
ENSURING QUALITY & ACCESSIBLE CARE: EARLY IDENTIFICATION & INTERVENTION CSHCN

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BACKGROUND

- **The early years**
 - Accessing screening, early intervention
 - Engaging state based services & school systems
 - Lack of local referral resources
 - Few community based services (sports, social, etc)
- **Military transition = lapse in care**
 - Starting over with healthcare and education system
 - Insurance
- **Resilience**

DISCOVERIES

- **Variability of screening/early intervention**
 - Myths/misperceptions
- **Insufficient resources**
 - Insurance participation & transportability
 - Sports, arts, social skills
 - Support services for families
- **Care transitions, continuity of care**
- **Fragmented & sometimes redundant services**
 - Understanding, communication & collaboration “state & school based services” ↔ “healthcare”
 - Artificially imposed silos of care (e.g. OT- handwriting, Speech- articulation, ABA- behavior, etc)

REVELATIONS

- **Reliance on developmentalists = limited access**
- **Parents as bystanders**
 - Fear of diagnosis/label
 - Complex healthcare & education systems
- **High expectations of school system and teachers**
 - Often without appropriate system supports (funding, education/continuing education, assistance)
- **One size does not fit all**
 - Autism SPECTRUM, needs are very individual

GOAL

- **Develop children who grow to be productive, contributing, collaborative members of society**

VISION

- **Parents as partners**
 - Community mentor programs
 - Support services for families
 - Widely available parent training programs (with childcare available)
- **Parents & HCP as case managers and advocates (long-term)**
 - Harnessing & maximizing those who are with the child for short or finite periods of time

INTER-PROFESSIONAL PRACTICE/ PARTNERSHIP/ EDUCATION/ COLLABORATION

- **Is this a primary care diagnosis?**
 - Multi-specialty certification?
- **Educate all primary care & mental health- screening, early intervention/ early referral (even if unsure of diagnosis)**
 - Best practices
 - Specialty collaboration
 - Availability of services, resources
 - Reimbursement- ACA MEC, CHIP/Medicaid
 - State & school-based services
- **Consistent HCP/educator training & support**
 - **Continuing education- (Free!)**

COMMUNICATION, COMMUNITY & CONTINUITY

- **Communication & fluidity: healthcare & education**
 - Removing silos
 - E.g. OT- fine motor, executive functioning, coordination, motor planning, etc.
 - Conversations, Multi-disciplinary Teams
- **Diffusion across settings and in natural settings (community)**
 - E.g. Social skills & OT at the bowling alley vs in an office
- **Transitions of care**
 - Handoffs
 - For military families, transition shouldn't cause lapse in care



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