

Children's Special Health Services
Report to the Developmental Disabilities Council
September 2008

Children's Special Health Services had its annual **MCH Block Grant Review** in August. This year the review was held in Austin, Texas. We receive most of our funding from the federal block grant, which draws a 43% state match. Our review usually goes very well, but this year it went particularly well because we had gone from below the national average in all six of our National Performance Measures, or block grant objectives, to above the national average in four out of six, as I had previously shared with this Council. This is based on MCHB/ CDC survey data from 2002 and again in 2006, which we just received. At the review this drew a round of applause. We attribute this success not only to our efforts, but to the success of Medicaid's Community Care program which links children with a primary care provider and requires that referrals be coordinated by that provider. This data also shows that the percent of CSHCN in Louisiana has decreased between the two surveys. We assume that this is because many of our children with more complex medical needs left the state after Katrina because their needs could not be met in the post-Katrina health care environment. The next time this survey will be conducted is 2010.

CSHS has continued the **Care Coordination pilot in CSHS clinics in Region I**. This continues to be a slow process, since the social worker in Region I had just resigned before the hurricanes, and the lead nurse has been out on medical leave. Then during Hurricanes Gustav and Ike, the remaining clinic staff was pulled to work in the Special Needs Shelters. However, our staff has kept the Care Coordination process moving and we will be sending surveys to families who received Care Coordination to get their feedback on whether the process was helpful to them in the near future. After receiving the surveys of staff and families, we will make adjustments to the Care Coordination process based on the feedback we get, and then move on to training other regions.

CSHS has started **revision of its Policy Manual**, which is so antiquated that it is pre-computer. This will be a long process, but it will get jump started at a conference October 22-23 in Lafayette where we will bring key CSHS regional staff including Parent Liaisons together to get their collective input into how our Policies and Procedures might be updated to be more efficient. This overlaps with one of our **quarterly statewide Parent Liaison Trainings**, so we will be sure to have parent input in each decision, as is the policy in everything we do in CSHS.

We have recently **updated our website**, to make it more user friendly and to include more of our activities as well as links that might be helpful for parents of CSHCN. I would encourage you to access it through the DHH website (www.dhh.la.gov) or by typing in: <http://www.dhh.louisiana.gov/offices/?ID=256>.

Finally, CSHS central office and regional staff activities were greatly affected by the Hurricanes. Regional clinical staff worked in the Special Needs Shelters as did Betsy Snider, our central office nurse consultant, and I. Several of our staff helped DSS to

distribute food stamps after Hurricane Ike. Central office staff is now back and Regional clinic activities are very slowly getting back to normal.

Hearing, Speech and Vision provided **171 audiology/speech visits in CSHS clinics** and **provided 31 hearing aids** to CSHS eligible children. During the last quarter its **Early Hearing Detection and Intervention (EHDI) Program screened over 96% of infants** born in LA for hearing loss at birth. Over **160 professionals and volunteers in schools and pre-schools were trained to conduct vision screening** by two of the programs' contracted vision specialists.

The program suffers from a shortage of audiologists, with only three audiologists serving the entire state. Our request for a fourth audiologist was approved before the hiring freeze, but then couldn't be filled because of the freeze. When the freeze was lifted all vacancies from OPH were taken and we lost the position. CSHS will probably hire an audiologist by contract because this service is so important in the regions.

LA Birth Defects Monitoring Network was mandated in 2002 to develop a statewide active surveillance system to monitor babies born with birth conditions requiring medical intervention. This program was initially funded by a CDC grant but has been funded entirely by CSHS since that initial grant ended. This program has grown rapidly in the past couple of years and now boasts a staff of 8 and birth coverage that will soon approximate 70%. Our 2009 budget, which we just received, will permit continued expansion with one more data collection specialist, and mailing of our new resource booklet to families. However, funds for computers and an epidemiologist for this program were cut. Our goal is to cover 100% of births by 2010. When the program is statewide, state prevalence rates of various conditions can be calculated and the network will permit identification of clusters and possible related causes of conditions that may be particular to Louisiana.

The new **resource guide for parents** can be found on our website.