Progress Report • May 2014

Care Coordination “Key Elements” (Task Force 1)

Recent Highlights
- Continuing to develop opportunities to test adoption of the care coordination key elements in implementation pilots linking to associated QI measures of success. Several pediatric practices, payers, and state agency programs are engaged, and several grant applications were supported.
- Convened a working group to offer recommendations for structured care coordination needs assessment tools.
- Supporting strategies for tracking success of behavioral health integration models.

Next Steps
The Task Force is gaining visibility for pediatric issues with policymakers and supporting definition of services and accountabilities in new programs and payment models. We continue to enhance the key elements framework in ways that support stakeholder pilot programs and implementation efforts. Priorities have emerged around developing a standardized care coordination needs assessment tool and process, promoting co-development of care plans with authentic family partnerships, and overcoming challenges associated with referral tracking and “closing the loop.”

The CHQC’s cross-stakeholder representation offers an excellent forum for developing consensus around useful tools and feasible measurement of the effectiveness of care coordination. Input is always appreciated on all aspects of our work.

Objectives:
Define a set of foundational elements of high-performing pediatric care coordination linked to measures to monitor their adoption

Support implementation of the key elements:
- Create tools and implementation supports
- Promote feasibility tests of strategies/models for adopting care coordination elements linked to process, structure, and outcome measures to monitor their adoption
- Promote inclusion of the key elements and associated measures in the design of new delivery systems and payment models to support improved child health

Background
Based on input from members of the Task Force, family partners, and the broader CHQC, the framework divides care coordination objectives into five foundational domains:
1. Needs assessment for care coordination and continuing care coordination engagement
2. Care planning and communication
3. Facilitating care transitions
4. Connecting with community resources and schools
5. Transitioning to adult care

The high-level version of the Care Coordination Task Force’s Key Elements Framework is available at:
www.mhqp.org/EmailLinks/CHQC%20CC%20Key%20Elements%20High%20Level%20Framework.pdf
Appendix – Task Force and Work Group Members

Members of Care Coordination “Key Elements” (Task Force 1)

Co-chairs:
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Heather Strother  MA State Innovation Model Grant Project Manager, Division of Child and Adolescent Services, MA Department of Mental Health
Bonnie Thompson  Family Resource Specialist and CHIPRA Family Leader, Mass Family Voices
Judith Vessey  Professor in Nursing, William F. Connell School of Nursing, Boston College
Jean Zotter  Director, Office of Integrated Policy, Planning, and Management, Department of Public Health

Key contributions also from former task force members Susan Epstein (NESERV), Elaine Fitzgerald (NICHQ), Chris Fluet (DMH), David Keller (MassHealth), Cristin Lind (Mass Family Voices), and Gita Rao (MYCHILD)