

# CARE COORDINATION

## Impact on the CHILD



MOVING FORWARD

**ABOUT CARE COORDINATION:** Every family has strengths. Every family has a vision for itself, too. With care coordination, our first step is to help the family see more clearly where they are strong and how those strengths can be used to achieve their vision.

A big part of this includes helping the family see the support they already have -- family, neighbors, friends, clergy, health care providers.

With that information, the family can better see what is needed for health and wellness, and with our deep knowledge of community-based resources, we can connect the family for assistance in reaching their vision.

### **DEMOGRAPHICS:**

<b>Total:</b>	<b>121. 84 were new this FY; 37 continued care the previous FY</b>	<b>Race:</b>	<b>41 Black 37 Hispanic 37 White 1 Multiracial 1 Asian 1 Other</b>
<b>Gender:</b>	<b>39F, 82M</b>		
<b>Ages:</b>	<b>0-2 = 0 3-6 = 25 7-11 = 52 12-15 = 37 16-18 = 7 19+ = 0</b>		

**WHAT HAPPENED:** The impact is best explained by examining those cases for which assessments were made at both intake and discharge ("paired data"). For various reasons, paired data is not available for all served at Clifford Beers.

- **Key Finding, reduced problem severity:** 33% of workers who reported youth in the clinical range at intake, identified youth in the normal range at discharge for problem severity (n=8); workers reported 59% of youth showed *5 or more points of improvement in problem severity* from intake to discharge (n=21)
- **Key Finding, improved functioning:** workers reported 49% of youth showed *5 or more points of improvement in problem severity* from intake to discharge (n=18)
- **Key Finding, reduced school suspension:** 65% of youth with a history of school suspension 12 months prior to intake were not suspended during their episode of care (n=11)