



Beyond the medical home: Coordinating care for children

by **Patrick M. O'Connell** • *Digital Content Editor*



Integrated care coordination is an essential element of a transformed health care delivery system and should be based on a patient- and family-centered approach that stretches beyond the primary care physician, according to a new AAP policy statement.

Anchored in the medical home, this system should include collaboration and communication with multiple systems and individuals who treat and assist children, including social and behavioral professionals, educators, advocacy groups, therapy services and families themselves. Coordination also should include payers and insurers, according to the statement, *Patient- and Family-Centered Care Coordination: A Framework for Integrating Care for Children and Youth Across Multiple Systems (Pediatrics. 2014;133:e1451-e1460)*.

The goal of integrated care is to optimize the treatment of children, developing an efficient system for pediatricians, pediatric subspecialists and surgical specialists to provide services to patients and their families.

Team approach

Partnerships across the medical system are essential to this model, and pediatricians may need to stretch the traditional boundaries of how they provide care. The integration of primary care services — the bedrock of the system — with others in the medical care spectrum is part of a comprehensive approach for tackling patients' needs. This model will lead to lower health care costs, less fragmented care and an improved experience for children and families, the policy states.



Dr. Antonelli

This framework, said lead author Richard C. Antonelli, M.D., FAAP, allows pediatricians to configure the services and resources most needed for children and communities.

At its core, care coordination means developing new models of care delivery, value-based services and realizing that the best forms of patient-centered care are delivered by a team, Dr. Antonelli said.

Pediatricians should be thinking, “What are the family-driven needs for care coordination, and how do these teams effectively address them?” said Dr. Antonelli, who called the concept “disruptive but exciting.” The policy is intended to be broadly focused, realizing that every community has different needs, assets and service gaps based on location, population and cultural factors.

Using this model does not mean altering the basic tenets of the medical home model, but broadening a focus for care that involves others within the medical system beyond the primary care physician. Coordination and collaboration with mental and behavioral health professionals, the

education system, the public health system, as well as payers and medical equipment providers, is essential to providing the best care for patients and families.

“There is ongoing education needed both for practitioner teams, but also to think about what’s needed across disciplines — nurses, social workers, educational providers. . . . It needs to be a team approach,” said lead author Renee M. Turchi, M.D., FAAP.

Communication essential

Much of the process involves effective communication between primary care providers and subspecialists, and with other health care providers. It also means that pediatricians should be thinking about how others outside their practice or office may be able to help a child or address an issue from a different angle or area of expertise.

To optimize integrated care, different people and parts of the medical care process must work together. The goal is to build partnerships to provide the best possible care for the child and the family.

“Partnerships are key, and communication is essential,” Dr. Turchi said. “It really has to be patient and family driven.”

To work toward care coordination, physicians should assess the needs of the patient and family and establish goals that are clear for the patient, family and health care team. They also should discuss what is expected of the family and what physicians expect of themselves, and find out where the family needs help.

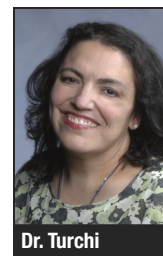
Pediatricians also need to focus on issues outside of medicine, Dr. Antonelli said, realizing how poverty, literacy, food insecurity, violence, mental health and environmental factors affect children’s health.

Care coordination, Dr. Turchi said, also helps with transitions, not only pediatric to adult care, but inpatient to outpatient and out of emergency care.

Pediatricians should use health information technology, Internet-based resources and new communication channels, but be cautious not to rely too much on these elements. Personal interactions and communication, both with the patient and other providers, remain essential to top-notch care.

In order for the system of care coordination to work, physicians may have to relinquish some control, both to other staff within their office and others outside the practice, Dr. Turchi said. The integrated way of operating may be a culture change for some physicians.

“Primary care physicians are not in this alone,” Dr. Antonelli said. “We’re collectively in this together.”



Dr. Turchi