

## **Providing Care Coordination Services Through the DHR Early Head Start Partnership Grant**

**Satellite Conference and Live Webcast  
Monday, October 19, 2015  
9:00 – 11:00 a.m. Central Time**

**Produced by the Alabama Department of Public Health  
Video Communications and Distance Learning Division**

## **Faculty**

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Training Coordinator**

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DHR/EHS Coordinator**

**Bureau of Family Health Services  
Alabama Department of Public Health**

## **Objectives**

- Describe the role of the ADPH Care Coordinators
- Identify the focus areas within the assessment process
- Understand the new policies related to clients referred through the EHS grant

## **The DHR EHSCCP Grant**

- The Department of Human Resources Early Head Start Child Care Partnership
- Received award from the U.S. Department of Health and Human Services totaling \$41 million, \$8.3 million per year, for 5 years.
- Will serve 566 children using the EHSCCP model.

## **EHSCCP Model**

- Establishing partnerships between Head Start Programs and Licensed child care centers and a statewide Family Child Care Hub
- Partnerships with Alabama Department of Children's Affairs, the Alabama Department of Public Health, Auburn University and Alabama Department of Post - Secondary member schools

## **Purpose of Grant**

- The DHR EHSCCP program will serve eligible children already receiving child care subsidies.
- Priority need: Teen mothers and families challenged by homelessness, child abuse, and neglect issues.

### **Purpose of Grant**

- **Statewide effort will include urban and rural counties where there is a high number of children experiencing poverty.**
- **Provide the early learning and medical care needed to prepare the child to enter the public school system**

### **Selected Counties**

- **Counties in which the Head Start Centers are located and identified based on grant specified risk factors:  
Dekalb, Talladega, Houston, Randolph, Marshall, Mobile, Limestone, Jefferson, and Madison**

### **Selected Counties**

- **Counties in which Family Day Care Homes and Head Start Centers are located and identified based on grant specified risk factors:  
Conecuh, Dallas, Escambia, Lowndes, Marengo, Marion, Greene, Jefferson, Lauderdale, Mobile, Montgomery and Sumter**

### **Who is Eligible for the Program**

- **EHS children ages 6 weeks old through 4 years of age in counties throughout the state participating in the grant program.**
- **Children already receiving child care subsidies.**

### **DHR's Payment Structure**

- **Care coordination services will be billed directly to DHR monthly.**
- **ADPH will provide Care Coordination reports, follow up data on all client referrals and services rendered.**
- **10 hours of Care Coordination for each enrolled child (566 total children) during the program year.**

### **Role of Care Coordinator**

- **Help to ensure the referred child has an EPSDT screening completed at all required intervals.**
- **Monitor child's compliance with well child appointments and EPSDT appointments with Primary Medical Provider.**

### **Role of Care Coordinator**

- **Assess child’s needs for a dental home, educate and assist in accessing dental services, and monitor compliance with treatment.**
- **Assess if the child and/or family have any other needs and link family with needed resources.**
  - i.e. WIC, SNAP, TANF, Food bank, FQHC, and Immunization Services, etc.

### **How Will This Work?**

- **Early Head Start Referrals will come through CCRS.**
- **Referrals should be assigned to a Care Coordinator within 5 calendar days of receiving the referral.**
- **The electronic referral should be entered in ACORN within 10 calendar days of the referral date assigned to the Care Coordinator.**

### **How Will This Work?**

- **The Care Coordinator should make contact with the family to schedule an appointment to meet with the child’s caregiver/guardian.**

### **How Will This Work?**

- **Phone Interviews**
  - **If the child’s guardian is unable to meet with the Care Coordinator, schedule phone interviews to complete the Psychosocial Assessment and Case Plan.**

### **How Will This Work?**

- **During the initial Face-to-Face visit meeting with parent/guardian, review Release of Information forms CHR-3 and CHR-6A.**
- **Obtain the parent/guardian’s signature on the top and bottom portion of CHR-6A, authorizing the release of both written and verbal patient information to other individuals and providers.**

### **How Will This Work?**


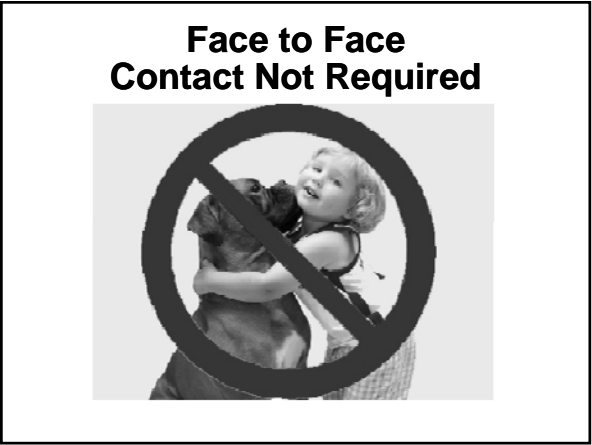
- **Providers may include, but are not limited to the following:**
  - **The Child’s Health Care Providers**
  - **Local Head Start Staff**
  - **Alabama DHR Child Care Division**
  - **Grant administrator (Community Partners)**

**How Will This Work?**

- **RELEASES ARE TO BE SIGNED AND UPDATED BY THE PARENT/GUARDIAN ANNUALLY.**

**Additional Recipient (Provider)**

- List any additional Provider names such as:
  - Alabama Department of Human Resources Child Care Division
  - Other Specific Health Care Providers

**Obtaining Signatures without Face-To-Face Contact with the Caregiver**

- If Care Coordinator is unable to meet face-to-face, there are other available options in obtaining required signatures on the ADPH CHR-3 & CHR 6A forms.

**Obtaining Signatures without Face To Face Contact with Caregiver**

- Mail ADPH Release forms to the parent or guardian for signature.
- Contact the local EHS Contact Person to request assistance in getting the forms signed by the parent.
- Deliver or fax the Release Forms to the child's Head Start Center.

### Protocol Timeframes Early Head Start Referrals

- Assign DHR / EHS referrals to Care Coordinators within 5 calendar days of receiving the referrals through CCRS.
- Enter the electronic referral form in ACORN within 10 calendar days of receiving the referral.
- Attempt contact with the child's caregiver within 10 calendar days of receiving the referral.

### Protocol Timeframes Early Head Start Referrals

- Complete a Psychosocial Assessment within 30 calendar days of making contact with the family.
- Develop a Case Plan within 30 calendar days of making contact with family.

### Completing the Referral Form

- Select DHR/Early Head Start Program

ENTER REFERRAL DATE Calendar Box

### Referral Form Referring Provider Tab

COMPLETE THE REFERRAL SOURCE SECTION:  
1. SELECT "DHR/EARLY HEAD START" FROM DROP DOWN BOX  
2. REFERRAL SOURCE INFORMATION SHOULD PREPOPULATE  
3. COUNTY OF REFERRING PROVIDER - PREPOPULATES "MONTGOMERY COUNTY"

### Reason for Referral

DEMOGRAPHIC INFORMATION PREPOPULATES FROM PREVIOUSLY SELECTED PATIENT INFORMATION

if child attends a Family Day Care Home select " Auburn University"

Select the child's specific HEAD START CENTER he/she attends

### PROTOCOL TIMEFRAMES PSYCHOSOCIAL ASSESSMENT & CASE PLAN

- Develop a Case Plan with the child's parent/guardian within 30 calendar days of making contact with the family.
- Review the Psychosocial Assessment & the Case Plan with the caregiver 6 calendar months from the date of the initial case plan.
- Update the Case Plan, as needed.
- Complete a new Case Plan each year.

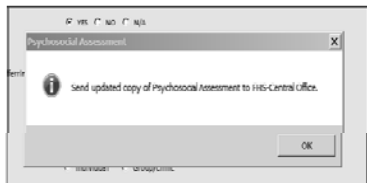


### Report to Referring Provider

### Were There Any Updates to the Psychosocial?

- Report to Referring Provider Question
- “Were there any updates to the Psychosocial Assessment since the last submitted Report to the Provider ? ”
- If “Yes” is selected, a pop up reminder is triggered to alert you to send a copy of the Updated Assessment to FHS / Central Office.

### POP UP REMINDER



### Progress Notes

- 09/04/ 2015
- Service Type:
  - Successful telephone contact;
  - Letter mailed:
- Notes:
  - CC completed phone assessment with pt's mother

### Progress Notes

- Pt is a 3 year old black female residing in the home with her mother and 8 year old brother.
- CC educated mother on the importance of keeping EPSDT appointments.
- Mother explained that the reason for missed appointments was due to transportation issues.

### Progress Notes

- Mother has scheduled a follow up appointment with patient's PMP for September 22nd at 11:30a.m. and has arranged for a neighbor to take her and the patient to the appointment.
- CC provided education on the NET voucher program and offered assistance with initial application.

### Progress Notes

- Patient’s mother was very appreciative for the assistance.
- CC verified Medicaid eligibility to ensure eligibility for the NET voucher program.
- CC also offered care management services for patient’s sibling.
- Mother declined services for the other child at this time.

### Progress Notes

- No other needs were identified
- Case plan completed
- Intervention provided was education on the importance of keeping annual screenings and NET voucher program
- CC mailed pt’s mother an EPSDT schedule in order to ensure timely follow up with PMP

### Progress Notes

- Will follow up as required to ensure appointments are kept
- 09/02/2015
  - Service Type: Other:
- Notes:
  - CC traveled to local EHS center to pick up signed release forms.

### Progress Notes

- 08/31/ 2015
  - Service Type: Other
- Notes:
  - CC met with EHS worker to review the ADPH Release of information forms, CHR 3 and 6A and request assistance with obtaining signatures from patient’s mother.

### Progress Notes

- 08/28/2015
  - Service Type: Successful telephone contact
- Notes:
  - New EHS referral received on this day to address missed EPSDT screening, education, and assistance with community resources.

### Progress Notes

- PHALCON reviewed and updated.
- Patient’s information entered into ACORN.
- CC made phone contact with patient’s mother to explain reason for referral and to educate her concerning Care Coordination services.



### Progress Notes

- Mother states the reason for missed appointments was due to transportation issues.
- CC offered care coordination, educated caregiver on ADPH's release of information forms and offered to schedule a face to face visit at the health department.

### Progress Notes

- CG unable to complete interview at the HD but lives within walking distance of the EHS center.
- CC will phone cg next week for a phone interview and will hand carry the Release of Information forms to the Head Start center to request that parent sign the documents as soon as possible.
- Will follow up as required.

### Patient Contact Requirements

- CC is to have at least 1 successful phone contact or face - to - face encounter with the child's parent/guardian per quarter - every 90 calendar days which begins from the date of the last successful contact.
  - 1 time every 3 calendar months
  - Unlimited contact by phone and mail for appointment reminders.

### How Long will the Case Remain Open?

- All DHR / EHS referrals will remain open for the length of time the child is enrolled in the Head Start Program.

### SSR Coding EHS Referrals

- SERVICE CODE 45
- ACTIVITY TYPE 4

### Amount of Time Allotted for Care Coordination Services per Enrolled Child

- 10 hours of Care Coordination for each enrolled child (566 total children) during the program year.
- If a child needs more assistance during the year additional time can be billed as long as the total billing does not exceed 5,660 hours for the entire state.

### **Purpose of DHR / EHS Program**

- **Ensure the patient has a Primary Medical Provider / Medical Home.**
- **Ensure EPSDT and Well Child Appointments are kept.**
- **Ensure patient is established with a Dental Home.**
- **Assess child and / or family for any additional needs and link family to needed resources**

### **Questions?**

