

Rural, Frontier, and Urban Collaboration: Identifying and Building upon Best PHN Practices that Support Children and Families

Penny Paynter, R.N., M.S.N.

Frontier

1) *Challenges*

- a. Gap in Knowledge between Service Workers
 - i. Coordination
- b. Limited Resources
- c. Distance between families & resources
- d. Weather
- e. Transportation for families
- f. Case Overload

2) *Best Practices*

- a. Child Clinics
- b. Early Intervention
- c. County Health Department
- d. Patch Services/People
- e. Standardized Tools
- f. Doing best with what have
- g. Cross-Education (between different services & families)
- h. Ronald McDonald House

Urban

3) *Challenges*

- a. Locating Clients
- b. Traffic
- c. Undocumented Clients
- d. Clients w/o health coverage
- e. Instability of Resources (i.e. clinics)
- f. Differing of resources/issues
- g. Instability of funding
- h. # of clients
- i. Quality of services (length)

4) *Best Practices*

- a. Parent Managers/Training
- b. CaCoon Nurses
- c. Case Management
- d. Clear Communication
- e. High Expectations – train/counsel family

Rural, Frontier, and Urban Collaboration: Identifying and Building upon Best PHN Practices that Support Children and Families

Penny Paynter, R.N., M.S.N.

Rural

5) *Challenges*

- a. Access to Care

6) *Best Practices*

- a. Practice drills for emergencies (emergency prep. funds)
- b. Start where THEY (family) are

Successes

- Convincing family to use respite-care and grandma to go to college
- Watching child reach milestones after recovering from surgeries
- Communicating w/all Providers
- Family's ability to persevere
- ENCC (Exceptional Needs Child Coordinator)