

# Foster Care Medical Homes



Start  
Strong

Supporting pediatric populations with high social complexity, ACE scores, and system involvement through advanced primary care

## Initiative background, overview & goals

Children in foster care represent one of the most vulnerable populations in Medicaid. They carry a higher burden of disease, face incredible social complexity, and often experience multiple changes in caregiver. These dynamics present unique challenges for health plans and care providers, and contribute to significant health and health care disparities for these children.

To address the unique needs of this population, Health Share launched a learning collaborative with seven clinics and clinic systems with the highest volume of children in foster care to develop a Foster Care Medical Home Model. In addition, Health Share convened a steering committee with representatives across sectors to identify system enhancements and improve coordination of services and care.

Over the last three years, these diverse system partners have met to answer the question, “What can we do differently for children in foster care in order to improve their health outcomes and reduce disparities?” While care for these children is spread across many individuals and systems, collaborative members agreed that the role of primary care should be to provide intensive case management, care planning, and ensure communication across transitions of care.

## Key partners

- Legacy Emanuel Randall’s Pediatric Clinic
- Hillsboro Pediatrics
- OHSU General Pediatrics
- DHS, Child Welfare



Partner Organization | Contact Information



Health Share of Oregon

## What's been done so far

Between July 2017 and June 2018 the three advanced primary care (APC) clinics served 645 youth, which includes both youth currently in foster care and youth who have recently exited foster care.

Outcome Measure for children served by a Foster Care Medical Home at APC clinics	FCMH % (# required)	All DHS % (# required)	All Health Share % (# required)
Developmental screenings (Apr17-Mar18)	73.9% (46)	53.5% (157)	68.0% (9641)
Adolescent well child visits (Apr17-Mar18)	79.5% (112)	59.8% (892)	54.0% (28760)
DHS assessments (Nov17-July18)	88.5% (26)	88.9% (208)	88.9% (208)

### Core Elements of a Foster Care Medical Home

Element	Current Implementation Highlights
Identify children receiving foster care services and monitor their outcomes	Identification occurs through phone calls and patient screenings. All three APC sites record foster care status within the electronic health record.
Provide dedicated care coordination	All three sites provide care coordination that serves as a focal point with families, patients, and DHS caseworkers.
Use a trauma-informed approach and trauma-specific interventions	Randall's offers a trauma workshop for parents, and the other two sites encourage their families to attend. The sites' employees have received trauma informed training. In addition, Randall's offers its staff a monthly clinic debrief, which is a dedicated time to process personal thoughts, feelings, and emotions as they relate to difficult cases within the clinic. OHSU is developing a module on foster care that will be part of annual resident training.
Implement care in accord with the American Academy of Pediatrics guidelines	All three sites reach out to caseworker and families to ensure the AAP standard of visits are met. Each clinic has aligned prompts to families with the AAP guidelines.
Connect to programs and resources that support the foster care population	All three sites have developed strong relationships with community organizations. Examples include Early Intervention, Help Me Grow, LifeWorks NW, and many others. Hillsboro Pediatrics has developed a resource binder and a section on their website that includes family resources.
Integrate mental health care services	OHSU's social workers provide immediate consults and work closely with behavioral health faculty. Randall's has an in-house child and family therapist, and they work closely with other community behavioral health resources. Hillsboro Pediatrics has an in-house behaviorist and a close relationship with LifeWorks counselors.
Integrate oral health services	Hillsboro Pediatrics providers have received First Tooth training—they can do dental assessments and referrals as well as fluoride applications. Randall's care coordinators assist families with navigating the dental system and providers are tracking dental assessments. At OHSU, fluoride is offered at well child visits, and they developed a dot phrase that generates a list of pediatric dental providers.
Prioritize additional support during transitions	Randall's developed a MindMap resource database and an assessment tool as tools for care coordinators to use in assisting with transitions. OHSU and Hillsboro Pediatrics care coordinators work with families and caseworkers to support patient transitions.