

System Domain 5: Community-Based Services and Supports

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CYSHCN and their families are provided access to comprehensive home and community-based supports.

1. Agreements are in place between the health systems and community agencies including family organizations, public health, education, Early Intervention, Special Education, child welfare, mental health, and home health care organizations and are structured to:

- promote family support through linking families to family organizations and other services and supports,
- promote shared financing, where appropriate,
- establish systems for timely communications and appropriate data sharing,
- ensure access and coordination of services
- promote collaboration between community-based organizations and agencies, providers, health care systems, and families, and
- specify responsibilities across the various providers, and community-based agencies.

Home-Based Services

1 Home health care is a covered benefit for CYSHCN that includes health care for the child and supportive care for the family and is provided in the family's home by professionals who have experience in pediatric care.

Related National Principles and Frameworks

- [Ease of Use Framework.](#)
- [Standards and Guidelines for NCQA's Patient-Centered Medical Home \(PCMH\) 2014, NCQA.](#)
- [National Respite Guidelines: Guiding Principles for Respite Models and Services. ARCH National Respite Network and Resource Center.](#)

How has this domain been used?

About 70% of the surveyed Title V officials, and about 50% of the surveyed Medicaid officials, indicated that this domain was one of the most useful domains of the National Standards for Systems of Care for CYSHCN.

Examples of how states have used this domain:

South Carolina used this domain as a source of information when the operations and community options staff reviewed the design of the Children's Community Care Program, which includes the Medically Complex Children's Waiver.

Washington uses this domain to inform its efforts to develop, advance, and/or implement policies that support and sustain statewide systems improvements, community supports, and resources for CYSHCN and their families.

Palliative and Hospice Care



1. Curative and palliative care (also known as concurrent care) are both available and offered to families of CYSHCN at the same time.



2. Palliative and hospice care utilizes family-centered models of care that respect the CYSHCN and their family's preferences, values, and cultural beliefs, and provide family access to psychosocial screening and referrals to needed supports and services

Respite Care



Respite services, both planned or emergency, are available to all families and caregivers of CYSHCN.



Families and caregivers of CYSHCN are screened for respite care needs, made aware of available respite services in their community, and have a system in place for ensuring timely referrals for families of CYSHCN with emergency respite needs.



Families are informed and helped to access available respite services which may be provided in a variety of settings, on a temporary basis, including the family home, respite centers, or residential care facilities.



When out-of-home respite services are needed, transportation is available to help a child and family access these services.

Aligned Quality Measures

- [Number and percent of infants and toddlers receiving early intervention services under IDEA, Part C, by age and state.](#)
- [Number and percent of at-risk infants and toddlers birth through age 2 receiving early intervention services under IDEA, Part C, by race/ethnicity and state.](#)
- [Did anyone from your child's health plan, doctor's office, or clinic help you get special medical equipment or devices for your child?](#)
- [In the last six months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?](#)
- [Percent of children, ages 3-17, with a mental/behavioral condition who receive treatment or counseling.](#)