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## **Children with Special Health Care Needs**

Children and youth with special health care needs (CYSHCN) are those who "have or are at increased risk for chronic physical, developmental, behavioral or emotional conditions and require health and related services of a type or amount beyond that required by children generally. An approximately 320,158, or 21%, of Tennessee children under the age of 18, have a special health care need, compared to the national average of 13.5 million, or approximately 20%. CYSHCN and their families often need services from multiple systems - health care, public health, education, mental health, and social services.

Promoting overall health and wellbeing for children and youth with special health care needs is a critical part of their ongoing health care. Too often treating the child's illness or addressing ongoing needs for special services take the focus off the importance of health promotion issues that need to be addressed in the care of all children. While addressing acute health care needs is necessary, so is assuring good health and wellbeing across the life span.

To achieve optimal health and quality of life for all CYSHCN and their families, ensuring an effective system of care, including a medical home, is of the utmost importance.

### **What is an Effective System of Care?**

An effective system of care for CYSHCN ensures:

- CYSHCN are screened early and continuously.
- Families of CYSHCN are partners in decision-making.
- Community-based services are organized so families can use them easily.
- CYSHCN can receive care in a medical home.
- There is adequate insurance and funding to cover services.
- CYSHCN receive services necessary to make transitions to adult health care.

Improving the system of care for CYSHCN can maximize outcomes for women, pregnant women, and children in general. What works for the most vulnerable should work for all.



As part of the system of care, promoting social, emotional, and physical health are critical when addressing child development and resilience. There is evidence that children and youth, with special health care needs, who participate in regular physical activity and engage in social interactions, feel better about themselves, have fewer mental health issues or depression, experience improvement of some symptoms of conditions (increased attention and concentration, reduction of asthma) and have more opportunities for social participation with peers.

### **To learn more about CYSHCN, visit:**

- Referral link for the CHANT/CSS: [State of Tennessee \(formstack.com\)](https://formstack.com)
- Children and Youth with Special Health Care Needs – Tennessee Department of Health. <https://www.tn.gov/health/health-program-areas/mch-cyshcn.html>
- Tennessee Disability Pathfinder. <https://www.tnpathfinder.org/>
- Inclusive School Physical Education and Physical Activity – CDC Healthy Schools, Centers for Disease Control and Prevention. [https://www.cdc.gov/healthyschools/physicalactivity/inclusion\\_pepa.htm](https://www.cdc.gov/healthyschools/physicalactivity/inclusion_pepa.htm)
- Children and Youth with Special Health Care Needs – HRSA Maternal and Child Health. <https://mchb.hrsa.gov/programs-impact/focus-areas/children-youth-special-health-care-needs-cyshcn>
- Tennessee Voices for Children and Pediatricians – American Academy of Pediatricians. <https://www.tnaap.org/>

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Click on the image to expand.



# 7 ASPECTS TO A MEDICAL HOME



A medical home should be...



## ACCESSIBLE

Care is easy for each child and family to obtain, including geographic access and insurance accommodation.



## FAMILY-CENTERED

Each family is recognized and acknowledged as the primary caregiver and support for the child, ensuring that all medical decisions are made in true partnership with the family.

## CONTINUOUS

The same primary care clinician care for the child from infancy through young adulthood, providing assistance and support to transition to adult care.



## COMPREHENSIVE

Preventative, primary, and specialty care are provided to each child and family.

## COORDINATED

A care plan is created in partnership with each family and communicated with all health care clinicians and necessary community agencies and organizations.



## COMPASSIONATE

Genuine concern for the well-being of each child and family are emphasized and addressed.

## CULTURALLY EFFECTIVE

Each family and child's culture, language, beliefs, and traditions are recognized, valued, and respected.



## Medical Home

According to the American Academy of Pediatrics, a medical home is not a building, house, or hospital, but rather an approach to providing comprehensive primary care. The primary care team develops a trusting relationship with the family and works as a partner to assure that all the child's needs are met.

This is a dynamic process driven by the health status and developmental progress of the child, the specific needs of the child and family, the primary care physician's expertise with children with special health care needs, and the ability of the family and/or other professionals to participate in care coordination.

A medical home is coordinated by the primary care physician or provider, and gives care that is:

- Accessible
- Accountable
- Comprehensive
- Continuous
- Coordinated
- Culturally Effective
- Family Centered



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