

Environmental Survey Response

1. **Name of project:** Building Community-Based Medical Homes for Children Program
2. **Key project personnel, roles and contact information:** Kathy Sanabria, MBA, PMP, ICAAP Senior Director, Medical Home Initiatives, Illinois Chapter, American Academy of Pediatrics, 312/733-1026, ext 208, ksanabria@illinoisAAP.com
3. **Is there information on a website? URL?** Yes <http://illinoisAAP.org/projects/medical-home/building-community-based-medical-homes/>
4. **What is the target population?** Children and youth with special health care needs (CYSHN) and their medical homes and other providers
5. **Short description/overview of project:** The Building Community-Based Medical Homes for Children (BCBMHC) program provides free medical home quality improvement (QI) facilitation support and resources to practices across the state. Participating practices work to provide high quality preventative care, acute care, and chronic condition management in a planned, coordinated, and family-centered manner. Currently 7 practices/clinics and 3 mentor teams participate. Through the BCBMHC program, practices:
 - Create effective medical home QI teams;
 - Participate in a Learning Collaborative with other practices;
 - Learn from mentor teams who have been through the process;
 - Receive coaching on how to include families in QI efforts;
 - Increase accessibility and cultural competency;
 - Learn how to implement effective care coordination;
 - Learn how to provide planned, pro-active care, including development of written/electronic care plans;
 - Utilize validated assessment tools to facilitate practice improvement and measure change over time
 - Become a DSCC medical home provider and benefit from increased reimbursement; and
 - Learn about the National Committee for Quality Assurance's medical home recognition program and how to apply.
6. **Describe the elements of practice transformation within your project. Are you using the medical home model? Are you using a standard definition or evaluation tool for medical home model?**

The program promotes the AAP definition of medical home, which is an approach to providing primary care that is accessible, continuous, comprehensive, family-centered, coordinated, compassionate, and culturally effective. Through its medical home initiatives, ICAAP works with individual physicians, primary care practices, and community and state agencies to support the dissemination and implementation of the medical home model, with a focus on improving services for children with special health care needs. In a medical home, the primary care team develops a trusting relationship with the family and works as a partner to assure that all of the child's needs are met.

7. **Describe the elements of community linkages within your project:** The program includes parent partners and a representative from the local Division of Specialized Care for Children (DSCC) regional office and facilitates practices to create linkages with community-based resources based on practice and patient needs.
8. **Describe key collaborative relationships:** DSCC and the Family to Family Health Information Center are primary partners. The program is a formal collaboration with the DSCC.
9. **Length of time in existence:** 2 years (building on work of ICAAP's previous medical home initiatives which were established in 2004)
10. **Describe the funding of the project:** At this time the program is provided free to practices and is made possible by grants from the Michael Reese Health Trust and the Chicago Community Trust.
11. **Describe how you intend or are currently evaluating the project. What outcomes are you tracking?** The program requires surveying practices at baseline and follow up with the Medical Home Index and the Medical Home Family Index. In addition, each practice develops its own QI goals and objectives and tracks progress with same using the Plan, Do, Study, Act cycle of practice improvement. Practices receive training on how to develop project charters, write aim statements and track QI measures.
12. **What are the results of the project to date?** Baseline measurements have been completed at all practices. Follow up measurement is currently being conducted and will be completed fall of 2011. Initial results are very encouraging and practices are averaging a 70% improvement on MHI scores from baseline to follow up.
13. **Briefly list key challenges and successes? Challenges:** Keeping family partners engaged and able to attend monthly QI team meetings. **Successes:** Practices are making significant improvement in their practices. Please refer to soon-to-be-published June 2011 Annual ICAAP Medical Home Newsletter for specific information. It is posted on our website at www.illinoisAAP.org under medical home projects.
14. **What support or resources do you need in order to expand or replicate your project?** More funding would enable staff to provide QI facilitation support to additional practices and to identify and train additional facilitators (which is difficult given the need to understand the medical home model and practice systems change in diverse practice settings, and to be present and available for practices across Illinois). Furthermore, incentives for practices to improve provided by payers would help expand engagement of practices.