



Champions for Inclusive Communities

www.ChampionsInC.org

Champions For Inclusive Communities (ChampionsInC) is a national leadership and resource center designed to support states and communities in organizing services so families of children and youth with special health care needs (CYSHCN) can use them easily and families are satisfied. The implementation of community-based service systems is a key component of Healthy People 2010 as stated in its Objective 16.23: To increase the states and territories that have service systems for children with special health care needs. ChampionsInC can help your state and/or community in achieving this national goal.

What ChampionsInC offers

A variety of technical and web-based resources are available from ChampionsInC to assist states and communities in their community-building efforts:

- **Technical Assistance** - States and/or communities that need support in building partnerships, developing and implementing an action plan, and measuring outcomes can contact ChampionsInC staff for guidance and assistance.
- **www.ChampionsInC.org** - Our website provides resources for policymakers, providers, and families interested in improving services for CYSHCN. A Discussion Forum is being developed to provide a way for those involved in community building to share challenges and solutions.
- **Champions E-newsletter** - This bi-monthly newsletter provides an exchange of information about resources and opportunities related to integrated community services. Links to community-based initiatives, such as funding and technical assistance opportunities, serve as a resource to support and sustain community efforts.
- **Community Tool Box** - This interactive, web-based tool provides step-by-step instructions for community teams interested in developing action plans and organizing services.
- **Evidence-Based Practices** - Reviews of the literature in areas such as care coordination, community coalition building, and racial disparities are available to help communities implement effective strategies.
- **Community Recognition Program** - This recognition process will acknowledge the efforts of communities across the U.S. that are developing sustainable mechanisms to organize services so families can use them easily.

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How Communities Organize Services

The goal, “Community-based service systems are organized so that families can use them easily and are satisfied with what they receive,” has multiple key components.*

- Families can access culturally competent, comprehensive services and supports for their child and family, including specialty care, in their community.
- Families are satisfied with services and supports they receive.
- Services are coordinated among all providers, and families receive supports such as a coordinated service plan and a care coordinator.
- Families are connected to a variety of services and resources via a streamlined enrollment process.
- Public-private partnerships work to develop service systems at the community level.

* From *Measuring and Monitoring Community-Based Systems of Care for CSHCN* (2003), Early Intervention Research Institute, Utah State University, Logan.

Strategies to Organize Services for Individual Families:

- Cultural brokers who help reach families from diverse cultures
- Coordinated service plans that are developed across multiple providers and agencies with family members as the lead
- A single care coordinator, often associated with the child’s medical home
- Wrap-around service teams to fill gaps in needed services

Strategies to Improve Policies and Practices:

- Community coalitions comprised of providers and diverse family representatives to oversee systems development
- Co-location of multiple services under one roof
- Blended funding to fill financial gaps
- Electronic application systems to access multiple programs

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According to the 2005/2006 National Survey of CSHCN:

- One out of five families who needed a referral reported problems.
- Two major problems were getting needed information and services.
- Families of CYSHCN more likely to have unmet needs were those:
 - Whose child had emotional, behavioral, or developmental challenges;
 - Whose child had functional limitations;
 - Who had inconsistent or no health insurance;
 - Who had income below the federal poverty level; and/or
 - Who were headed by a single mother.

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