

## Who are Children & Youth with Special Health Care Needs (CYSHSN)?

Children & youth age 0 thru 20 who have or are at increased risk for a:

- **Physical**
- **Developmental**
- **Behavioral**
- **Emotional**

condition and require health and related services of a type or amount beyond that generally required by children of the same age.

## What Do Families Expect from Professionals in a Medical Home:

- A caring attitude
- A respectful listener
- Someone who sees their child as a “whole” person
- Empathy, support, or “just being there”
- Clinical competence
- Someone to recognize and enhance their power and knowledge
- Someone who allows for and supports hope

The Connecticut Medical Home Initiative for Children & Youth with Special Health Care Needs builds on past experience & success to assure that policies & programs are in place to guarantee that:

- Children have access to coordinated quality health care services
- Providers are adequately trained
- Financing issues are equitably addressed
- Families play a pivotal role in how services are provided to their children
- Children grow up healthy & ready to work

### RESOURCES:

**United Way of CT's Child Development Infoline** provides information about medical, educational & recreational resources. Call 1-800-505-7000.

**Connecticut Lifespan Respite Coalition (CLRC)** provides eligibility information on applying for durable medical equipment and other approved extended goods and services including prescribed medications & specialized nutritional support formulas.

CLRC also provides eligibility information about consideration for respite funding. Respite is care provided in or out of the home, for the purpose of giving relief to the family/caregiver from the daily responsibilities of providing care to the child or youth with special health care needs.



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# The Connecticut Medical Home Initiative for Children & Youth with Special Health Care Needs



## Information for Health Care Providers

## American Academy of Pediatrics Medical Home Policy Statement

The American Academy of Pediatrics (AAP) believes that the medical care of infants, children, and adolescents ideally should be:

- **Accessible**
- **Family centered**
- **Continuous**
- **Comprehensive**
- **Coordinated**
- **Compassionate**
- **Culturally effective**

It should be delivered or directed by well-trained physicians who provide primary care and help to manage and facilitate essentially all aspects of pediatric care.

The physician should be known to the child and family and should be able to develop a partnership of mutual responsibility and trust with them. These are all characteristics of the **Medical Home**.

Physicians should seek to improve the effectiveness and efficiency of health care for all children and strive to attain a medical home for every child in their community.

## What Constitutes a Medical Home Site?

A medical home provides comprehensive care and services and can be located at a:

- **Physician's office**
- **Hospital outpatient clinic**
- **Community health center**
- **Health department clinic**
- **School-based health center**



Important components of a medical home include:

- Continuous access to medical care (24 hours/day—7 days/week)
- When appropriate, referral to pediatric medical subspecialists and surgical specialists
- Partnership with families to deliver appropriate services to enhance

- every child's health
- Interaction with child care and early childhood education programs and schools to ensure that the special needs of the child and family are being addressed
- Necessary system of care services to transition youth to adult-oriented healthcare
- Early and continuous screening
- Easy-to-access community-based service systems

## Quality Improvement Tools For Medical Homes

1. CSHCN Screener ©
2. CT Medical Home CSHCN Complexity Index Tool
3. CT RMHSC System of Care for CYSHCN Referral Process
4. Electronic data management system for tracking and reporting

**Family-professional collaboration is an essential component in the provision of a medical home for CYSHCN.**