



# Enhanced Care Coordination for Children and Youth in Foster Care

*Gwynne B. Goodlett, JD, MPA*

Director, Child Health and Well Being  
South Carolina Department of Social Services

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# Learning Objectives

- **Understand the physical health, mental health and educational challenges children and youth in foster care face**
- **Articulate practices designed to help address issues faced by children and youth in foster care including:**
  - initial and more frequent well child visits
  - developmental screenings
  - mental health screenings
  - after-visit summaries
  - enhanced care coordination



# Poll—Comment in Chat Box

## What role do you have in caring for children and youth in foster care?

Primary care practice--provider, nurse, or office staff member

Child welfare professional

Birth parent, foster parent, kinship caregiver, or other caregiver

Other member of the larger child welfare system or medical profession

## For primary care providers, do you or your practice currently serve children and youth in foster care?

Yes

No



# American Academy of Pediatrics

- AAP classifies children and youth in foster care as a population with special health care needs
- Health is defined broadly and includes:
  - medical
  - mental health
  - developmental
  - educational
  - oral and
  - psychosocial well-being



# Health Care Issues

- Overall, 30% to 80% of children come into foster care with at least one medical problem and one-third have a chronic medical condition
- Often problems have gone undiagnosed and untreated
- Up to 80% of children and adolescents enter with a significant mental health need
- Almost 40% have significant oral health issues
- Approximately 60% of children younger than five years have developmental health issues, and more than 40% of school-aged children have educational difficulties



# Mental Health and Educational Issues

- One study found the rate of post traumatic stress disorder for foster care alumni was twice that of veterans of the first Gulf War
- The same study found only 20 percent were "doing well" in later life
- More foster care alumni go to prison than to college
- Overall, 6% of foster care alumni have at least some college education, but only 1% to 2% graduate with a 4-year degree



# Solutions: Initial Well Child Visits

- The AAP recommends that all children in foster care have a health screening visit within **72 hours** of entry in foster care.
- Visits for children and youth in foster care take more time and often more medical research.
- Increased Medicaid rate for **initial** appointment for children in foster care for this extra time needed before and after direct patient care:
  - Billing code 99358, modifier UA—initial visit with patient in foster care
  - Submit along with E&M or well visit code

# Solutions: More Frequent Well Child Visits

**SCDSS enhanced well child visit schedule for children and youth in foster care:**

- Monthly up to six months of age
- Every three months from six months to age two
- Every six months from age two





# Why Have More Frequent Well Child Visits?

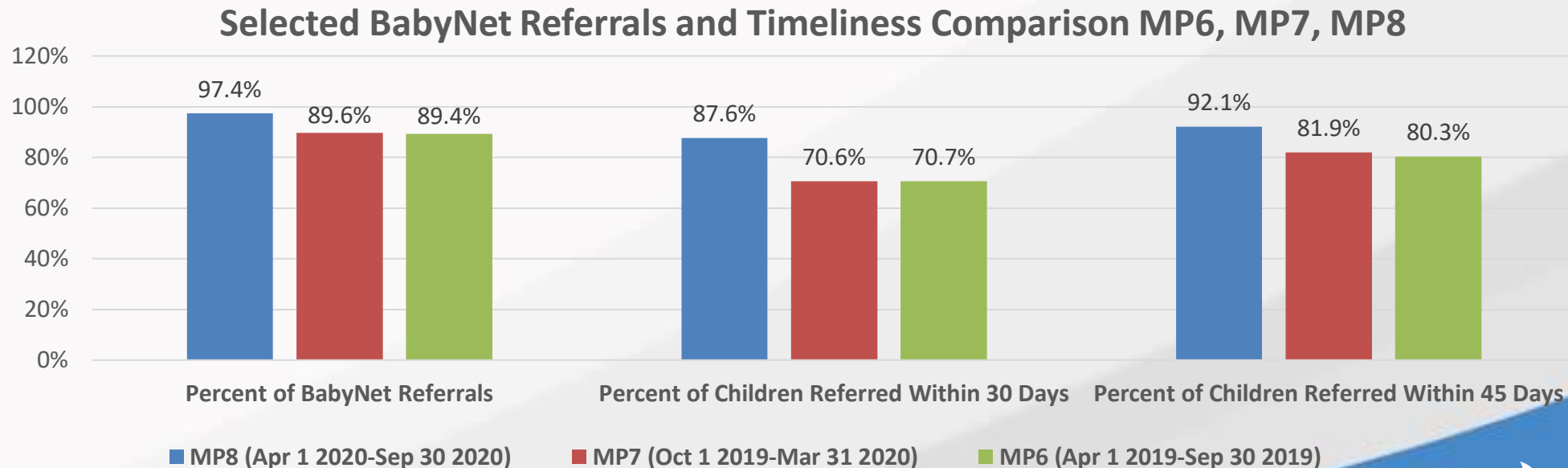
## More frequent well child visits help providers:

- Diagnose and treat the high prevalence of health care problems
- Prevent issues from being overlooked during multiple transitions, frequent placement moves, and changes in providers
- Monitor adjustment to foster care and signs and symptoms of abuse and neglect
- Ensure a child or youth has all necessary referrals, medical equipment, and medications
- Support and educate foster parents, birth parents, and kin

# Solutions: Required Developmental Screenings

Required referral for BabyNet developmental screening prior to age three:

- Made by DSS Case Managers at entry to foster care
- Foster parents may not refuse face-to-face assessment



# Why Require Developmental Screenings?

- Early childhood trauma and toxic stress, especially if frequent and not tempered by responsive, nurturing caregiving, adversely affect neurobiology of the developing brain
- Early childhood trauma is correlated with poor emotional regulation, aggression, hyperactivity, impulsivity, attention and attachment problems



# Solutions: Mental Health Screenings

Child and Adolescent Needs and Strength (CANS) tool has questions relating to adjustment to trauma and exposure to traumatic events:

- Training begins in February 2021 and will be implemented statewide in late 2021
- Includes trauma and behavioral/emotional screening
- Once implemented, CANS results will be provided for the first well child visit

# Why Require Mental Health Screenings?

- Mental health needs are more prevalent for children and youth in foster care
- Experts estimate that 42% to 60% of children and youth have emotional and behavioral problems
- Abuse, neglect and removal from family origin are all traumatic experiences
- Early diagnosis and treatment can change the impact of trauma



# Solutions: After-Visit Summaries

- Given immediately following a visit
- Documents who the child or youth saw, diagnoses, treatment, medication changes, and needed follow up care
- Indicates upcoming appointments
- Best practice: keep it simple-actionable steps and concrete instructions
- Can be generated from an electronic health record

# Poll—Comment in Chat Box

**For primary care providers, do you give patients a written after-visit summary with the next scheduled appointment on it?**

Yes

Yes, but it does not have the next scheduled appointment on it

No, we do not provide after-visit summaries



# Why Have After-Visit Summaries?

## Written after-visit summaries help:

- Foster parents and DSS nurses know what follow up care is needed
- Ensure follow up care is both documented and received
- Document and monitor well child visit schedule so that children and youth are up-to-date
- Communicate when the next well child visit is scheduled



# Solutions: Enhanced Care Coordination

## Select Health Foster Care Team

- Started July 2019
- 19 full time staff—including a part-time medical director, nurse care managers, and care connectors
- **Available to help with:**
  - finding a specialist
  - assisting with medication needs
  - making appointments
  - follow up on referrals or resources
  - navigating insurance
  - education on physical or mental health conditions



Call First Choice Member Services at (888)276-2020, press option #3

**DSS**

# Solutions: Enhanced Care Coordination

## DSS Nursing Team

- Started November 2020
- 6 full time RNs—one who is also a dentist and two temporary nurses
- Available to help if you have questions about a child or youth in foster care



# Solutions: DSS Nursing Team Information

## Upstate

**WellBeingUpstate@dss.sc.gov** fax 864-282-4278

Elizabeth 'Beth' Griffin, RN (864)467-3369(o)(803)767-2707(c)  
Elizabeth.Griffin@dss.sc.gov  
Upstate Regional Nurse  
Greenville County DSS Office, Regional Office Suite

Virginia 'Ginny' Meritt (864) 467-7822 (o) (803) 351-0374 (c)  
Virginia.Meritt1@dss.sc.gov  
Health Care Data Coordinator  
Greenville County DSS Office, Regional Office Suite

## Midlands

**WellBeingMidlands@dss.sc.gov** fax 803-734-2863

Nekesha Archie, RN (803) 898-2298 (o) (803) 873-0576 (c)  
Nekesha.Archie@dss.sc.gov  
Midlands Regional Nurse  
Children's Center Columbia Office

Latisha Watts (803) 898-8941 (o) (803) 394-5544 (c)  
Latisha.A.Watts@dss.sc.gov  
Health Care Data Coordinator  
Children's Center Columbia Office

## Statewide & Congregate Care Liaison

**WellBeingStateOffice@dss.sc.gov** fax 803-734-2837

Rita Melton, DMD, RN (803) 898-4227 (o) (803) 767-2267 (c)  
Rita.Melton@dss.sc.gov  
Statewide Dentist / Nurse  
Columbia State DSS Office

## Lowcountry

**WellBeingLowcountry@dss.sc.gov** fax 843-953-2561

Gretchen Cecere, RN (843) 953-1379 (o) (843) 754-7168 (c)  
to be determined @dss.sc.gov  
Lowcountry Regional Nurse  
Charleston County DSS Office

Shalonda Bradley (843) 255-6192 (o) (803) 394-6312 (c)  
Shalonda.Bradley@dss.sc.gov  
Health Care Data Coordinator  
Beaufort County DSS Office

## Pee Dee

**WellBeingPeeDee@dss.sc.gov** fax 843-519-0840

Bridgett McElveen, RN (843) 519-0184 (o) (803) 351-0729 (c)  
Bridgett.McElveen@dss.sc.gov  
PeeDee Regional Nurse  
Florence County DSS Office

Casey Currie (803) 773-0148 ext. 219 (o) (803) 394-6042 (c)  
Casey.Currie@dss.sc.gov  
Health Care Data Coordinator  
Sumter County DSS Office

## Statewide Nurse Manager

Karen J. McDaniel, RN (864) 467-4921 (o) (803) 995-0751 (c)  
Karen.J.McDaniel@dss.sc.gov  
Nurse Manager  
Greenville County DSS Office, Regional Office



# Free CME Credits--Project ECHO for Foster Care

## Extensions for Community Healthcare Outcomes (ECHO)

- Designed to improve the quality of care for underserved or high-need populations.
- This TeleECHO clinic runs every other week from 12:30-1:30 pm beginning January 5 through June 8, 2021.
- Short didactic presentations for content knowledge.
- De-identified cases are presented to peers and expert mentors.
- Providers share knowledge and build support to better manage patients with complex needs.
- Concept of “**All Teach-All Learn**” includes: interactive learning, ongoing mentorship, peer-to-peer learning, and collaborative problem solving.

# Free CME Credits--Project ECHO for Foster Care

Register here:

<https://www.eventbrite.com/e/select-health-of-south-carolina-foster-care-collaborative-teleecho-clinic-tickets-131089505239>

See the attached flyer to the right

**Mark Your Calendars:**  
TeleECHO™ Clinics Coming Soon!

Series start date: January 5, 2021  
Time: 12:30 p.m. – 1:30 p.m. ET  
Frequency: Every other Tuesday

Select Health of South Carolina, in collaboration with the South Carolina Department of Social Services (SCDSS) and Medical University of South Carolina (MUSC) Children's Health Department, will soon launch TeleECHO clinics — an emerging, case-based learning model to improve health care providers' capacity to treat children and youth in South Carolina's foster care system.

At TeleECHO clinics, providers from multiple locations connect via teleconferencing to present de-identified patient cases to a team of peers and experts for mentoring and shared learning. Case-based discussions will also be supplemented with short didactic presentations to improve content knowledge and share evidence-based practices.

**What is Project ECHO?**  
The Extension for Community Healthcare Outcomes, or ECHO model, was developed at the University of New Mexico Health Sciences Center and is now used nationwide and internationally.

The ECHO model facilitates case-based learning for frontline providers via teleconferencing clinics. Similar to virtual chart rounds, the ECHO model creates a space where providers can share knowledge and build support to better manage patients with complex care needs.

For more information on Project ECHO, please visit <https://hsc.unm.edu/echo>.

**How does a TeleECHO clinic work?**  
Providers from multiple locations connect at regularly scheduled times through teleconferencing using the Zoom application. These virtual TeleECHO clinics allow providers to present de-identified patient cases to a team of peers and experts for mentoring and shared learning. Participant-presented cases serve as a foundation for learning and are supplemented with short didactic presentations to improve content knowledge and share evidence-based practices.

Format: Clinics will take place via the cloud-based software application Zoom. The application is PC- and Mac-compatible, and is available at no cost to participants. However, you may need to download Zoom to your laptop, tablet, or smartphone to participate.

Continuing medical education (CME) units are being pursued for participation in this program — more details will be provided.

**Examples of topics:**

- American Academy of Pediatrics (AAP) Best Practices for Children and Youth in Foster Care.
- Resources to Support Your Practice at SCDSS and Select Health, Billing and Coding, and 21st Century Cures Act.
- Trauma-Informed Care Approaches to Foster Care.
- Partnering With School Systems to Address Educational Needs of Children in Foster Care.

**To register, please visit:**  
<https://www.eventbrite.com/e/select-health-of-south-carolina-foster-care-collaborative-teleecho-clinic-tickets-131089505239>

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# Resources

- AAP Healthy Foster Care America [www.aap.org/fostercare](http://www.aap.org/fostercare)
- Fostering Health <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/healthy-foster-care-america/Pages/Fostering-Health.aspx>
- National Child Traumatic Stress Network [www.nctsn.org](http://www.nctsn.org)
- SAMHSA National Center for Trauma-Informed Care [www.samhsa.gov/nctic](http://www.samhsa.gov/nctic)
- Center for the Developing Child at Harvard University  
[www.developingchild.harvard.edu](http://www.developingchild.harvard.edu)
- AAP, The Resilience Project <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/resilience/Pages/Clinical-Assessment-Tools.aspx>

# Questions

**Gwynne B. Goodlett**

Director, Child Health and Well Being  
South Carolina Department of Social Services

Cell: (803)727-2935

Email: [gwynne.goodlett@dss.sc.gov](mailto:gwynne.goodlett@dss.sc.gov)