

CHILD HEALTH QUALITY COMMITTEE

VISION:

Strategically coordinate efforts to strengthen the well being of children served by ODJFS.

MISSION:

Improve coordination and quality of services, increase communication channels, and maximize financial resources for children ODJFS serves.

VALUES:

Quality of Services – Improved communications - Fiscal responsibility.

PARTNERS:

Offices of: Ohio Health Plans, Child Support, Children and Families, Fiscal Services, Family Stability.

STRATEGIES:

This is where we pick up at the next meeting. Please come with thoughts in mind of what these strategies will look like and how they will be forward motioned into an action plan, supported by each respective Office within ODJFS. I would anticipate that we would come up with at least 3 strategies.

IMPLEMENTATION PLANS:

THOUGHTS FROM THE LAST TWO SESSIONS:

- Who are we addressing?
 - All children within the scope of our business.
 - Low income families/children.
 - Disabled
 - All Medicaid eligibles under 21
 - Kids in custody.
- What is needed?
 - Getting parents information so that they can care for their children
 - Access to providers and other relevant information
 - Medical home, improvement of care coordination across systems
 - Quality of Services
 - Communications continuum
 - Thorough thinking and care coordination at the local level that involves the MCP's
 - Fiscal accountability, what does this mean and how do we get better at it? And how do we maximize our resources?

- Additional thoughts:
 - Coordination of how we write our business partner agreements. Bring agreements to the committee for knowledge based assessments.
 - Identify common definitions around the scope of work we do.
 - What are other departments doing? For examples, SECCS/ODH.
 - How does 0-3 Guidelines affect the work we do?
 - Data needs and data sharing needs.
 - Screening via EPSDT services, which includes;
 - Tools
 - Assessments
 - Access
 - Follow up care
 - Medicaid eligibility