

**Topic: REDUCING BARRIERS FOR MEDICAL HOME**

**Theme:** Education & Knowledge

**Session 1: Notes**

- Education of what to do will decrease health care costs
- Youth to speak @ high school Seniors w/Seniors (Peer support)
- Documentation- differing data, research  
Definitions – one page document to concisely illustrate MH – families as well (APA vs NCQA)
- Literacy level – Document needs to speak to lower level than 6<sup>th</sup> grade (Spanish language)
- Youth – empowerment, giving youth information to control health care needs – providing tools & questions. Info to parents to support youth
- Standardizes information – who, what, when, where & why
- Transition from 18 into adult life: What is course (parent, child, providers)
- Medie community events
- Community resources – faith, sports, Planned Parenthood, schools – disburse info. Team w/school nurses
- Eliminate barriers—Stress confidentiality
- Integrate wellness into “sports physicals”
- Develop communication systems w/medical providers
- Recognize & differing audiences (grandparents, teen parents raising children
- Prenatal
- Diversify info in packet from CHP+, food stamps, WIC, grocery store ads
- When do you need care – when to say WHEN & go to doctor
- Distribute info thru Emergency room, Urgent care, Triage, etc

**Session 2: Notes**

- Medical Home approach larger than just health – food, make appts. etc
- Assists families – educate families
- Huge barrier transportation—what are resources
- Kaiser – CHP Kits – Where is appropriate avenue/place for services, who do they call
- Hotline for guidance
- How do families receive information before a crisis occurs, chronic care
- What are patients barrier to understanding Medical Home? Identify barriers.
- Once it's implemented in practice – how does it trickle out to large community?
- Process from residency to actual practice
- Teach parents/families without medical jargon
- Cultural change asking clients to be more responsible. What if families don't want to make a decision?
- Conflicting rules & regs
  - ✓ Navigating HIPPA/FERPA for advocates
- What is the theory the state will adopt NCQA vs APA? Credit
- Community driven

**Session 3: Notes**

- Education – Info is conceptual & abstract. How do we make it PRACTICAL? Providers make more concrete
- How do we get concept to all providers insurance (etc) & families beyond Medicaid (CHP)?
- Push out medical home info to community resources – Social services etc
- What are family responsibilities
  - ✓ How do we educate them?
- Educate on responsibilities & rights
- Evaluate the integrated systems
  - ✓ Hospitals, docs, insurance
  - ✓ COMMUNICATION
- Educate communities of MH
- Knowledge of providers of Medical Home – How to monitor
- Pay for people to be healthy

SOULTION:

- Have an impartial 3<sup>rd</sup> party to do care coordination & resources
- Someone needs to look with a bigger picture view
- Think @ using information between hospitals & primary care---gaps in care, gaps in communication
- A plan might be good but if an in-between step is missed the whole plan is failed
- ? A uniform care plan would be helpful so that people don't miss key parts of information (Knowing where to look)