

# Health Home Herald



## New HCA Interpreter Services

As of July 1, the HCA Interpreter Services contractor is Universal Language Service. They will be responsible for:

- ❖ Screening interpreter requests for eligibility (provider, client, service)
- ❖ Receiving, scheduling, and responding to requests for interpreter services
- ❖ Contracting and paying Certified, Recognized, or Authorized spoken and sign language interpreters

The HCA Interpreter Services program is available to healthcare providers serving limited English proficient and Deaf and Hard of Hearing Apple Health clients.

Health Home Care Coordinators (CC) should ask their

accounting department to establish an account with Universal Language Service so they can schedule interpreters. Your agency will need to register with Universal Language Service online at:

<https://hcauniversal.com/new-requester-registration/>

Once registered, CCs can access training on the online scheduling platform. For technical assistance with the online platform, please contact:

[HelpDesk@ULSonline.net](mailto:HelpDesk@ULSonline.net)

For more information about the Interpreter Services program visit:

<https://www.hca.wa.gov/billers-providers/programs-and-services/interpreter-services>

## Health Home Services for Tribal Members

Each tribe is a sovereign nation and CCs must approach tribal boundaries the same as any other national boundary.

Always respect tribal policies when entering tribal lands even if your client is not a tribal member. Consider notifying tribal law enforcement prior to entering their land.

Each Lead Organization should have working agreements with the tribes, so work with your Lead to determine the process for contacting tribal members. Each tribe has different processes and contact people with whom you will need to become familiar.

*Above: Northwest Regional Council (L to R): Colleen, Megan, Megin, Brenda, Katie V, Karen F, Sarah, Katie Z, Hannah, Kelly, Lynn, Peter, Silva, Ryan, Ericka, Dave, Allison, Dan, and Joanie.*

## Suicide Prevention

Care Coordinators may encounter clients who are at risk for depression and suicide. Here are some helpful resources.

You can contact these statewide agencies offering training in suicide prevention:

- ❖ The Washington chapter of the American Foundation of Suicide Prevention:

<https://afsp.org/chapter/afsp-washington/>

- ❖ Forefront:

<http://www.intheforefront.org/>

- ❖ Crisis Clinic of Thurston and Mason Counties offers suicide awareness presentations:

<http://www.crisis-clinic.org/>

- ❖ The Crisis Clinic of King County:

<https://crisisclinic.org/>

To find more training resources contact these providers directly:

- ❖ Question, Persuade, Refer:

<https://qprinstitute.com/>

- ❖ safeTALK by LivingWorks:

<https://www.livingworks.net/programs/safetalk/>

- ❖ ASIST:

<https://www.livingworks.net/programs/asist/>

Local suicide prevention coalitions throughout Washington State also offer suicide prevention trainings. This website lists current coalitions in our state:

<https://www.doh.wa.gov/YouandYourFamily/InjuryandViolencePrevention/SuicidePrevention/Coalitions>

Schools and Educational Service Districts offer suicide prevention training:

- ❖ The Office of the Superintendent of Public Instruction:

<http://www.k12.wa.us/safetycenter/YouthSuicide/SuicidePrevention.aspx>

- ❖ Washington Association of Educational Service Districts:

<https://www.waesd.org/>

Health professionals can access their required suicide prevention trainings:

<https://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/HealthcareProfessionsandFacilities/SuicidePrevention/TrainingPrograms/2017ModelList>

Coordinated Care of Washington offers suicide prevention classes for foster parents through their Community Education Team. Anyone can reach out to the team by emailing:

[communityeducation@coordinatedcarehealth.com](mailto:communityeducation@coordinatedcarehealth.com)

## Safety Comes First!

This issue features tips on safety when completing home visits. Asking questions before you arrive shows respect and concern for the client while soliciting information that may keep you safe. We provide “Safety Tip” boxes throughout this newsletter to touch three different aspects of safety when visiting Health Home clients.

### SAFETY TIPS: BEFORE A HOME VISIT

While scheduling the visit, ask the client about their home environment:

- ❖ Are there pets? Will they be confined or in a fenced yard?
- ❖ Do other people live with the client? Will they attend the visit? What is their relationship?
- ❖ Ask about the neighborhood, get directions, and ask if there are any special instructions for access to the home or parking.
- ❖ Check out the location to identify any potential safety issues.
- ❖ Schedule appointments when travel may be easier (e.g., avoid rush hour or inclement road conditions when temperatures drop).

## Spotlight on Resources



### Parks Offer Natural Resources to Increase Well-Being

Did you know that many state and national parks offer free or discounted passes to your client?

#### Foster Home Camping Pass – No Charge

Offered to resident foster parents and registered relative foster caregivers who camp with the children in their care. They are entitled to free campsites and day-use entry in WA State Parks.

#### Disability Pass – No Charge

Offered to residents who are legally blind, profoundly deaf, developmentally disabled, or who meet the disability definition used by the Social Security Administration. You can find the application on the WA State Parks website.

#### Disabled Veteran Lifetime Pass – No Charge

Offered to state residents with a documented service-connected disability of at least 30%.

Please visit the WA State Parks website to learn more about these passes and other park-related resources at:

<http://parks.state.wa.us/205/Passes>

#### Access Pass – No Charge

The Access Pass is a free, lifetime pass to National Parks, available to US citizens or permanent residents with disabilities, based on whether one's disability is permanent and severely limits one or more major life activities. Apply in person at specific park sites or mail an application with the processing fee. Learn more about the Access Pass and other national park-related resources:

<https://www.nps.gov/index.htm>

### Participant Portrait

“I have not words to express our gratitude for the life-changing service you have provided to my mom and to our family as a whole. The program that brought you into our lives is ESSENTIAL for the population that you serve – persons like my mom, who are not accustomed to needing or accepting help – however dire their circumstances may be.

Thank you for being genuinely concerned about your client's welfare, we always felt like we were PEOPLE to you – not just a job assignment. This allowed us to share with you the struggles we faced in improving mom's quality of life. We also came to understand that the service you provided to mom actually lessened the burden she was obliged to place on other state-funded resources for physical and mental health. You were able to assess her needs, and refer her to whatever entity most fully addressed them, before the situation escalated and began consuming resources at an emergency level.

You came to us at a crucial time! Our family was being ripped apart, with both my husband and myself trying to be near a medically-fragile mom – one in WA and one in NV. Because of your guidance and advice, our family will be together and we will be able to take care of both our moms – lessening the burden on both systems!

I am most grateful, however, for the perspective you offered my mom on her situation. I know she is not alone in needing care, yet feeling immense guilt at asking for care. This resulted in undiagnosed fractures, and undocumented stroke episodes, which ultimately cost ‘the

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system more than it would have, if caught initially.

My mom is slow to trust. You completely won her over with your unfailing attitude of help and advocacy. She is safe, and we are whole! – because of the program that brought you to us, and the way you operated within that program to both respect and serve your clients. We simply could not be more grateful.”

-- An enrollee with Northwest Regional Council

## Traumatic Brain Injury Awareness

Traumatic brain injury (TBI) is a serious issue in Washington State. The idea of brain injury is a relatively new concept that is still not completely understood. As this article is written, there are still huge swaths of people that do not know brain injury exists. Brain injury is often invisible to the public, leaving the survivor to “defend” their disability and suffer a certain stigma. Brain injuries can result in:

- ❖ Bruised brain tissue
- ❖ Bleeding inside the brain
- ❖ Large or small lacerations in the brain
- ❖ Nerve damage due to shearing forces

### SAFETY TIPS: BEFORE LEAVING THE OFFICE

- ❖ Ensure your cell phone is fully charged.
- ❖ Make certain that your vehicle has plenty of gas to ensure you are not stranded in isolated areas.
- ❖ Avoid carrying a purse and valuables.
- ❖ Wear clothes and shoes that will enable you to move freely.
- ❖ Leave an itinerary, including the client’s name, location and contact information, with a co-worker or supervisor.
- ❖ Consider partnering with a co-worker to report your departure from the visit once you are safely in your vehicle.

The brain can also experience a number of secondary types of damage, for instance:

- ❖ Swelling
- ❖ Fever
- ❖ Seizures
- ❖ Imbalance of neurological chemicals

Certain age categories are more widely affected by brain injury, for instance, youth under two years of age and persons over 75 years old represent over 50% of the 6,263 reported brain injuries in Washington State in 2015. An unknown number of individuals sustained injuries that were treated in other settings or went untreated. Unintentional falls are the leading cause of injury among those who were hospitalized with a TBI alone or in combination with other injuries or conditions.

Men were more likely to sustain a traumatic brain injury than women, in fact in 2015, men

represented over 60% of all reported brain injuries in Washington State.

Brain injury is often co-occurring with:

- ❖ Behavioral health problems
- ❖ Post-traumatic stress disorder
- ❖ Depression
- ❖ Substance abuse
- ❖ Insomnia
- ❖ Chronic pain
- ❖ Seizures

These issues further complicate diagnosis and recovery, serving as a gateway for second and third brain injuries. Learn more:

<https://www.dshs.wa.gov/altsa/traumatic-brain-injury/traumaticinjury-advisory-council>

-- Scott Bloom, TBI Council Coordinator

# Care Coordinator Corner

## TIPS FOR WORKING WITH PEDIATRIC MEMBERS

As a previous Care Coordinator working with the pediatric population, I learned several important lessons for Health Home staff:

1. We must balance the needs of the parent with the needs of the pediatric member,
2. We must keep the child's rights in mind, and
3. We must offer a conversation regarding guardianship for incapacitated pediatric members.

You may find that the priorities of the parent and of the pediatric member vary depending on the child's age. A parent of a teenage member may want their child to graduate from high school, but the pediatric member's focus is on attending the upcoming Taylor Swift concert.

I found it easiest to incorporate both goals into the Health Action Plan. In helping the parent of the pediatric member, you impact the quality of care and life of the child. Listening to the pediatric member's wishes builds trust and empowers them to ensure they know their voice should and is being heard.

The parent may be unwilling to buy the ticket to the Taylor Swift concert, but it is a good conversation starter for the teenage member on what action steps they need to take to achieve their goal. The member may need to start on job applications or open a checking account. Both will help the member learn important life lessons while making them feel like they are a crucial part of the Health Home process.

It is also important to keep the child's rights in mind. Children have the same rights to medical care and privacy as adults do. Do not overlook their needs just

because of their age. Depending on the child's age, they may play a vital role in making decisions regarding their care.

Older children and teens typically are looking to have their voices heard. Keep the Adolescent Information Sharing Consent Form readily available in all of your pediatric member files as a reminder that children between 13 and 17 have the right to give consent regarding mental health, substance use disorder, and reproductive health.

Discussing the previous mentioned topics, without the member's consent, can break any trust built with the pediatric member and is a violation of their rights.

Once a child turns 18, they are decision makers for their healthcare needs. The parent of an 18-year-old member no longer has the right to the member's personal health information and they cannot make healthcare decisions on behalf of the member.

As a Care Coordinator or allied staff, you should start the conversation with parents regarding the guardianship process for children who are incapacitated. The process to obtain guardianship is quite lengthy, so having this

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## SAFETY TIPS: WHEN ARRIVING AT THE HOME

- ❖ Park your vehicle so another car cannot block it in a driveway, facing the direction you will leave. Consider parking the vehicle so it is out of sight of the home.
- ❖ Consider calling the client from your vehicle to let them know you have arrived.
- ❖ Be aware of safety concerns such as broken porch steps, unrestrained pets or yelling and other aggressive actions.
- ❖ Choose a location to sit that allows you easy access to an exit.
- ❖ Trust your intuition, remain calm, and do not hesitate to end the visit if you feel unsafe. **SAFETY FIRST!**

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conversation early is key. Care Coordinators can start this conversation with reasons why this paperwork is necessary, what guardianship requires, how it works, and where to begin.

This conversation and process will ensure those with functional and intellectual limitations are taken care of well into their adult life.

Whether you love kids or have had no experience working with them, there is a chance that you may be assisting a pediatric Health Home member. As Health Home staff we want to ensure the member's needs are being met, improve their overall well-being and empower the member and family to promote optimal health outcomes and member self-management.

Through a person centered approach and timely

interventions we can affect our pediatric members' lives to guarantee a better and happier tomorrow.

-- Sara Ashley, Molina Manager and Trainer

Submit your story, resource, or ideas to the Care Coordinator Corner via our newsletter inbox: [healthhomenewsletter@dshs.wa.gov](mailto:healthhomenewsletter@dshs.wa.gov)

# Word Scramble

Unscramble these words...

- 1. ZASHDAR
- 2. RELAT
- 3. LACM
- 4. EFIR
- 5. AMRFIERS
- 6. LAVLUEASB
- 7. HCOALOL

- 8. OFNTR OODR
- 9. LELC HEONP
- 10. IFYINTED
- 11. YEKS
- 12. PTES
- 13. OLIPEC
- 14. KPRA
- 15. AEUGRODSN

...now take the letters from the red boxes and complete the three words below to reveal the theme!

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15

Visit us online: <https://www.dshs.wa.gov/altsa/stakeholders/washington-health-home-program-quarterly-newsletters>

