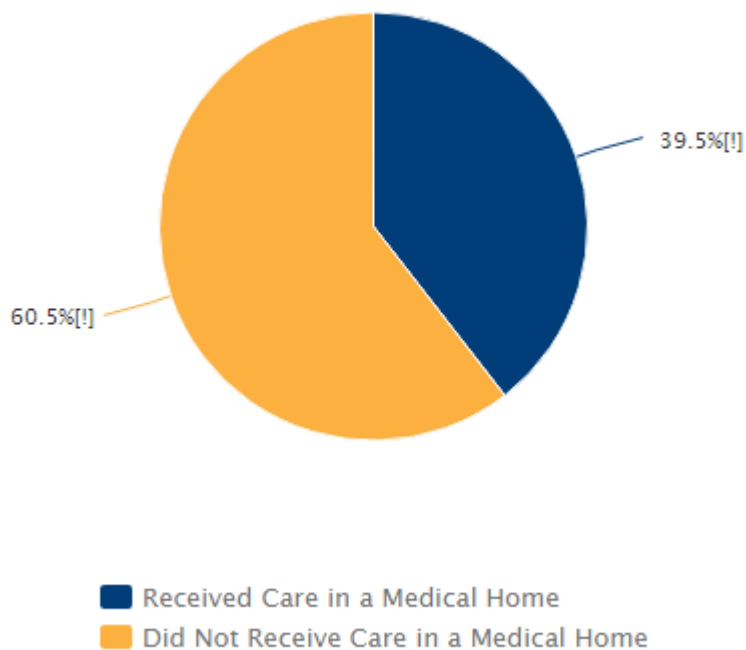


Children with Special Needs: Quality of Care

Children Ages 0-17 with Special Health Care Needs (CSHCN)
Receiving Care Within a Medical Home: 2016-2020
California



Definition: Estimated percentage of children ages 0-17 with special health care needs (CSHCN) who receive and do not receive coordinated, ongoing, comprehensive health care within a medical home (e.g., in 2016-2020, 39.5% of California CSHCN received care within a medical home).
Data Source: U.S. Dept. of Health and Human Services, *National Survey of Children's Health* (Feb. 2022).

CSHCN Receiving Care Within a Medical Home, by Complexity of Health Care Needs: 2016-2020

California	Percent
Complexity of Health Care Needs	Received Care in a Medical Home
Less Complex Needs	52.6% ^[!]
More Complex Needs	35.1% ^[!]

Definition: Estimated percentage of children ages 0-17 with special health care needs (CSHCN) who receive and do not receive coordinated, ongoing, comprehensive health care within a medical home, by complexity of health care needs (e.g., in 2016-2020, 35.1% of California CSHCN with more complex needs received care within a medical home).
Data Source: U.S. Dept. of Health and Human Services, *National Survey of Children's Health* (Feb. 2022).

What It Is

Children with special health care needs (CSHCN) have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and require health and related services of a type or amount beyond that required by children generally. On kidsdata.org, indicators related to quality of care for CSHCN include:

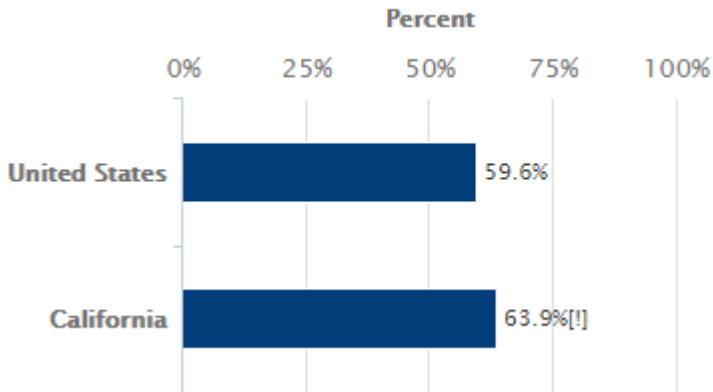
- [CSHCN who receive care within a medical home](#)
- [CSHCN who receive needed care coordination](#)
- [CSHCN who receive family-centered care](#)
- [CSHCN whose families feel like partners in their child's care](#)
- [CSHCN who receive care meeting federal quality standards](#)

Why This Topic Is Important

Nearly 1.4 million California children and youth, and more than 14 million nationwide, have or are at increased risk for a chronic health condition and require care and related services of a type or amount beyond that required by children generally. Their ongoing health problems—physical, behavioral, or developmental—can affect their ability to function and participate in important educational and social activities, and, in some cases, can shorten their lives. Although advances in medical care have extended and improved the lives of millions of children, obtaining timely, appropriate, and affordable care remains a problem for many families. More than 4 in 5 children with special health care needs (CSHCN) statewide and nationally do not receive care that meets federal standards for a well-functioning system. Improving access to quality care is critical to the health and well being of CSHCN; as these children depend more on the health care system than children without special needs, the quality of services has a greater impact on their lives and their families' experiences.

When compared with children who do not have special health care needs, CSHCN are more likely to experience social-emotional problems, academic challenges, and other types of adversity which can complicate their medical care. As a result, CSHCN often rely on a range of services from multiple sectors, and their parents and family members often face higher caregiving burdens and experience more stress

CSHCN Receiving Needed Care Coordination: 2016-2019



Definition: Estimated percentage of children ages 0-17 with special health care needs (CSHCN) who receive and do not receive effective care coordination, among those who need it (e.g., in 2016-2019, 63.9% of California CSHCN received needed care coordination).

Data Source: U.S. Dept. of Health and Human Services, [National Survey of Children's Health](#) (Oct. 2020).

CSHCN Receiving Family-Centered Care: 2016-2019

Locations	Percent
United States	83.0%
California	80.0%[!]

Definition: Estimated percentage of children ages 0-17 with special health care needs (CSHCN) who received and did not receive family-centered care, among those with a health care visit in the previous year (e.g., in 2016-2019, 80% of California CSHCN received family-centered care).

Data Source: U.S. Dept. of Health and Human Services, [National Survey of Children's Health](#) (Oct. 2020).

and difficulties with employment and finances when compared with other families. These challenges are exacerbated by racial/ethnic and socioeconomic inequities in access to care and other supports, which can lead to poorer outcomes for vulnerable CSHCN and their families.

How Children Are Faring

An estimated 61% of children ages 0-17 with special health care needs (CSHCN) in California, and 57% nationwide, do not receive health care meeting American Academy of Pediatrics standards for a medical home—accessible, continuous, coordinated, compassionate, comprehensive, culturally effective, family-centered primary care—according to 2016-2020 data. Among CSHCN with more complex health care needs (i.e., conditions not managed primarily through prescription medication), the share is even larger—65% in California. U.S. estimates also show higher percentages of CSHCN with public or no health insurance coverage, CSHCN with lower family incomes, and older CSHCN failing to receive care that meets medical home standards.

In 2016-2019, among California CSHCN who saw a health care provider in the previous year, one in five (20%) did not receive family-centered care (in which the provider listens carefully to the family, shows sensitivity to the family's values and customs, provides the family needed information concerning the child, and helps the family feel like a partner in the child's care), and among CSHCN who saw two or more health care providers in the previous year, more than one in three (36%) did not receive effective care coordination between their providers and services.

View references for this text and additional research on this topic:

<https://www.kidsdata.org/topic/17/quality-of-care-for-children-with-special-health-care-needs/summary>



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