

South Florida Health and Transition Services (HATS) Taskforce Meeting Minutes

Friday April 15, 2016
1pm-3pm

Present: Michelle Barone, Memorial Health System; Nancy Torres Mailman Center; Martha Bloyer UN 7 PT; Shelly Baer, Mailman Center; Lydia Ocasio-Stoutenburg, UM Teaching and Learning; Tiffany Smith, Broward Behavioral Health; Chelsea Morris, UM Teaching and Learning; Lisa Friedman-Chavez Project 10 Transition Education Network; Damain Gregory Independent Advocate

I. Introductions

II. 'Community Introductions'

a. Tiffany Smith, Broward Behavioral Health, One Community Partnership-2

- i. Utilizes Transition to Independence Process Model (an Evidence Based Practice) to help youth transitioning into adult health care.
 1. Program is a peer support model that partners youth with adults who have personal experience transitioning through the health care system
- ii. Work with youth across multiple systems (criminal justice, education, health care, etc)

III. White Paper Topic: The population of persons with developmental disabilities in the state of Florida is medically underserved, with a shortage of adult providers.

a. *Issues identified by the individual and individual's family members.*

- i. Example given of ER physicians not trained to work with people with autism sending them to psychiatric ward.
- ii. Example of provider who will set aside one or two appointment times to meet the needs of a patient
 1. Incentive for this (that values the physicians interest and dedication)
- iii. What about other medical providers?
 1. Example: Physical therapists are also oriented by age (adult and pediatric). Studies show quality of life declines after children transition into adult care because they do not receive PT (for similar reasons as adult physicians struggle to accept patients) lack of PT increases negative health outcomes such as pulmonary diseases
- iv. Lifespan IPC had an example of youth with HIV who transitioned into adult care and were noncompliant having negative health outcomes impacting life expectancy.

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- v. Training
 - 1. CME requirement?
 - a. How to ensure quality of training
 - 2. Opportunity for other provider agencies to train physicians on what they know
 - 3. Ensuring that families and physicians and families are provided the same information
 - 4. Marketing and providing training for the implementation of existing resources such as the DD counsel HC transition curriculum for educators
- b. *Issues identified by the physician.*
 - i. Physicians not seeing patients due to needs of their other patients
 - 1. Best practice suggestions for physicians
 - a. Example: redesign to waiting room to increase space to accommodate all
 - b. Example: scheduling patients on different days or as the first patient in the day to help decrease stimulation
 - c. Helping physicians to define the line of exclusion, inclusion and special accommodation
 - d. Example: flags in medical records that help the provider to see that the patient may need special accommodation
 - e. Look at jobs accommodation network, is this something we could / should replicate for health care
 - 2. Best practice suggestions for parents
 - a. Help parents to share decision making with kids
 - 3. Best practice suggestion for county
 - a. Replicate Broward's 211 system for disabilities
 - 4. Create space in HATS website to share these best practices
- c. *Issues identified by agencies and other stakeholders.*
 - i. Unmet healthcare needs
 - 1. How are we capturing unmet health care needs? Broward uses 211
- d. *Other issues identified.*
 - i. Could we create a forum wherein each of our agencies, and other taskforces participated in brainstorming for the white paper and the best practice suggestions
 - 1. Could include it with the quarterly medical conference at Mailman Center
 - 2. Could include it with the Transition Conference in September
 - 3. Could ask children's trust and children's services counsel to fund a separate 1 day forum

IV. Tasks

- a. Shelly will connect Kristen to Dr. Dina Varon
- b. Nancy will connect Kristen to the Children's Trust
- c. Suggestion: Lydia to participate in Supportive living coaches monthly meeting, to collect additional perspectives for white paper
- d. Suggestion: Lydia to participate in Life Span IPC meeting (second friday of the month) to collect perspectives for white paper
- v. Next meeting is May 20th at Joe Di >Maggio Children's Hospital