



From Planning to Action: Integrated, Collaborative Care for People with Intellectual and Developmental Disabilities (I/DD)

<p>System Gap Addressed</p>	<p>From Planning to Action: Integrated, Collaborative Care for People with Intellectual and Developmental Disabilities is a partnership among The Arc of NC, Easter Seals UCP, and the Autism Society of NC that transitions the systems-change planning groundwork of the Medical Health Home Initiative into actionable demonstrations that advance innovation and access to quality healthcare for people with I/DD.</p> <p>Primary care practices and providers have identified the need for access to colleagues with I/DD expertise to increase their competence and comfort in caring for children and adults with I/DD in their community.</p>
<p>Initiative Goals and Timeline</p>	<ul style="list-style-type: none"> • Develop consultation services and networks that are multidisciplinary resources that improve knowledge and skills of primary care and community healthcare providers so individuals with I/DD can access care in their community. • Conduct evaluation that will measure the effectiveness of the two demonstration pilots and consultation models for scalability and adoption by policymakers and state health systems and payors. • Inform Medicaid Transformation policy, practices and resource allocation to improve access to care and desired outcomes for individuals with I/DD and their families.
<p>Description of Activities</p>	<ul style="list-style-type: none"> • TEACCH, UNC-CH: Increasing Access to Autism Spectrum Disorder Specialty Care in Rural North Carolina: A Project ECHO Pilot. Partnership with Autism Society of NC, Carolina Institute on DD (CIDD) at UNC-CH and Area Health Education Centers (AHEC). Cohort one with Rural Health Group practices was completed in July 2018. Recruiting for cohort two is in process but impacted by Hurricane Florence with an anticipated start date in January. TEACCH has also completed a behavioral health ECHO cohort and started behavioral health cohort two. Attended a meeting of national Autism ECHO collaborative. • Duke University: Primary Care Pediatric Telephone Consultation for Children and Youth with Intellectual and Developmental Disability. Active partnership with CIDD, UNC Children's Primary Care and Complex Care Clinic, and NC START East. Using case finding to implement proactive outreach to pediatric practices: 14 unique consultation contacts blending calls, Electronic Health Record (EHR) secure messaging and face-to-face; 18 proactive contacts with PCPs; 1 face-to-face contact. Exploring use of a secure, HIPAA-compliant platform for telephonic and text-based communication and expanding family partner role. Attended the annual meeting of the national network of child psychiatry access programs. Contributed to two state Health Resources & Services Administration (HRSA) grant applications. • Community-Academic-Provider Consortium meeting on November 6, 2018. Agenda includes updates from TEACCH and Duke, overview of new HRSA awards utilizing the Massachusetts Child Psychiatry Access Program model to address maternal depression and pediatric mental health, and discussion of Medicaid Transformation. • Oral Health: NC Division of Public Health, Oral Health section was awarded an HRSA grant to support the oral health workforce through innovative continuing education. Objectives include replication I/DD workshop piloted in 2016. Project director authored an article on improving access to dental care people with I/DD in fall 2018 Oral Health Equity newsletter.

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Description of Activities (con't)	<ul style="list-style-type: none"> • Presentation on “Family Support: an overlooked asset that can promote integration and innovation in diverse healthcare settings” at October 2018 Mountain Area Health Education Center (MAHEC) Peer Support conference.
Achievements and Outcomes to Date	<ul style="list-style-type: none"> • TEACCH: Evaluation documents project is successfully addressing two stated aims: to improve Autism Spectrum Disorder (ASD)-specific knowledge and treatment self-efficacy of rural primary care providers AND improve the quality of lifespan care received by individuals with ASD by increasing provider diagnostic screening and treatment of common medical and behavioral health comorbidities. ECHO participants report that they are improving their ability to care for individuals with ASD, have greater confidence in working with patients with ASD, case-based learning format enhances their knowledge about ASD and resources, and there are increased rates of Modified Checklist for Autism in Toddlers (MCHAT) screenings at 18 and 24 months. Leveraging ECHO success to expand reach, partnerships and financial support. • Duke: NC-PAL I/DD is addressing two stated aims: establishing telephone consultation infrastructure to provide timely consultation regarding medical and behavioral health needs of youth with I/DD AND providing referral support for youth with I/DD and families to connect with appropriate resources. Developed clinical process and work flow protocols. Case-finding methodology shared with TEACCH and the protocol may be utilized by 2018-2019 expansion sites supported by NC DHHS contract. • Shared evaluation focus on outcomes, impact, model alignment and development of resource directory. • Sustainability: Upon request of NC DHHS, shared recommendations and resource material with consultants assisting with the development of Tailored Plans. The focus was on consultation models and NC pilots, health navigation and key Medical Health Home initiative recommendations. Continue to meet regularly with NC DHHS division staff. Outreach via presentations at conferences, workshop, classes, and webinars reaching more than 400 providers, individuals, families, and policymakers. Launched initiative website: http://www.iddmedicalhealthhomencinitiative.com/ • Developed brief recommending the establishment of multidisciplinary evaluation clinics across the state for children with complex needs to improve access, build community capacity, utilize state expertise and decrease family travel burden.
Expected System Change as Result of Initiative	<ul style="list-style-type: none"> • Healthcare professionals will have increased knowledge and capacity to address the health and support needs of individuals with I/DD and their families. • People with I/DD and their families will partner with healthcare professionals in decisions affecting their healthcare and disability services. • Relevant health outcomes and measures will be identified and aligned with value-based payments and incentives. • Sustainability plan that promotes expansion, scalability and adoption of consultation services and infrastructure by state health systems, managed care organizations, and insurance plans.