

Executive Summary

Overview:

Riverside County California Children's Services Medical Therapy Program developed and implemented a unique treatment service model to best serve children with chronic physically handicapping conditions.

Challenge:

The goal of the California Children's Services (CCS) Medical Therapy Program (MTP) is to provide physically handicapped children with the opportunity to achieve their maximum level of physical function. Our program faced two significant challenges to this goal:

- The provision of physical and occupational therapy services was more paternalistic than family-centered. The therapist primarily determined the treatment program and families often did not attend their child's treatment sessions. As a result, many families felt ill-equipped to cope with their child's disability when their program eligibility ended at age 21.
- The 1600+ children enrolled in the program had inequitable access to services. An emphasis on weekly treatment services for younger children resulted in 20% of the children enrolled in the program receiving approximately 80% of the treatment services. The remaining children, mostly older children and those with more severe impairments, received inconsistent access to services.

Innovative Solution:

A Family-Centered Episodic Treatment model was implemented in 2009, following one year of research and preparation, to provide physical and occupational therapy services in a more effective and equitable manner. This evidence based approach is built on the understanding that each family is unique and that the family has expert knowledge about their child. Episodic treatment includes short bursts of weekly sessions in addition to periodic monitoring with the family and therapist working in partnership. The model allows for the provision of the right therapy at the right time throughout the 21 years that the child is enrolled in the program. Therapy intervention frequency is based on the consideration of the family's readiness to participate in treatment sessions and to carry out a specially designed home program of activities that support the treatment plan. Parents/families are equal partners with the therapist who empowers them to meet the current and future challenges of their children with special needs.

Originality:

Riverside was the first county in the State of California to implement this treatment model. In 2012 our staff partnered with Los Angeles County and the CCS State Therapy Consultant to create a CCS Program Letter "Implementation of the Episodic Treatment Method (ETM) as an Alternative Therapy Provision Method (ATPM) in the Medical Therapy Program (MTP)". A demonstration poster describing our success was presented at the American Academy for Cerebral Palsy and Developmental Medicine in October of 2014.

Cost Effectiveness:

We were able to realize significant cost savings in our program by modifying our staffing configuration. While we continue to have Physical and Occupational Therapists evaluating the children and overseeing their treatment programs, the majority of the treatments the children receive are now provided by Physical and Occupational Therapist Assistants. Salary and benefits savings, approximately \$500,000 county costs the first year, have allowed us to efficiently and effectively serve all of the children enrolled in our program.

Results:

This innovative treatment model has allowed us to fairly and equitably distribute our resources to every child enrolled in our program. Therapy services are provided in a manner that does not create dependence on the therapist, but instead enhances a family's ability to manage their child's disability. The functional improvement scores for the children served in our program are higher than those documented prior to the implementation of the model and customer satisfaction has averaged 98% satisfied or very happy for each of the seven years since the model change. In the past six months training in the use of this treatment model has been presented at the California Children's Services Best Practices Workshop in Los Angeles and in two one day workshops in San Jose and Sacramento. It is anticipated that this treatment model will be more fully implemented in counties across the State within the next year.

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