

A Collaborative, System Change Approach to Improving Local Systems of Care for CYSHCN

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MVCCP - About Us

Background

Since 2008, the Kern County (CA) Medically Vulnerable (MV) Workgroup of 40+ partner organizations has met monthly at First 5 Kern to address the complex needs of MV infants and children, their families and providers

Mission

Use enhanced coordination of existing case management services to measurably improve long term outcomes for children, birth to 5 years of age, who are at risk of costly, lifelong medical and developmental issues.

Financial support for MVCCP has been received from:

First 5 Kern, Health Net, Kaiser Permanente, Kern Health Systems, Lucile Packard Foundation for Children's Health, and San Joaquin Community Hospital





In June, 2015 MVCCP was named by the national **Association of Maternal & Child Health Programs** as an *Innovation Station* Promising Practice

MVCCP Partners

- First 5 Kern Children and Families Commission
- **Hospitals**: Kern Medical; Mercy Hospitals of Bakersfield; San Joaquin Community Hospital; Valley Children's Hospital; Mattel Children's Hospital UCLA
- Insurers: California Children's Services; Health Net; Kaiser Permanente; Kern Health Systems
- **Kern County Departments**: Human Services (CPS and Foster Care); Mental Health; Public Health Services (Black Infant Health, Maternal, Child, and Adolescent Health, Nursing)
- Kern Regional Center
- **School Districts**: Bakersfield City School District; Kern County Superintendent of Schools
- Clinics: Clinica Sierra Vista; Omni Health Services; KM Outpatient Pediatric/Family Practice
- Family Resource Centers and Parent Education Programs throughout Kern County
- Local Agencies and Institutions: California State University Bakersfield; Caring Corner; Clinica Sierra Vista; Community Action Partnership Kern County; Differential Response; Exceptional Family Center; Garden Pathways; Head Start; Henrietta Weill Memorial Child Guidance Clinic; H.E.A.R.T.S. Connection; Hoffman Hospice; Kern County Breastfeeding Coalition; Mended Little Hearts; CSV-MVIP; 2-1-1 Kern; Terrio Kids; WIC agencies
- Regional Partners: Central California Children's Institute; San Joaquin Sierra Region 5,
 Regional Perinatal Programs of California; California Health Collaborative



MVCCP is an active, original member of the "5Cs" **California** Community **Care Coordination Collaborative** sponsored and staffed by the Lucile Packard **Foundation for** Children's Health of Palo Alto



http://www.lpfch.org/cshcn/community-engagement

System Level Care Coordination Methodology

Organizing and Funding the Collaborative

- Focuses on the system serving premature infants (11% of 14,000 annual births in Kern), their families and providers to prevent cases from falling through the gaps in the system
- Has **project staff** to manage meeting and annual conference logistics, conduct outreach activities, and write grant proposals
- Leverages public and private funds to sustain a full time RN/Public Health
 Nurse as a System-Level Care Coordinator to manage over 900 referrals since

 2011 using a central database in the KC Public Health Services Department

Evaluation and Dissemination of Lessons Learned

- Annual evaluation protocol documents MVCCP referrals, the growing integration of services and the reduction in preventable ER visits and hospitalizations
- Annual, free one day conference for up to 200 broadens participation and shares lessons learned

Key Components of the MVCCP Care Coordination Process

- 1. Support local case management services that *already exist*.
- 2. Use one page *Referral/Acuity Form* to quickly identify and refer cases to *treat conditions earlier*.
- 3. Take a "1,000 ft View"- Use Case Review Committee process, to develop best practices of system level care coordination.
- 4. Focus on establishing and maintaining *health insurance* and *a medical home*, to reduce preventable ER visits and hospitalizations.
- 5. Build strong, long-term provider partnerships to sustain a system of care coordination that is *practical, affordable, and responsive to changing conditions*.
- 6. Use *longitudinal data* to document results annually.
- 7. Conduct Cost Benefit Analyses to *demonstrate savings* on at-risk infants and children to better serve *all children* in the county.

Transformative Role of County Wide Care Coordination

System Level Benefits from Collaboration

- Relationships have been built to streamline and expedite referrals across systems and providers; they regularly ask each other for help, knowing partners are ready to assist.
- Understanding has been enhanced of contact persons, partner roles, eligibility criteria, referral processes and forms, timeframes, and funding/insurance coverage.
- An ongoing benefit to the coordination of MV services in Kern County from
 the original research and pilot phases in 2010 and ongoing monthly
 Workgroup discussions has consistently been the <u>separate meetings</u>
 convened between partners to learn more about available resources,
 admission criteria, and ongoing procedures for working together.
- "Teamlets" of 2, 3 or 4 providers often work together with a primary case manager to enhance coordination, especially of complex cases.
- The MV Workgroup partners' discussions have effected fundamental change in the service delivery system by impacting policy and practice in Kern.

Two Examples of the Transformative Role of System Level, County Wide Care Coordination

 New staff attending MVCCP's conferences and monthly meetings learn the value of improving child health and family outcomes <u>through enhanced</u> <u>communication and ongoing collaboration protocols</u>.

- No single system level topic has more meaning for families of CYSHCN than transportation to specialty clinics located 2+ hours out of county.
 - As a result of our MVCCP Workgroup partners' outreach and collaboration, three specialty care hospitals, Valley Children's Hospital, Mattel Children's Hospital of UCLA, and Children's Hospital of Los Angeles have recently opened or are building new specialty clinics in Bakersfield, helping to greatly reduce missed appointments due to travel for specialty appointments a true "win-win".

System Challenges to County Wide Care Coordination

1. What has been most challenging?

• The financial impact of the recession, in the first few years; more recently the drop in oil prices has severely impacted Kern County revenues, leading to a 2% cut in the budgets of our public sector/safety net agency partners, placing a burden on the entire system.

2. What agencies or groups could you use help from to better evaluate the coordination of care across systems?

 We are missing some private hospital ER and hospitalization data for our CBA. We are working on MOUs to resolve that evaluation access issue.

3. What system improvement would be most beneficial to improve care coordination for CYSHCN?

- A centralized EHR would be the ideal for parents and providers to coordinate treatment plans, appointments and next steps.
- A parent friendly user interface with pictures, maps, and comment capabilities would make it easier to implement.

Kern County Medically Vulnerable Care Coordination Project (MVCCP)

Contact Information

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