CYSHCN Community Engagement: Priority Partners

Over time, CYSHCN programs should build relationships with as many community partners as possible so that you have a broad knowledge base to inform your referrals. You'll need to report on the number and type of providers you meet with each quarter and will be asked to describe the information and resources that were shared (both what you leave and what you take).

Here is a list of priority partners to get you started.

Medical Services Partners

Of course, you'll want to start with partners within your county. Per the work plan, consider working with providers based in neighboring counties who also serve your county.

Once per Quarter

Each quarter, you are expected to visit primary care practices to share information about the CYSHCN program and learn more about each practice. The goal for these visits is to improve young people's access to medical services and increase the number of children and youth with special health care needs who have a medical home. Be sure to find out which medical providers are accepting new patients and what types of insurance they work with.

- Medical primary care practices (family medicine, pediatrics, school-based health centers, pediatric specialists, etc.)

Once per Year

Meet with these medical service partners at least once per year.

- Hospital staff serving newborns, children, and youth
- Health Home care management programs serving children
- County health department programs serving children and youth (Maternal and Child Health, immunizations, lead poisoning, etc.)
- Mental Health Services Single Point of Access (SPOA)
- Medicaid and Social Security Income
- Dental service providers

- Non-emergency transportation
- Others identified through a community needs assessment

Other Priority Partners

The work plan does not specify how frequently these partners should be visited, but it does require you to document your visits and resources shared. Use Community Planning Health Assessment tools and your completed Family and Community Engagement Plan to prioritize your visits.

Quality of Life and Well-Being

- Department of Social Services (DSS)
- Office for People with Developmental Disabilities (OPWDD)
- Department of Children, Youth, and Families (DCYF)
- Intensive case management programs
- Women Infants and Children (WIC)
- Emergency food and clothing relief organizations
- Supportive housing programs
- Respite services
- Childcare services (daycares, summer camps)
- Workforce development

Child Development

- Head Start
- Early Intervention
- Preschool education programs and connected Committee on Preschool Special Education team (CPSE)
- School district officials such as administrators, Chair of Special Education (CSE) nurses, guidance counselors, psychologists, social workers, teachers, Board of Cooperative Educational Services (BOCES) wellness committees
- Regional evaluation centers

Emotional and Social Support

- County departments serving children and youth (recreation departments)
- Community based organizations who provide recreation, leisure, mindfulness, sports, and other community activities

Emergency Preparedness

- City/County programs
- Local fire departments

- Local law enforcement departments (including elopement prevention support)

Community Advisory Groups

Your work plan encourages you to participate in advisory councils and work groups that support all of the priorities listed above (medical services and medical home, quality of life and well-being, child development, emotional and social support, and emergency preparedness). Participating in groups like these can be a great way to build authentic relationships with priority partners in your area.

For More Information

Visit the CYSHCN Program Resource Center on the ACT for Youth website.