Improving Care and Access to Care:

Case Study 4
Many of the children and families we serve have comorbid medical problems such as sleep or GI issues. We are a subspecialty program for developmental disorders and not a primary care program. Trying to provide this care to large volume of specialty patients reduces access for others needing our services. How can we collaborate with these primary care providers to see that these children and youth receive the care they need? What methods have been effective in connecting with these providers and connecting families with this care?

1. Read the case study. Outline and determine the problem that is presented.
   - Need for specialty care that PCP may not be trained to provide - level of discomfort, increases demand/reduces access to specialty clinic

2. Brainstorm new or existing approaches that could be used to help address this problem. What avenues has your state or program pursued in similar situations? Is there something your state or program has wanted to implement, but hasn’t yet due to lack of funding/resources? Are there innovative approaches that could be used?
   - Training provided to PCP offices
   - Building relationships/consultation between specialty clinic and PCP
   - Collaborative Office Rounds - case-based learning, Q &A, mini-fellowships with PCP coming to specialty clinic for observation/training

3. Engage in dialogue and discussion to explore and clarify the problem and talk about which approaches may be the most feasible and effective for addressing this problem