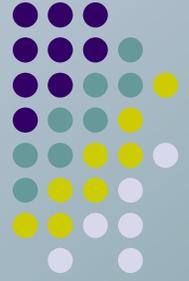


State Implementation Grant

Systems Improvement :: 2008 to 2012



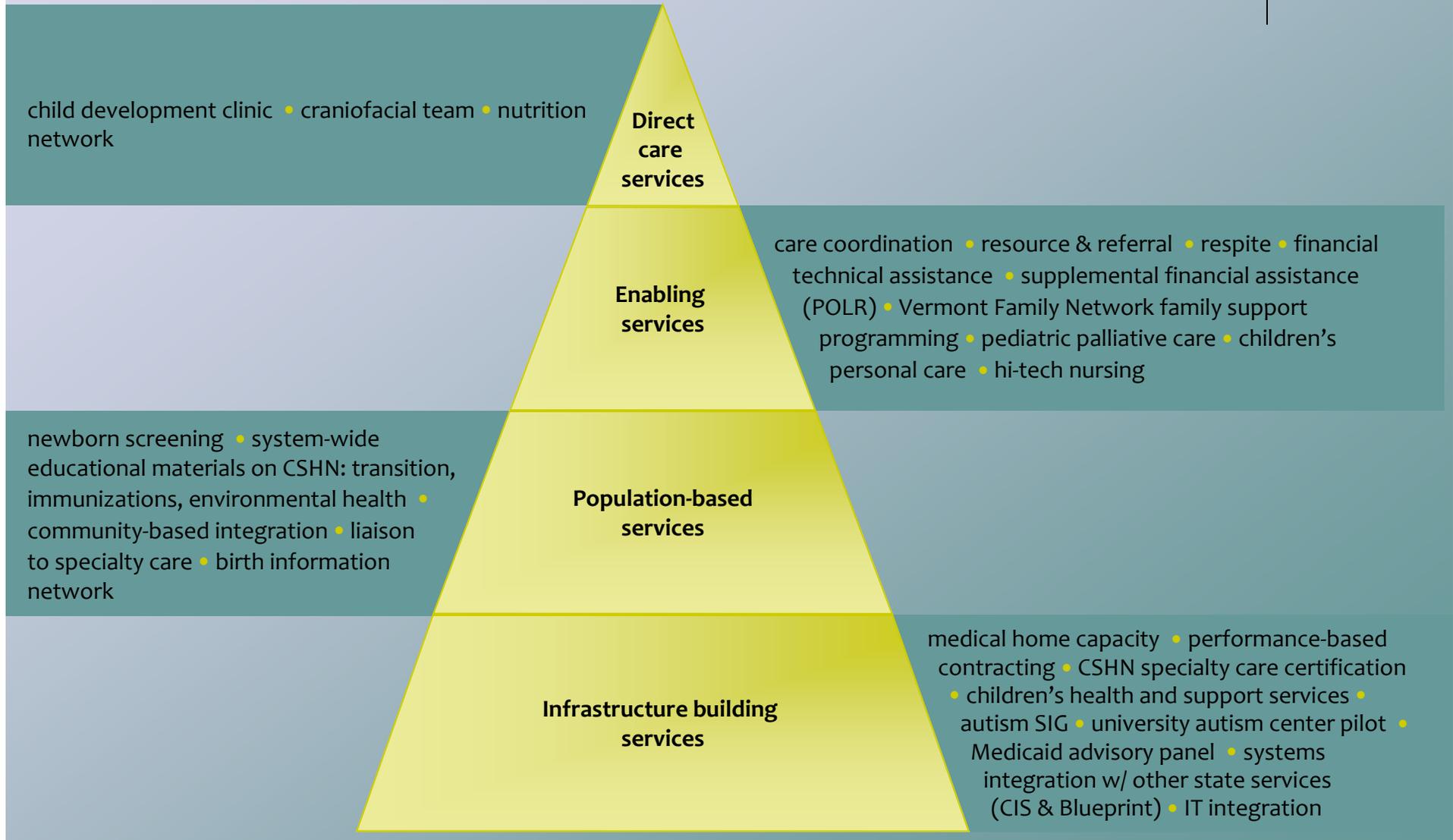
Vermont Department of Health Children with Special Health Needs Management Team

- **Kim Bean**, Administrator
- **Steve Brooks**, Operations Director
- **Nancy Garvey**, Administrative Assistant Supervisor
- **Carol Hassler**, Medical Director
- **Cindy Hayman**, Social Work Supervisor
- **Breena Holmes**, MCH Director
- **Roz LaVallee**, Nursing Supervisor
- **Ilisa Stalberg**, SIG Coordinator

Project Partners

- Vermont Children's Health Improvement Project (VCHIP)
 - **Rachael Comeau**, Project Director
 - **Miriam Sheehey**, Project Director
- Vermont Family Network (VFN)
 - **Carol Devlin**, Family Support Director for Health (former)
 - **Jan Hancock**, VFN-CSHN Liaison

Re-envisioning CSHN: Moving down the MCHB pyramid & Title V sustaining



Core Outcomes: How Does Vermont Measure and Where is Vermont Headed?



CORE OUTCOMES	VT	US	IMPROVEMENT ACTIVITIES
Partner in decision making and satisfied	59.8	57.4	VFN and CSHN to monitor primary and specialty care • CSHN certification
Coordinated ongoing comprehensive care within a medical home	51.6	47.1	CSHN partner in VT Blueprint Medical Home initiative • Care Coordination • Co-location of Social Worker in MH
Adequate private and/or public insurance to pay	69.4	62.0	Retooling of financial assistance for most vulnerable • Liaison to Medicaid
Early and continuously screening	74.4	63.8	Statewide newborn screening : 100% of screened positive receive f/up
Community-based services are organized and easily accessed	89.3	89.1	Children's Integrated Services • Children's Health and Support Services
Receive services necessary to make transitions to all aspects of adult life	25.0	41.2	VFN and CSHN transitions material for all families statewide (July 2011) • Statewide transitions workgroup

*Data source: The 2005-2006 National Survey of Children with Special Health Care Needs



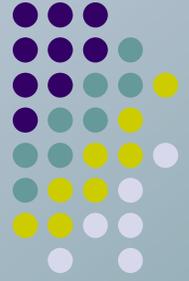
Care Coordination Retooled: Integrating with a Statewide System of Care



Children's Integrated Services (CIS) is a statewide resource for pregnant or postpartum women and families with children from birth to age six. Includes: Early Intervention, Nursing & Family Support, and Children's Mental Health

The Vermont Blueprint for Health (Medical Home initiative) is a vision, a plan, and a statewide partnership to improve health and the health care system for Vermonters. The goals are: 1) To implement a statewide system of care that enables Vermonters with, and at risk of, chronic disease to lead healthier lives; 2) To develop a system of care that is financially sustainable; and 3) To forge a public-private partnership to develop and sustain the new system of care.

Care Coordination Retooled: A (Working) Job Description



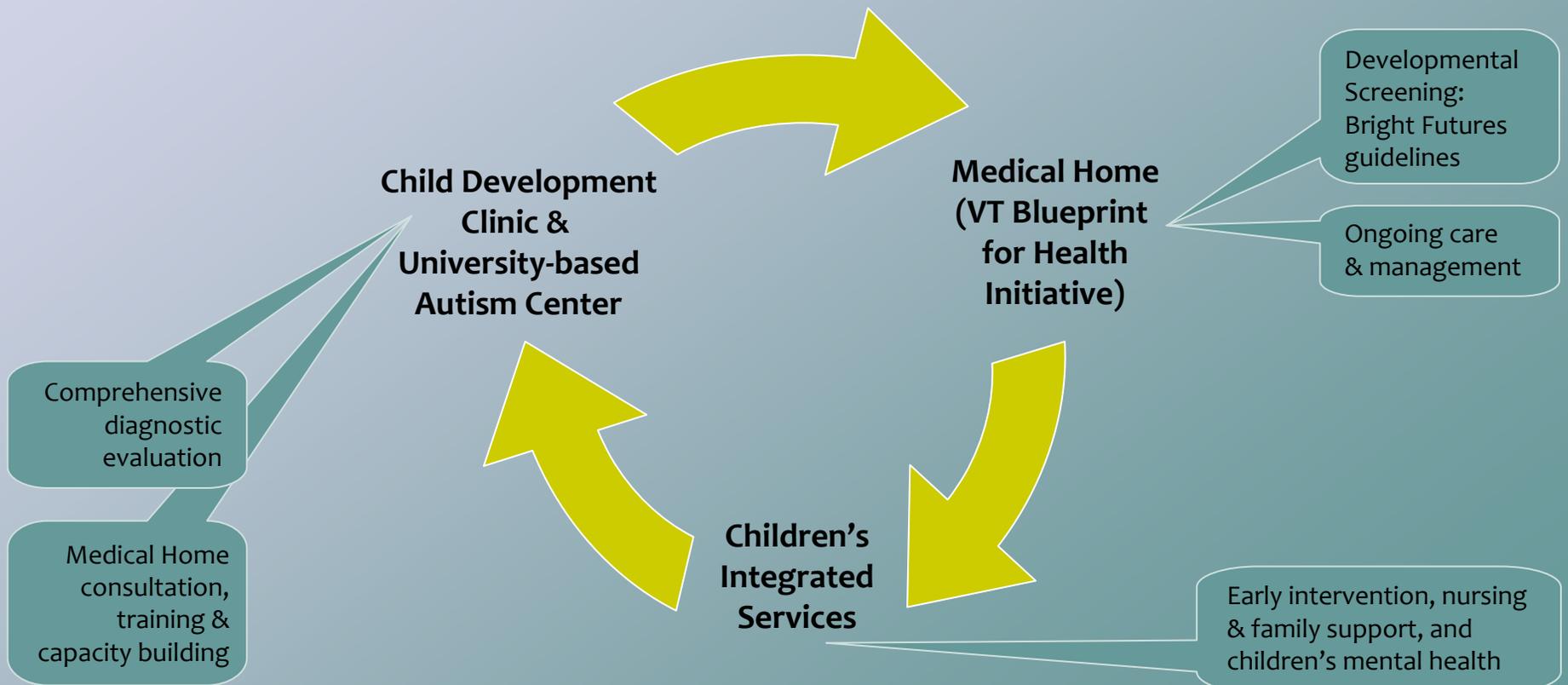
- Identify patient/family strengths and needs through psychosocial and resource assessment; develop plan of care coordination based on identified goals and needs
- Member of medical team at CSHN-hosted clinic and/or liaison to specialty clinics at regional health systems
- As identified by CSHN management, coordinate medical clinics, including: referral review, triage, tracking of records, scheduling, chart preparation, and follow-up
- Build and maintain relationships with local primary care and specialty care practices, and school and community-based teams in support of individual children and families
- Has comprehensive understanding of national, statewide, and local system of care and resources; make referrals to other Agency and community-based services, as appropriate
- Member of Children's Integrated Services teams (including: referral and intake team, consultation team, and systems team)
- Maintain general understanding of funding related to supports and services for CYSHCN
- Support families in completion/submission of applications including: Personal Care, Green Mountain Care, Katie Beckett, Respite
- Work across care settings: office, family home, community, health care, or educational team meetings
- Participate in inpatient discharge planning process and support families in the transition to home and community-based services
- Advocate, assist, problem solve, and mediate between families and medical and educational service providers when there is an unmet need or when issues arise requiring negotiation or adjustment of service plans
- Document all contact with families in chart and/or electronic record
- Participate in ongoing professional development opportunities
- Other duties as assigned

Developmental Screening, Diagnosis & Treatment: A Statewide System of Care

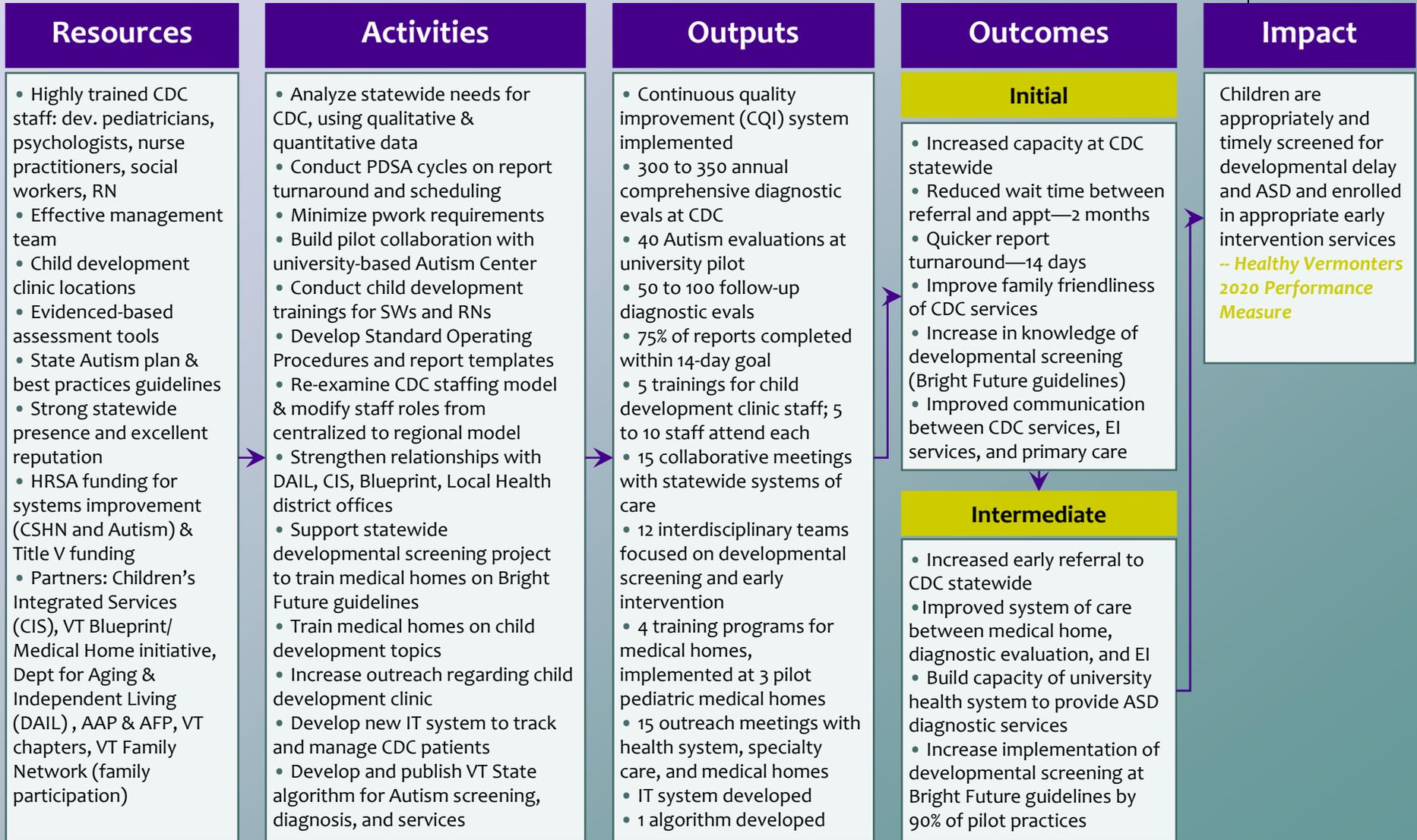


Healthy Vermonter's 2020 Targets:

- Increase the % of all Vermont children who will be screened for developmental delay and Autism Spectrum Disorder by 24 months of age
- Increase the % of children at risk for developmental delay and ASD who will be evaluated by 36 months of age



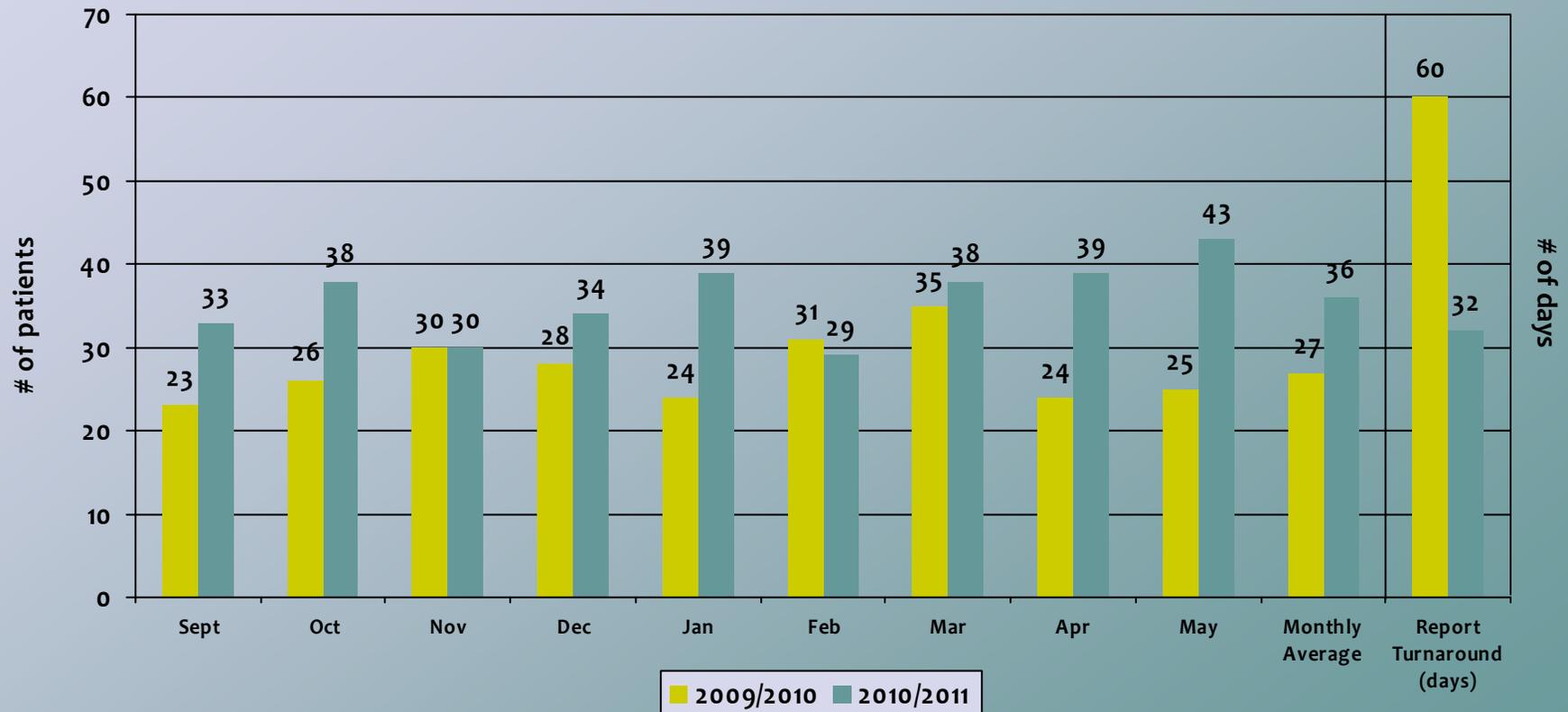
Child Development Clinic: A Premier Service for Vermont



Plan, Do, Study, Act (PDSA) CDC Quality Improvement Projects



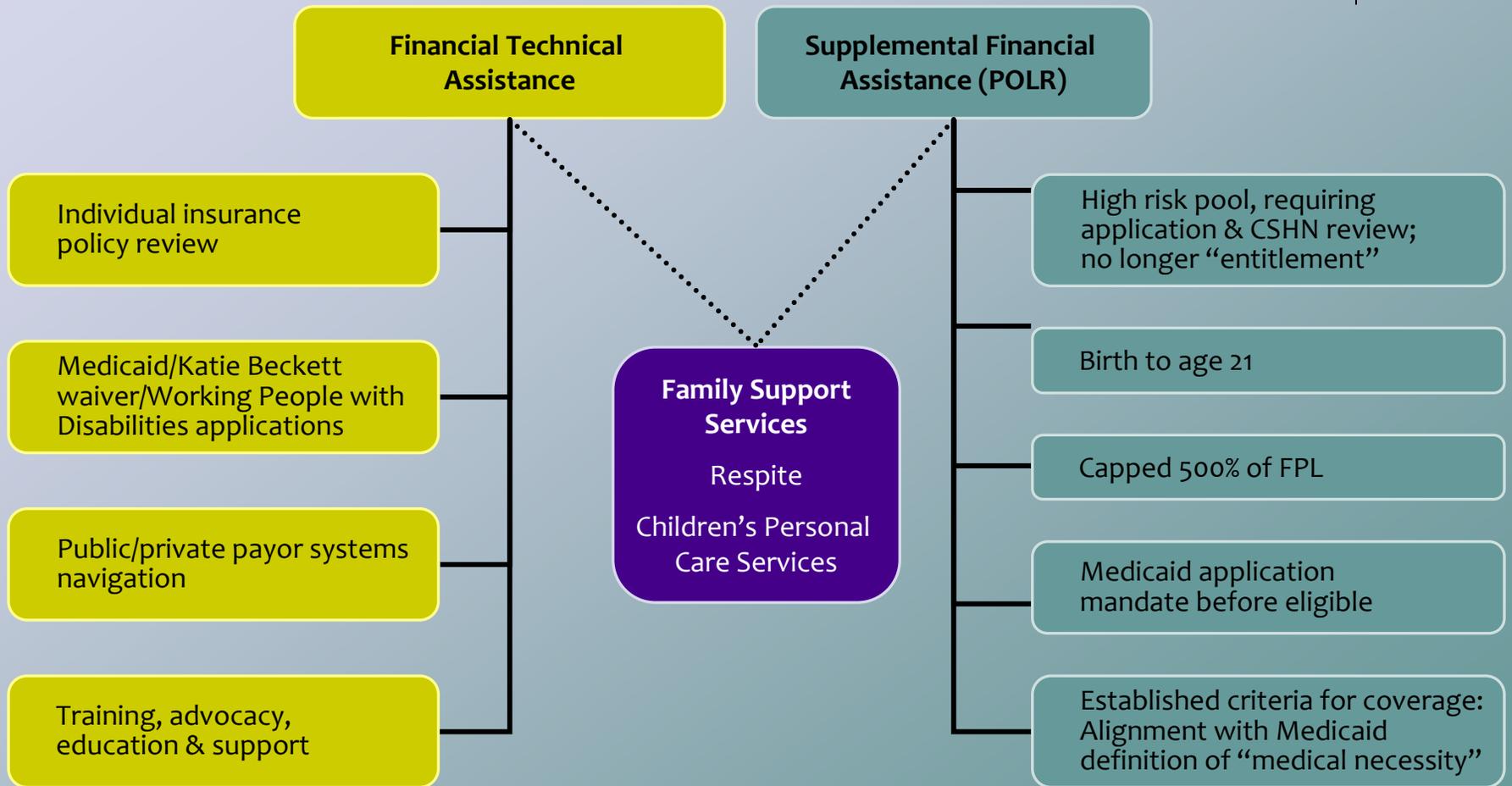
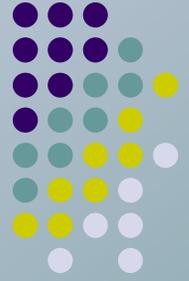
AIM STATEMENT: Address capacity, scheduling, and reporting systems to increase the number of children served by CDC so that CYSHCN in Vermont receive appropriate, timely, and quality services



CHANGES WE MADE TO GET RESULTS: Simplified pre-scheduling data collection requirements to schedule appointments quicker • Implemented report tracking system • Changed reporting timeliness expectations • Began tracking # children seen by clinician and location • Began reporting data at bi-weekly staff meetings

Financial Assistance Redefined

Realizing POLR



OPEN TO ALL

LIMITED ELIGIBILITY

State Implementation & Systems Improvement: Impact • Challenges • Wisdom



Impact

Vermont's SIG has enabled CSHN to evaluate every aspect of current programming and services, and grant making, to better position the state to provide for an exceptional system of care for CYSHCN, through coordinated efforts with other state agencies, CBOs, and the health and educational systems.

Challenges

- Management not always projecting same message
- Long period with dedicated SIG Coordinator
- Strong discomfort with change and resistance to being told what to do
- Fractured communication

Wisdom

- Things take longer than expected
- The "quick" items on the agenda often take the longest to resolve
- Resistance to change can be overcome, but don't misjudge critical analysis for resistance
- Change won't happen without unified leadership and a transformational approach
- Change must be institutionalized
- Change requires regular monitoring and dedicated staff to carry it out
- Communication early and often to staff ensures ownership in the process
- Win-Win is often Win a little - Lose a little
- You never know who your friends are
- It's a program not your first-born child
- An hour is still only an hour, no matter how much you dread it or how long it may seem