

Nevada ECAC Subgroup Action Plan • Child & Family Health

Subcommittee Co-Chairs: Cheryl Joyce & Megan Wickland

Subcommittee Members:

Goal: Promote and support increased access to and the delivery of high quality, evidence-based health (dental, physical, mental/behavioral health) services for families with young children.

Objective 1

Advocate for increasing access to appropriate health providers in the state, particularly in underserved urban and rural communities, with special attention paid to obstetrics, pediatrics, dentistry, and children’s mental health.

Benchmark: As a result of implementing the strategies and actions for this objective, what is the intermediate result you expect to see in 1-3 years?

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S1	<p><i>Partner with the public and private schools/programs that train health professionals (e.g. medical schools, nursing programs, psychology, social work) in the state to increase recruitment and retention of students to practice in the state.</i></p> <ul style="list-style-type: none"> • <i>Advocate for using students (e.g. through internships) to provide health care services in the rural and underserved areas</i> • <i>Advocate for sites that can offer internships or qualify for loan forgiveness programs</i> 				
	Action	Time-Frame	Resources Available	Resources Needed	Responsible
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S2	<p><i>Advocate for, and provide better training to, health professionals to work effectively with families with young children.</i></p>				
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S3	<i>Partner with the key agencies and organizations that have health workforce development and expansion as a part of their mission to insure there is a focus on young children and their families.</i>				
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S4	<i>Work with other partners to:</i> <ul style="list-style-type: none"> <i>Increase the number of providers who take Medicaid and will provide this coverage in the underserved communities; and</i> <i>Address barriers families experience in making and keeping appointments with their health care providers (e.g., transportation).</i> 				
	Action	Time-Frame	Resources Available	Resources Needed	Responsible
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Objective 2

Support the effective deployment of well-trained community health workers across the state to connect families with young children with insurers (e.g., Connecting Kids to Coverage), physicians and other health care professionals (dental, mental/behavioral/WIC/MCOs/FQHCs) and other community support services.

Benchmark: *As a result of implementing the strategies and actions for this objective, what is the intermediate result you expect to see in 1-3 years?*

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S1	<i>Assist in development of an early childhood module as a CHW specialization to work with families with young children 0-8 years that can be offered through the NV-CHW Association.</i>				
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S2	<i>Connect with NV-CHW Association, which has a HRSA grant, to place a cadre of CHW interns with early childhood programs, such as home visiting, Head Start, Early Head Start and others.</i>				
	Action	Time-Frame	Resources Available	Resources Needed	Responsible
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S3	<i>Advocate for CHW services becoming Medicaid reimbursable and coordinate with existing efforts underway through the pilot study among Nye CCC, HCC and the Medicaid office.</i>				
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S4	<i>Advocate to employers of CHWS to have them partner with families to help reduce no-show rates for Medicaid dental appointments (see Objective 3 below) and follow-up with families scheduled for other mental, behavioral, or medical health appointments.</i>				
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S5	<i>Promote and facilitate efforts to deploy CHWs to work as agents for implementing family engagement strategies in the community (see Born Learning in the Family Support and Community Engagement strategy section) through libraries and other places where families gather (community centers, after school programs, food pantries, etc.) and to work in concert with existing early childhood programs, referring families to them as a primary resource along with linking families to health insurance, primary care and other community supports.</i>				
	Action	Time-Frame	Resources Available	Resources Needed	Responsible
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Objective 3

Raise awareness of mobile health and health fair opportunities and assist in the coordination and expansion of these services.

Benchmark: *As a result of implementing the strategies and actions for this objective, what is the intermediate result you expect to see in 1-3 years?*

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S1	<i>Raise awareness of when (on-line Google calendar through the NICRP-http://snecac.com/calendar) mobile services are scheduled in each area.</i>				
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S2	<i>Promote events with community partners through various media channels so they connect their clients to these services.</i>				
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S3	<i>Bridge independent efforts of local and regional partners involved in scheduling mobile health services to the Coordinating Agency's Google calendar:</i>				
	<ul style="list-style-type: none"> <i>Raise awareness of when (on-line Google calendar through the NICRP-http://snecac.com/calendar) mobile services are scheduled in each area.</i> <i>Promote events with community partners through various media or other channels (i.e., coalition meetings or parent meetings) so they connect their clients to these services.</i> 				
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Objective 4

Promote high quality programs that are implemented with fidelity to produce positive health outcomes for parents, infants, and children (e.g., Well-Child Visit/Bright Future; NHV Home-Visiting models (Parents as Teachers, HIPPY, Nurse-Family Partnership, Early Head Start).

Benchmark: *As a result of implementing the strategies and actions for this objective, what is the intermediate result you expect to see in 1-3 years?*

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S1	<i>Work closely with all strategy partners that touch high numbers of families across the state (like WIC) to insure they are including their EBPs and referring families to high quality programs in the state's 2-1-1 system.</i>				
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S2	<i>ECAC will communicate with the Director's Office of DHHS and 2-1-1 to strengthen usability and accuracy of information as a centralized Information & Referral source.</i>				
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S3	<i>Review of EBP programming available for Nevada’s young children and their families including the service delivery area, eligibility criteria, and if there is a waiting list.</i>				
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Objective 5

Expand ECAC to include representation from the health field.

Benchmark: *As a result of implementing the strategies and actions for this objective, what is the intermediate result you expect to see in 1-3 years?*

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S1	<i>Work through the ECAC member networks to approach Governor Sandoval to determine feasibility of appointing individual(s) who represent the health professions (pediatrics, pediatric dentistry, child psychiatry) prior to his term ending in December 2018.</i>				
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S2	<i>Work with Governor's Office and ECAC Members to change legislation in 2019 to allow for a variety of additional members to be appointed, as the times and need dictates, including but not limited to the broad spectrum of health professionals and fields.</i>				
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