

MATERNAL AND CHILD HEALTH IMPROVEMENT PROJECT ABSTRACT

Project Title: A Community Approach to Improving Medical Homes

Project Number: (CFDA #93.110F)

Project Director: To Be Assigned

Organization Name: South Carolina Department of Health and Environmental Control

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Project Period: 3 years **From:** 3/31/02 to 3/31/05

A Community Approach to Improving Medical Homes will be administered by the South Carolina Department of Health and Environmental Control's Division of Children with Special Health Care Needs, (DCSHCN) which administers the state's Title V program. This project is being initiated by Children's Rehabilitative Services, a program within DCSHCN in partnership with the S. C. Chapter of the American Academy of Pediatrics and state level agencies and nonprofit organizations serving CSHCN and their families. DCSHCN Director Linda Price will serve as Oversight Manager. An expert in access to care for children with special health care needs (CSHCN) and health education will serve as Project Director. The S.C. Medical Homes Team will provide direction and oversight.

The project's primary purpose is to ensure all CSHCN receive ongoing, comprehensive care through an effective medical home that fully and respectfully includes the family, links efficaciously with sub-specialty physicians and with a wide range of community organizations offering services to this population. Education and training for physicians and families, will be a central theme of all grant activities and will help build capacity and infrastructure for expanding true medical homes statewide. In addition, improved data collection and the development of mentor medical homes will provide innovative services and critical information essential to accomplishing all project goals. These activities will ultimately strengthen medical homes and improve health of CSHCN.

In South Carolina, private pediatricians provide the majority of care for CSHCN. Many physicians and families of CSHCN do not understand fully that a medical home must provide community-based, family-centered, culturally competent care delivered within a comprehensive, well-integrated service system with the medical home at the center. There is a pressing need to increase medical homes' ability to link appropriately with sub-specialty physicians and with the wide range of non-medical services that exist in communities. Recent and continuing budget cuts and changes in Medicaid, managed

care and SCHIP threaten the delivery of critical services to CSHCN. At particular risk for service reductions are “hard to reach” families living in medically underserved areas.

Goals of this proposal include the following: (1) increase by 10% the number of CSHCN who receive ongoing, comprehensive care coordinated through a medical home, (2) strengthen linkages between primary care and sub-specialty care physicians, and (3) improve the linkages between all health care providers for CSHCN and the broad range of community providers and programs serving CSHCN and their families. Project objectives include a variety of scientifically based education, training and public awareness strategies involving a broad-based coalition of partners; increased data collection and analysis; and the establishment of mentor medical homes to serve as pilot sites for innovative service delivery approaches focused on coordinated care.

Project methodology will build a solid organizational structure, produce scientifically supported curricula and other education materials, and develop strategies to cooperate fully with a variety of physician, family and community groups and state agencies.

Process objectives that examine the completion of specific tasks to be accomplished in a timely manner and outcome objectives that relate to specific benefits or end results have been developed as part of a comprehensive evaluation. An accomplished evaluator will be hired to implement all evaluation activities. This person will work closely with the Office of Research and Statistics to utilize expanded data capability effectively. Yearly evaluation results will be widely shared and used to fine tune project methodology.

Text of Annotation: *A Community Approach to Improving Medical Homes* primary purpose is to ensure all CSHCN receive ongoing, comprehensive care through an effective medical home that fully and respectfully includes the family, links efficaciously with sub-specialty physicians and with a wide range of community organizations offering services to this population. South Carolina’s low rankings on a variety of indicators of child well-being combine with recent and continued budget cuts threaten the delivery of care to CSHCN. Goals of this project include the following: (1) increase by 10% the number of CSHCN who receive ongoing, comprehensive care coordinated through a medical home, (2) strengthen the linkages between primary care and sub-specialty care physicians, and (3) improve the linkages between all health care providers for CSHCN and the broad range of community providers and programs serving CSHCN. A Project Director will work with the State Medical Home Team to create a solid organizational structure that will produce scientifically supported curricula and other educational materials to be widely utilized and develop strategies to strengthen data collection activities, create and make self-sufficient mentor medical home sites, and build capacity to serve CSHCN.

Key Words: Children’s Health, Medical Home, Primary Care, Access to Care, Disparity, Family Support Services, Health Screening, Information Systems, Data Analysis, Outreach, Preventive Health Care, Service Coordination

