



**Lucile Packard Foundation**  
*for* Children's Health

# San Joaquin County 5Cs Project

California Community Care  
Coordination  
Collaboratives II

# San Joaquin County 5Cs

## 5Cs San Joaquin

- Project Goals
  - Build a county-wide inter-agency network of professionals who provide quality service to families of children birth to age 5 with special health care needs via an improved care coordination system.



# Project Goals

- **Create formal channels of information and service delivery** that sustain **a more effective care coordination system for children with special health care needs (CSHCN)** and meet the needs of health care providers, families and service organizations.
- **Increase family and professional access to information** about available resources to improve care conditions for CSHCN and their families.
- **Improve communication** between health care providers, families, and community partners, including stakeholders such as community-based organizations, faith-based organizations, and government agencies.
- **Reduce repeat data gathering by service providers; reduce duplication of tests and services, missed or unscheduled tests and services.**

# Project Partners

- California Children's Services
- Child Abuse Prevention Council of San Joaquin County
- Community Medical Centers, Inc. (Federally Qualified Health Centers)
- Community Partnership for Families of San Joaquin (Family Resource Centers)
- Family Resource and Referral Center of San Joaquin County
- Family Resource Network – Lead Agency
- First 5 San Joaquin/Help Me Grow San Joaquin County
- Health Plan of San Joaquin (Managed Care provider)
- Lodi Unified School District/SELPA
- Parents of CSHCN who reside in San Joaquin County
- St. Joseph's Medical Center
- San Joaquin County Behavioral Health and Recovery Services
- San Joaquin County Human Services Agency – Child Protective Services
- San Joaquin General Hospital and Outpatient Clinics
- San Joaquin County Office of Education SELPA
- San Joaquin County Office of Education Head Start
- San Joaquin County Public Health Services – Maternal Child and Adolescent Health
- Stockton Unified School District/SELPA
- Sutter Tracy Community Hospital- Tracy Hospital Foundation
- Valley Mountain Regional Center
- Victor Community Support Services (Mental Health 0-5 provider)

# Project Work Plan: 3 Phases

- Planning Phase (January 2015 – May 2015): Develop an Infrastructure for 5Cs Leadership Team, Health Navigators, and Collaborative members
- Implementation Phase (May 2015 - June 2016): Training and Development of Health Navigators and SJC 5Cs Project Collaborative Meetings
- Evaluation Phase (January 2016 - June 2016): Evaluate Implementation, Review, and Plan Forward

# Project Planning Phase

- Planning Phase (January 2015 – May 2015): Develop Infrastructure for 5Cs Leadership Team, Health Navigators, and Collaborative members
- From January to March 2015 the 5Cs Leadership Team met monthly to develop an 18-month work plan and establish the roles of participants, including the Leadership Team membership, Health Navigators, and additional Collaborative members and participants.
- The 5Cs Leadership Team developed an agreed upon description of the **expectations of Health Navigators**, reviewed and selected a Memorandum of Understanding (MOU) format, developed logistics to disseminate and collect MOU's and consider necessary recruitment to represent service gaps.
- **Forms and templates were created to solidify roles and responsibilities including MOU's** with interagency information sharing/release of information components, and standardized referral forms for case conferencing at Collaborative meetings.



## San Joaquin SCs Memorandum of Understanding

### VII. RESPONSIBILITIES OF AGENCY

- A. Designate a navigator who is the primary contact for Collaborative members.
- B. Commit to respond to inquiries and requests for assistance from other Collaborative agency navigators within two business days.
- C. Commit to bring forth cases for discussion and/or participate in the Collaborative meetings for the Term of the MOU.

### VIII. RESPONSIBILITIES OF IDENTIFIED AGENCY NAVIGATOR

- A. Respond to inquiries and requests for assistance from other Collaborative agency navigators within two business days.
- B. Respond with the assumption that the request for assistance is complicated and may require resources that are inaccessible to the case manager.
- C. Commit to the process of accessing the most appropriate resource to resolve the gap or barrier to appropriate, timely, or accessible care.
- D. Participate in monthly meetings including bringing forth cases for discussion.

### IX. GENERAL TERMS AND CONDITIONS:

- A. It is understood that this MOU is not intended to, and shall not be construed to create a relationship of agent, servant, employee, partnership, joint venture, or association.
- B. Each party to this MOU will continue to be individually responsible to assure compliance with all State or Federal statutory or regulatory requirements as established, specific to programs or services.
- C. This MOU is intended to provide services to the community of children with special health care needs as articulated in the four essential elements of family-centered care of the Institute for Patient- and Family-Centered Care (2010):
  - i. Respect and dignity: Health care practitioners listen to and honor patient and family perspectives and choices. Patient and family knowledge, values, beliefs, and cultural backgrounds are incorporated into the planning and delivery of care;
  - ii. Information sharing: Health care practitioners communicate and share complete and unbiased information with patients and families in ways that are affirming and useful. Patients and families receive timely, complete, and accurate information in order to effectively participate in care and decision making;
  - iii. Participation: patients and families are encouraged and supported in participating in care and decision making at the level they choose;
  - iv. Collaboration: Patients, families, health care practitioners, and hospital leaders collaborate in policy and program development, implementation, and evaluation; in

# Memorandum of Understanding

Agency and Patient/Health Navigator Roles were stated in the MOU, but many agency participants worked at an agency that chose not to sign the MOU.

The MOU is available at:

<http://www.lpfch.org/sites/default/files/memorandum-of-understanding-sample-from-san-joaquin-county.pdf>

1. Family Resource Network
2. Child Abuse Prevention Council
3. Family Resource and Referral Center/  
Help Me Grow Call Center

### Family Support

Basic

Moderate

Extensive

1. California Children's Services
2. Health Plan of San Joaquin
3. St. Joseph's Medical Center/Neonatal  
Intensive Care Center (NICU)
4. San Joaquin General Hospital/NICU

### Health

## Care Coordination for Children with Special Health Care Needs

### Mental Health

1. Child Abuse Prevention Council
2. Victor Community Support Services

Extensive

Moderate

Basic

### Education

1. Early Start: Valley Mountain Regional  
Center
2. Lodi Area Special Education Region  
Local Planning Area (LASER SELPA)
3. San Joaquin County Office of  
Education (SJCOE) SELPA
4. Stockton SELPA
5. Stockton Unified School District  
Health Services
6. United Cerebral Palsy



# Page 2 Agency Map of Care Coordination Agencies for Young Children with Special Health Care Needs

## Family Support - Basic

Family Resource Network [frcn.org](http://frcn.org)

Child Abuse Prevention Council

[Nochildabuse.org](http://Nochildabuse.org)

Family Resource and Referral Center/  
Help Me Grow Call Center

[Frrcsj.org](http://Frrcsj.org)

## Mental Health - Basic

Child Abuse Prevention Council

Victor Community Support Services

[Victor.org](http://Victor.org)

## Health – Extensive

California Children's Services [sjcphs.org](http://sjcphs.org)

## Health – Moderate

Health Plan of San Joaquin [hpsj.com](http://hpsj.com)

St. Joseph's Medical Center Neonatal Intensive Care  
Unit/NICU [Dignityhealth.org/stjosephs/](http://Dignityhealth.org/stjosephs/)

San Joaquin General Hospital NICU [sjgeneral.org](http://sjgeneral.org)

## Education – Extensive

Early Start: Valley Mountain Regional Center [vmrc.net](http://vmrc.net)

Lodi SELPA [lodiUSD.net](http://lodiUSD.net)

SJCOE SELPA [sjcoe.org](http://sjcoe.org)

Stockton SELPA

Stockton Unified School District Health Services  
[StocktonUSD.net](http://StocktonUSD.net)

## Education – Basic

United Cerebral Palsy [ucpsj.org](http://ucpsj.org)

*This resource map is primarily designed for children ages zero to five*

# Project Activities

- **Implementation Phase** (May 2015 - June 2016): Training and Development of Health Navigators and SJC 5Cs Project Collaborative Meetings

- The 5Cs Leadership Team met monthly prior to or following the SJC 5Cs Collaborative monthly meetings to address upcoming tasks based on the work plan, including Collaborative Meeting planning, learning community activities, mentor county activities, reporting requirements, and evaluation requirements of the 5Cs Project.
- Full Collaborative Meetings were provided monthly, alternating case conferencing with agency in-service and other training topics.
- Deliverables followed training topics to inform the work of Navigators.

# Project Deliverables

- Inter-Agency Memoranda of Understanding
- Payer of Last Resort Workbook
- Agency Eligibility Workbook
- Transportation Guide
- Evaluation Tools

## **Added Deliverables:**

- 2016 Health Forum for CSHCN
- SJC 5C's Authored Transportation Memo
- Mental Health Services Guides for Children Under Age 5
- County Map of CSHCN Resources

### Special Education Local Planning Area (Lodi SELPA)

#### Lodi Area Special Education Region (LASER SELPA)

105 E. Vine St., Lodi, CA 95240

Early Start Services and Preschool Services: (209) 331-7366

Elementary School Special Education Services: (209) 331-7298

Kindergarten through 12th Special Education Services: contact school of attendance

Website: [www.lodi.usd.net](http://www.lodi.usd.net)

Children eligible for special education services living in Lodi Unified, Oak View Union and  
New Hope Elementary School Districts

**Part C (Early Start):** Children 0-3 and their families

**Part B (Special Education):** Students three through 21 years old

#### ELIGIBILITY CRITERIA:

**2 (Early Start):** For children 0-24 months: 33% delay in one area of development (communication, cognitive/emotional, self-help/adaptive, fine/gross motor). For children 24-36 months: 33% delay in two or more areas of development or 50% delay in one area of development (communication, cognitive, social/emotional, self-help/adaptive, fine/gross motor).

**3 (3-21 years):** Students must qualify in one of 13 areas of disability and the disability must adversely affect education and special education services are required in order for student to access and benefit from education.

### Joaquin County Office of Education (SJCCE SELPA)

#### Joaquin County Office of Education, Special Education Programs (SJCCE SELPA)

301 Arch Airport Dr. Stockton, CA 95206

(209) 468-4925

Website: [www.sjcce.org/selpa](http://www.sjcce.org/selpa)

Children eligible for special education services living in Banta, Escalon, Jefferson, Lammersville, Lincoln, Linden, Marysville, Jerusalem, Ripon and Tracy School Districts

**Part C (Early Start):** Birth to Three

**Part B (Special Education):** Three to 22

#### ELIGIBILITY CRITERIA :

**2 (Early Start):** For children 0-24 months: 33% delay in one area of development (communication, cognitive/emotional, self-help/adaptive, fine/gross motor). For children 24-36 months: 33% delay in two or more areas of development or 50% delay in one area of development (communication, cognitive, social/emotional, self-help/adaptive, gross motor).

**3 (Special Education):** For children ages 3-22 who have been assessed and identified as having intellectual disabilities, hearing impairment (including deafness), a speech or language impairment, a visual impairment (including blindness), a serious emotional disturbance (referred to in this part as "emotional disturbance"), an orthopedic impairment, autism, traumatic brain injury, an other health impairment, a specific learning disability, deaf-blindness, multiple disabilities, and who, by reason thereof, needs special education and related services.



Agency Eligibility 12/15

# Eligibility Workbook: SELPA's

Eligibility for participating agencies was combined into a workbook, assuming that changes are relatively rare. Medical professionals, community based organizations, schools and specialists can use the workbook as a reference for referral to services.



## California Community Care Coordination Collaborative Payer of Last Resort

### California Children's Services (CCS)

California Children's Services (CCS) of San Joaquin County  
420 S. Wilson Way, Stockton CA, 95205  
(209) 468-3900  
Website: [www.sjcphs.org](http://www.sjcphs.org)

*From birth to under 21 years of age*

CCS is the payer of last resort. CCS requires all applicants/clients to utilize his/her private health insurance coverage before using CCS. It is the CCS applicant's/client's responsibility to inform the program of any entitlement to private health insurance and must keep the program informed of any coverage changes.

If the family has a HMO Plan:

CCS eligibility is not approved for applicants /clients with HMO coverage except in situations when a needed service is not covered by the HMO. In these cases, CCS will only cover those services that are verified in writing as non-covered HMO services. (A letter of denial from the HMO stating the specific service requested is not covered by the applicant/client's HMO Coverage is required.)

### Health Plan of San Joaquin (HPSJ)

Health Plan of San Joaquin  
7751 South Manthey Road, French Camp, CA 95231  
(209) 942-6300  
Website: [www.hpsj.com](http://www.hpsj.com)

*Prenatal care to birth through end of life*

Medi-Cal is the payer of last resort in most circumstances. It pays for services only after a liable third party has met its legal obligation to pay.

A third party will be expected to pay the beneficiary's health care expenses before Medi-Cal pays for the care whether that third party is health insurance, worker's compensation insurance, a third party tortfeasor, or other person or entity that is responsible by law or contract to pay for the beneficiary's care. Therefore, Medi-Cal usually acts as the payer of last resort and in most instances will only pay benefits to the extent that the Medi-Cal payments exceed the amount for which any third party is responsible.

# Payer of Last Resort

San Joaquin County



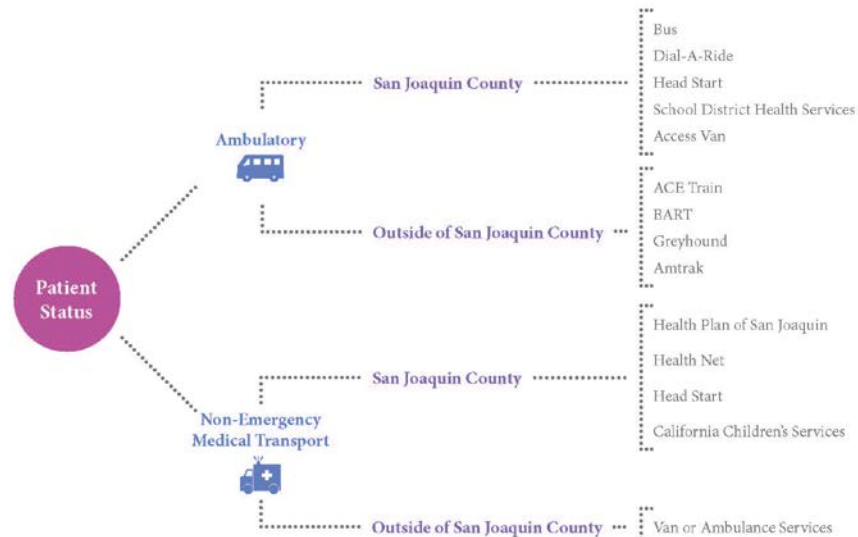
*SJ 5Cs Payer of Last Resort 0615*



# Transportation Guide for CSHCN

All SJC 5Cs deliverables are at the First 5 website: [sjckids.org/](http://sjckids.org/) Help Me Grow San Joaquin under System Navigation Support Information

## Children's Transportation Chart



San Joaquin County



## Health Forum for Children with Special Health Care Needs

Save the Date: Tuesday, May 3, 2016

San Joaquin County Robert J. Cabral Agricultural Center  
Registration 8:30am, Event 9:00am – 4:00pm

Continental breakfast and lunch provided  
A special mid-day break-out session from 11:00am –  
2:00pm will be provided for medical office staff, including lunch

*This event is funded by the Lucile Packard Foundation for  
Children's Health California Community Care Coordination Collaborative Project  
For more information, contact Family Resource Network at (209) 472-3674  
or email to: [frnfamilies@aol.com](mailto:frnfamilies@aol.com)*

*This is a Save The Date Flyer for Tuesday, May 3, 2016*

### LEARNING OBJECTIVES

- Learn community resources to improve care coordination
- Learn resources that will make you a more effective health navigator
- Improve your knowledge of children's systems of care in San Joaquin County for young children with special health care needs

SAVE the  
DATE  
05/03/16



Family Resource  
Network



Help Me Grow  
San Joaquin County



## San Joaquin 5Cs Health Forum for Children with Special Health Care Needs

Agenda Tuesday, May 3, 2016

- 9:00 Welcome and Introductions – Kayce Rane, Rane Community Development
- 9:15 San Joaquin County 5Cs: Collaboration Strategies and Deliverables – Ann Cirimele, Executive Director, Family Resource Network
- 10:00 Education and Care Coordination Systems for Young Children with Special Health Care Needs (CSHCN) Early Start Partner Agencies: Valley Mountain Regional Center, SELPA's and Family Resource Network
- BREAK
- 11:00 Family Care Coordination Challenges – Barbara Patton, Medical Foster Parent
- 11:15 Healthcare Service Updates for CSHCN
- Affordable Care Act (ACA) Update: Insuring the Undocumented – Gloria Nuñez, Contracts Analyst, First 5/Human Services Agency
- School Nursing and Senate Bill 277 Vaccination Exemptions Update – Donna Beckman, RN School Nurse/Special Education, San Joaquin County Office of Education
- California Children's Services Update – Dr. Maggie Park, CCS Medical Director, Public Health Services
- Network LUNCH 12:00 – 12:30 *Lunches will continue to be offered to arrivals after 12:00pm as supplies last*
- 12:30 Community Healthcare Services for CSHCN
- Medical Management: Zeomia Jewel Aguilar, RN CCRN, Health Plan of San Joaquin
- Public Health Nursing Services – Mariya Rabovsky-Herrera, PHN and Rosa Romero, PHN, Public Health Services
- In Home Support Services – David Neves, IHSS Program Human Services Agency
- Emergency Preparedness – Kathleen Conley, Program Coordinator, Public Health Services
- 2-1-1 – Tiffany Phovixay, Data Manager, Family Resource and Referral Center
- Break
- 2:45 – 4:00 pm Future Planning Session for Improved Care Coordination for CSHCN



# Health Forum 2016 Agenda

A very impactful agenda was selected by 5Cs Collaborative members and designed to inform the medical community of community-based resources for Children with Special Health Care Needs.



# Project Evaluation

- **Evaluation Phase (January 2016 - June 2016): Evaluate Implementation, Review, and Plan Forward**
- **5Cs Leadership Team implemented selected evaluation tools to identify gaps and barriers in the care coordination system for CSHCN in San Joaquin County.** Evaluation questions and tools used descriptive data, trends over time, and measures of outcomes to articulate the successes and challenges of the 5Cs Project.
- **5Cs Leadership Team created feedback tools and questions that agencies could add to existing customer service survey tools** appropriate for families, agencies and Health Navigators to assess the needs of CSHCN families and evaluate the impact of the 5Cs Project.
- **Some outcomes were best measured by data produced by health care providers.** Some desired data such as repeated scheduling of specialty care appointments or length of time to access specialty care was found to be very challenging to collect.



## San Joaquin 5Cs Evaluation Summary April 2016

SJC 5Cs Data is designed to collect information on the following:

- A. Gaps and barriers in service coordination that are of greatest concern to health navigators and families.
- B. Usage of the 5Cs process and potential avenues and applications for the process in the future.

### Local Neonatal Intensive Care Unit Transfers to Tertiary Hospitals in 2015

#### St. Joseph's Medical Center Stockton – 38 Transfers Year to Date\*

Reason Transfer/ Hospital for	Gastrointestinal	Genitourinary	Genetics	Respiratory	Cardiac	Neuro	Ophthalmology	Infection Control
Oakland	9	4	2	10	5	7		
Stanford			1					
UC Davis					1			

#### San Joaquin General Hospital - 14 Transfers Year to Date\*

Reason Transfer/ Hospital for	Gastrointestinal	Genitourinary	Genetics	Respiratory	Cardiac	Neuro	Ophthalmology	Infection Control
Oakland	1						1	
UCSF	6		1	2	1	2		

\*data collection occurred between October and November 2015



## Local data sources were researched

In order to address gaps and barriers in services for CSHCN, various agencies data was collected to prepare a picture of need across the county. This is an example of children sent from SJC NICU's at a half year data collection point.

# Partners were surveyed as Experts

**Q9:**

Answered: 16 Skipped: 7

In your role as a Health Navigator, how often do you experience the following care coordination challenges? For example, if you frequently experience care coordination challenges while helping clients access durable medical equipment, mark Agree or Strongly Agree. If you have not experienced challenges, answer Disagree or Strongly Disagree. (Follow this example for questions 9a-i)

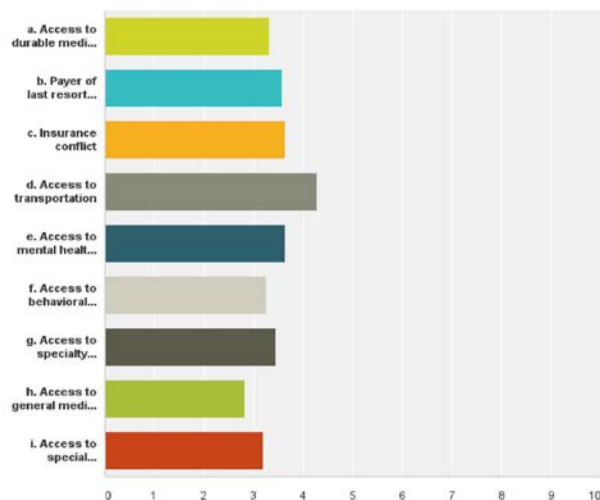
Powered by  SurveyMonkey

# Survey Monkey Q9: Health Navigator Rating of Care Coordination Challenges

Answered: 16 Skipped: 7

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
a. Access to durable medical equipment	6.25% 1	12.50% 2	43.75% 7	18.75% 3	18.75% 3	16	3.31
b. Payer of last resort conflict	6.25% 1	12.50% 2	25.00% 4	31.25% 5	25.00% 4	16	3.56
c. Insurance conflict	6.25% 1	12.50% 2	25.00% 4	25.00% 4	31.25% 5	16	3.63
d. Access to transportation	0.00% 0	6.67% 1	20.00% 3	13.33% 2	60.00% 9	15	4.27
e. Access to mental health services	6.25% 1	6.25% 1	37.50% 6	18.75% 3	31.25% 5	16	3.63
f. Access to behavioral intervention services	6.25% 1	12.50% 2	50.00% 8	12.50% 2	18.75% 3	16	3.25
g. Access to specialty medical care services	0.00% 0	25.00% 4	31.25% 5	18.75% 3	25.00% 4	16	3.44
h. Access to general medical care services	12.50% 2	25.00% 4	37.50% 6	18.75% 3	6.25% 1	16	2.81
i. Access to special education services	6.25% 1	18.75% 3	37.50% 6	25.00% 4	12.50% 2	16	3.19

Responses: In your role as a Health Navigator, how often do you experience the following care coordination challenges?



#### What have we learned?

1. Children with special health care needs that are beyond current county care coordination processes constitute a small number of children.
2. The challenges of care coordination that were predicted at the beginning of San Joaquin County 5Cs did not change significantly; we can predict and anticipate that these challenges will continue.
3. Locally we can improve the ability of diverse agency staff to offer successful health and care coordination to families by increasing key staff knowledge of resources and agency and systems eligibility beyond their own agency.

## Data was summarized for presentations to the 5Cs and beyond

This data has been used with broad implications. Currently 5Cs members are engaged with the SJC Council of Governments in a formal request to allocate local transportation funding to a system of out-of-county non-emergency transportation to Bay Area hospitals.