

Family Voices of NJ @ Statewide Parent Advocacy Network NEW JERSEY FAMILY-TO-FAMILY HEALTH INFORMATION CENTER (F2F) 2016 DATA REPORT

The F2F in NJ, Family Voices of NJ @ SPAN provides information and support that families of CSHCN need to effectively partner in decision-making at all levels to achieve the MCHB six core outcomes for their children. They work towards better health care systems in NJ and tackle critical issues such as health promotion and prevention, managed care and other insurance including the Affordable Care Act, SSI, early intervention, screening, medical home, transition, and health disparities. In addition to family-to-family support, families can access recorded workshops, informative videos, a website and health advocacy across the lifespan interactive toolkit, and a wealth of other materials in English, Spanish, Chinese, Haitian, Hindi, Korean, Portuguese, and Russian.

Impact on Family The parent of a 6 year old with sickle cell called because her child had to be switched to a new children's hospital when her former HMO dropped the original hospital that was treating her child, but now the new HMO also dropped the new hospital after years of care. The F2F staffer connected the parent to the HMO care manager, Medicaid hotline, and county Medical Assistance Consumer Center.

2016 HIGHLIGHT Public Health Crisis Advocacy

- The F2F used workshops, TA calls, website, & social media to inform families of school districts affected by lead in water and abatement resources.
- They shared information about network inadequacy after state Medicaid HMOs stopped permitting families to use out of state hospitals, such as Children's Hospital of Philadelphia, with our state Division of Medical Assistance and Health Services to ensure that families' case workers found alternative providers of the care that had been provided at these out of state hospitals.
- The F2F worked with a statewide coalition to get funding restored in the budget for our Primary Care Child Psychiatrist Consultation initiative, connecting primary care doctors with child and adolescent psychiatrists for consultation regarding children with mental health challenges in their care to address the crisis of insufficient numbers of child and adolescent psychiatrists to meet the need.
- They are partnering with the NJ Department of Health now on the state's response to Zika, including sharing information with pregnant and parenting women of childbearing age.

Legislative Advocacy Both state and national congressional offices refer constituents for assistance with a variety of issues such as health insurance enrollment, early interventions, appeals for denials of services by health insurers, etc. The F2F also shares information from families with legislators to let them know of the challenges that their constituents are facing in the healthcare and other systems, such as the lack of private duty nursing available in the state which led to an amendment to the Division of Developmental Disabilities support program to access private duty nursing as a carve out service.

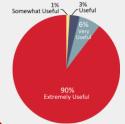
OUTREACH

Total Families Served: 118,583 Total Professionals Served: 52,688 Newsletter Subscribers: 15,300 Individuals Trained: 27,811 Materials Disseminated: 10710

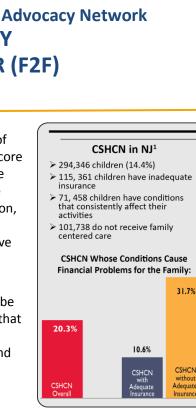
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IMPACT on Family/Provider Communications



Families rate the usefulness of the support/information/resources they received from the NJ F2F in helping them partner with professionals to make decisions about their child's health care.²



¹National Survey of Children with Special Health Care Needs. NS-CSHCN 2009/10. Data query from the Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health website. Retrieved 04/03/2014 from www.childhealthdata.org. ²FY2016 F2F data represents families and professionals served through one-to-one contact, training, and broader outreach from June 1, 2015 through May 31, 2016. This report was developed by Family Voices National Center for Family/Professional Partnerships (www.fv-ncfpp.org) under grant number U40MC00149, funded by the Health Resources and Services Administration of the U.S. Department of Health and Human Services.

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