UW Health-AFCH Pediatric Complex Care Program Shared Care Plan Summary

Components include:
• Medical summary (including providers involved in care)
• Family strengths and preferences
• Negotiated plan of action (including clinical and family goals, actions to address goals, responsible partners, and timeline)
• Other necessary attachments (such as emergency plans, chronic condition protocols, and relevant legal documents such as IEPs or 504 plans)

Medical Summary

1. **"Who Am I?"/Patient Description:** (One or two line description of patient)
2. **Problem List** (imported from EMR)
3. **Your Child's Care Team**
    a. Peds Complex Care Core Team: (including contact information)
    b. Primary Care Provider:
    c. Specialty Physicians:
    d. Community Services:
    e. Primary Pharmacy:

Plans of Action

1. **Goals:**
    a. Goals for You/Your Child...
        i. ***
        ii. ***
        iii. ***
    b. Goals for working with the Pediatric Complex Care Program...
        i. Facilitate access to insurance benefits and community resources.
        ii. Assist with scheduling needs
        iii. Facilitate medication and feeding management
        iv. Provide medical co-management in communication with PCP and specialists
        v. Coordinate care with all members of your child's care team.
        vi. Facilitate and provide education, guidance, and support related to the care of your child in and out of the hospital.
        vii. Support you/your child through transitions like hospital to home, pediatric to adult care, and care outside of our health system.

2. **Instructions/Follow Up from Visit:**
    a. Complex Care's items...
        i. MD/NP will...
            1. Complete a chart review and develop a clinical summary of your child's history and care needs.
            2. Make referrals to:
        ii. RN will...
            1. Assess and monitor medication management and labs
            2. Provide ongoing assessment of and education on medical care needs
        iii. CCA will...
            1. Assist with transportation needs
            2. Assist with scheduling needs
            3. Schedule Peds Complex Care follow up visit/ care plan update within six months
        iv. SW will...
            1. Assess need for resources including community-based programs and mental health
            2. Provide assistance with navigating insurance issues
    b. Family's items…
        i. Please communicate with us at least monthly

Family's Strengths and Preferences

1. Family Structure/Strengths – succinct social/educational summary
    a. Who lives at home?
    b. Other people involved in care/sources of support
    c. Religious/cultural considerations
    d. Education preferences
    e. Description of housing
    f. Parental occupation(s)
    g. Transportation
2. Care Needs/Preferences – assessment of daily home care needs and plan of care;
    a. Nursing Care
    b. Personal Care Worker/Respite Care
    c. Therapies
    d. Equipment

Other Important Items

1. Crisis/Emergency Plans (as applicable)
    a. G/GJ/J Tube
    b. Constipation
    c. Respiratory
    d. Seizure
    e. Adrenal Crisis
    f. Asplenia
    g. Hypoglycemia
    h. Vomiting/Feeding Intolerance
    i. Other
2. Assessment of Resources (not all-inclusive, as applicable)
    a. Basic Needs (not covered by insurance)
        i. Food
        ii. Clothing
        iii. Housing
        iv. Energy Assistance
        v. Diaper banks
    b. Insurance/Government/Legal Issues Specific to CSHCN
        i. Medicaid coverage options
            1. Badgercare (including HMO exemptions)
            2. SSI
            3. Katie Beckett
        ii. County Long Term Support Program
        iii. Transportation
            1. MTM mileage reimbursement
            2. Disabled parking permit
        iv. Personal care items
            1. J&B Medical for diapers for >4ys old
        v. Therapy/Education
            1. Birth-3
            2. School IEP or 504
        vi. Guardianship/Transition to adulthood
    c. Health/Preventative Care
        i. Medication Management
            1. Simplify My Meds
            2. Pharmacy delivery service

            3. Medication Assistance Program
      ii. Dental
      iii. Immunizations
      iv. Mental health resources (for patients and caregivers)
d. Child Care
      i. Respite
            1. Individual workers
            2. Gio's Garden
      ii. Personal care worker
      iii. Child care centers/after school programs
e. Transitions of Care
      i. Hospital to Home
      ii. School
      iii. Youth to Adult Care
      iv. Moving care to another health system
c. Other
      i. Ronald McDonald House
      ii. Family Voices of Wisconsin
      iii. Southern District Regional Center
      iv. ABC for Health advocacy
      v. Education advocacy
      vi. Home renovations for accessibility
      vii. Vehicle modifications or purchase of accessible vehicle
      viii. Make-A-Wish program
      ix. Miscellaneous
            1. Special needs bed
            2. Medic-alert bracelet