

# **Building Cross-Sector Community Partnerships to Support Children in Rural Communities: A Look into the ACCESS Model**

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Oregon Center for Children and  
Youth with Special Health Needs

# Learning Objectives

1

Describe key components that support successful development of cross-sector programming.

2

Learn about the ACCESS model and its impact on early childhood autism evaluations in rural communities.

3

Discuss strategies for implementing cross-sector partnerships in your own communities.

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Let's get  
to know  
the room!



# OCCYSHN

Oregon Center for Children and  
Youth with Special Health Needs

OCCYSHN  
Oregon Center for Children and  
Youth with Special Health Needs

- Oregon's state public health agency for children and youth with special health care needs (or CYSHCN)
- Our mission: improve the health, development and well-being of Oregon's CYSHCN



Photo credit: Bigstock

# Who Are CYSHCN?



- Children who have or are at risk of various chronic health conditions (physical, developmental, behavioral, and/or emotional)
- **1 in 5 Oregon children are CYSHCN**
- CYSHCN need more health and related services than other children
- **Families are required to navigate multiple systems to get the care they need for their children**



# What is Cross-Sector Collaboration?

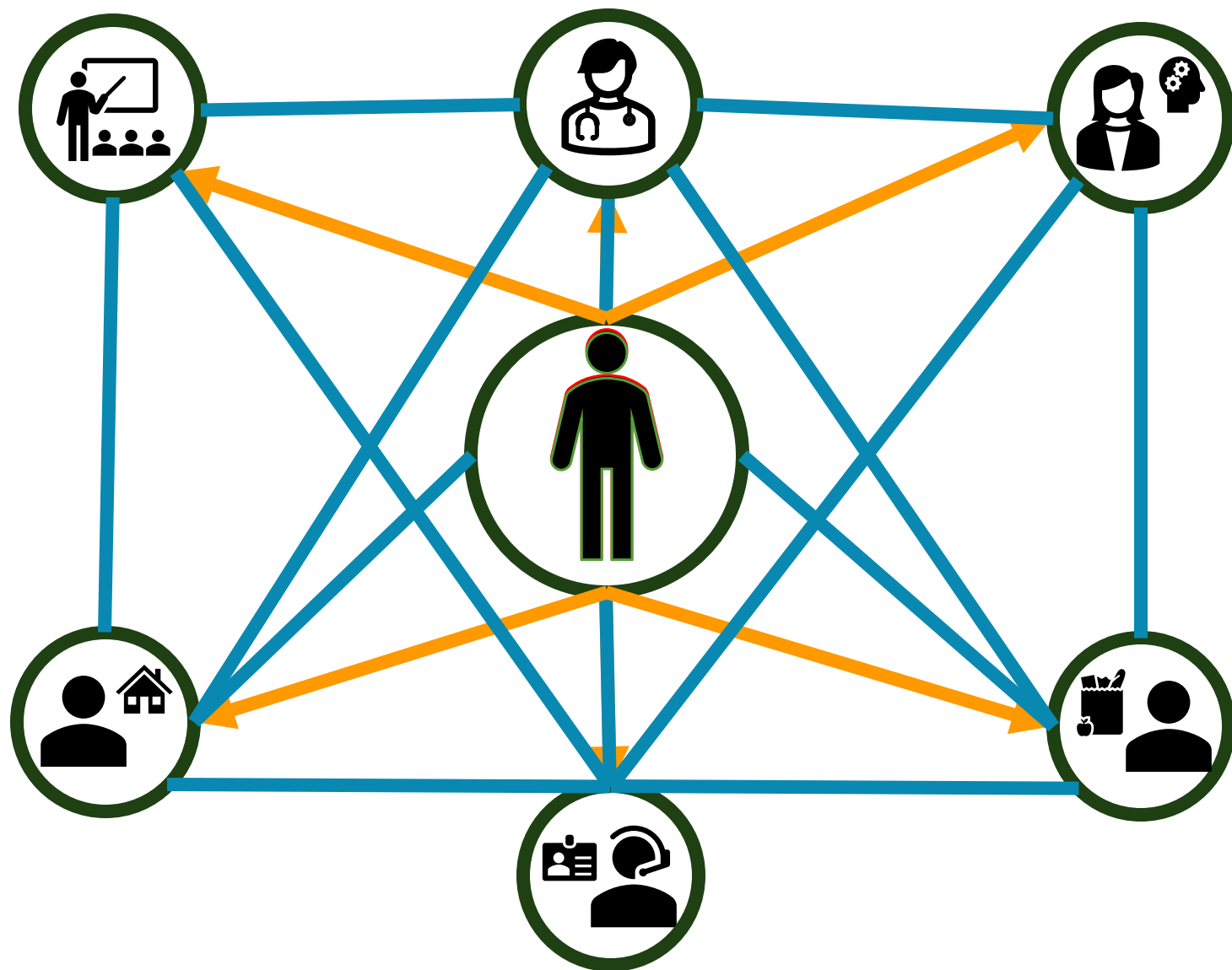
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- Individuals and organizations from different sectors working together to address a shared issue/goal
- Cross-sector collaboration can happen at the individual level or systems level



# Why Cross-Sector Collaboration?

- Health is shaped by many factors, including social and environmental
- Addresses child's entire well-being, not just medical needs
- CYSCHN live and interact with many systems, creating need for cross-sector coordination





# Benefits

- Sharing info across systems leads to more **comprehensive care**
  - Everyone learns **new services and resources**
  - Reduces burdens on families (supports **patient/family-centered care**)
  - Increases **efficiency** of work and **reduces costs**
  - Promotes **health equity** – helps ensure children regardless of their background or location have access to high-quality, coordinated care
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# ACCESS Project Overview

Assuring Comprehensive Care  
through Enhanced Service  
Systems for Children with Autism



# Early Autism Evaluation & Health Equity

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Autism frequently occurs  
with other developmental  
and learning issues

Oregon families experience  
many challenges accessing  
early autism evaluations

Early diagnosis enhances  
long-term developmental  
outcomes

**Delayed diagnosis slows  
access to interventions,  
resulting in more needed  
services**

# Early Autism Evaluation & Health Equity



Diagnosis requires multiple observations of a child in different environments and many local providers are not trained in diagnostic autism evaluation



Travel to a metro area evaluation site is unfeasible, **especially for those from rural areas**



A significant portion of rural families referred to tertiary care centers are lost to follow-up

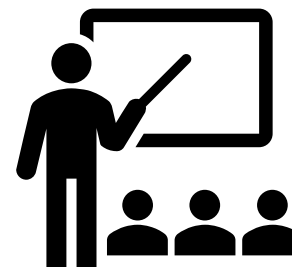
# Multiple Evaluations In Two Different Systems Cause Confusion for Families



Medical Diagnosis



Medical Treatment and  
Behavior Therapy



Special Education  
Eligibility



School-Based Services

# What is the ACCESS Model?

**Mission:** To support the cross-sector collaboration between medical and educational experts to deliver early autism identification for Oregon families in their home communities.

**Process:** Establish local teams to help streamline both a medical diagnosis and educational eligibility for autism services for children ages 0-5 in rural communities.



# Local ACCESS Teams

**Medical Provider**  
(Pediatrician,  
Psychologist, NP, PA)

Formal medical  
diagnosis



**Educational Staff**  
(Autism Specialist, SLP,  
School Psychologist, etc.)

Educational eligibility  
evaluation



**Parent Partner**

System and resource  
navigation

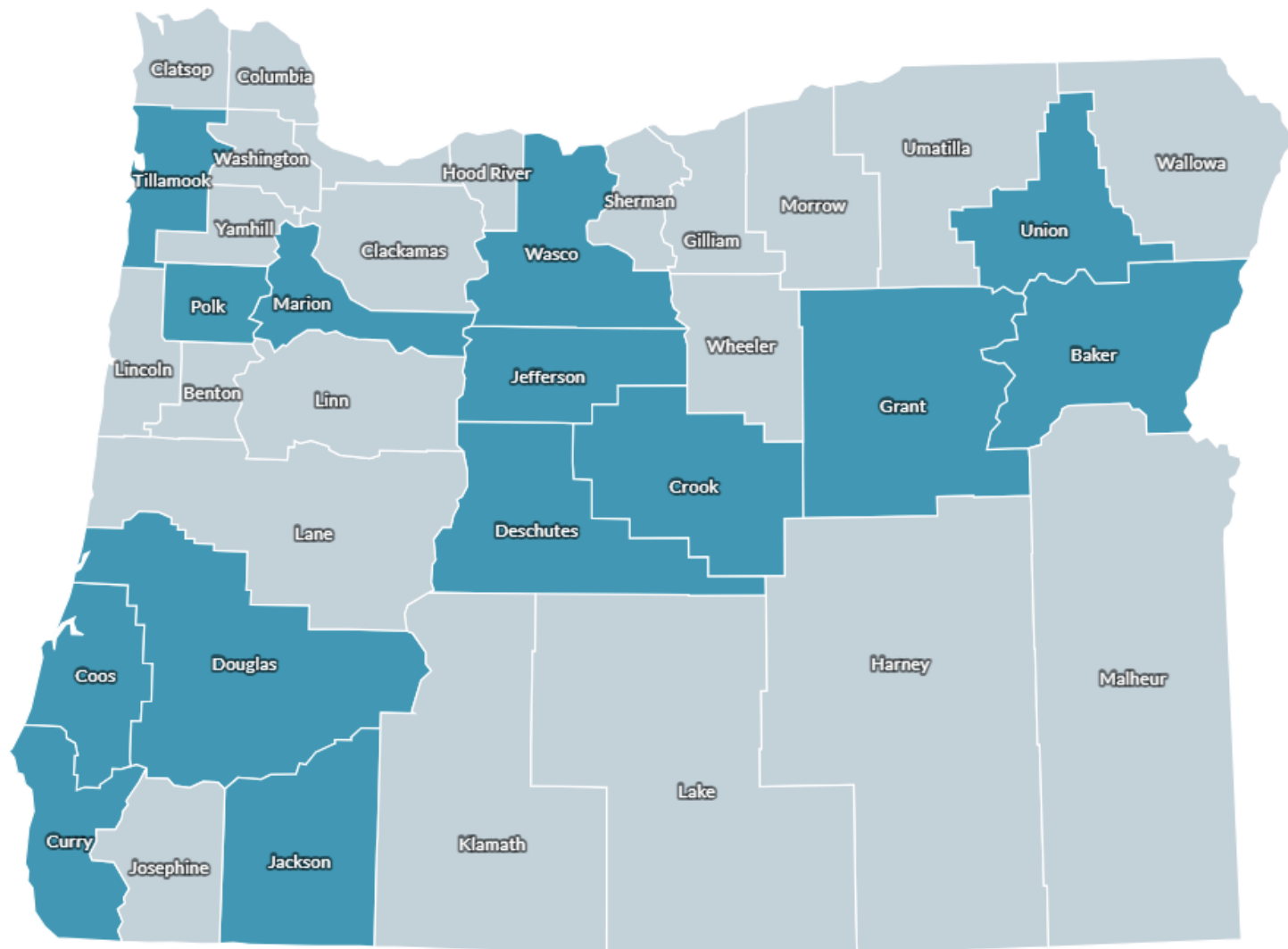
Attends team meetings  
with families

Follow-up with family



**OCCYSHN**  
**Technical**  
**Assistance**

- Monthly statewide ECHO
- Quarterly Role-Specific Community of Practice Meetings
- Clinical consultation from experts at OHSU



# Local ACCESS Teams

OCCYSHN

Oregon Center for Children and  
Youth with Special Health Needs

# Benefits of ACCESS

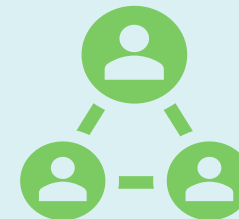
## For Families:



Timely evaluations  
close to home



Less cost and stress



Coordination between  
school and community  
providers

## For Professionals:



Increases confidence  
in evaluating autism



Improves access to  
resources for families



Builds statewide network  
of autism professionals

# ACCESS 2024-2025 Survey Results

**216 kids**

evaluated by ACCESS teams  
statewide in 2024-2025

**9 weeks**

on average from referral to  
evaluation

**100% of respondents**

found ACCESS resources to  
be useful to share with  
families

**88% of respondents**

felt more confident in  
providing autism evaluations  
for preschool aged children



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# Elements of Cross-Sector Collaboration

# Listen to Individuals and Families

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- Value of lived experience
- Collaborations don't matter if you're not listening to the people you're serving – they should be defining the need and helping shape the solution

## ACCESS

- ACCESS founder Dr. Bob Nickel held listening sessions for families at the CDRC at OHSU
- Partnership with Oregon Family to Family Information Center





## Learn More About the Issue or Population

- Community Health Assessments / Community Health Improvement Plans (CCOs)
- Community Health Needs Assessments (hospitals)
- Local Systems of Care (child welfare, juvenile justice, developmental disability, behavioral health)
- Family groups, Community Advisory Committees
- Other local health collaboratives

### ACCESS

- Teamed up with the Oregon Commission on Autism Spectrum Disorder (OCASD)



# Explore Existing Collaborations

- Are there others working to address a similar issue?
- Who are the partners?
- How are they working together?
- What can you learn from them?

## ACCESS

- Met with Autism Diagnosis Education Project (ADEP) in Ohio
- Discussed ADEP program, strategies for partner engagement, challenges/lessons learned, and sustainability strategies
- Ongoing conversations with University of Washington's School and Medical Autism Review Team (SMART)



# Find the Champions

- Who do you need to collaborate with?
- Seek out voices from multiple sources

## ACCESS

- Looked to local communities to find providers with autism interest and expertise
  - Oregon Family-to-Family Information Center
  - Medical clinics
  - Education service districts (ESDs)

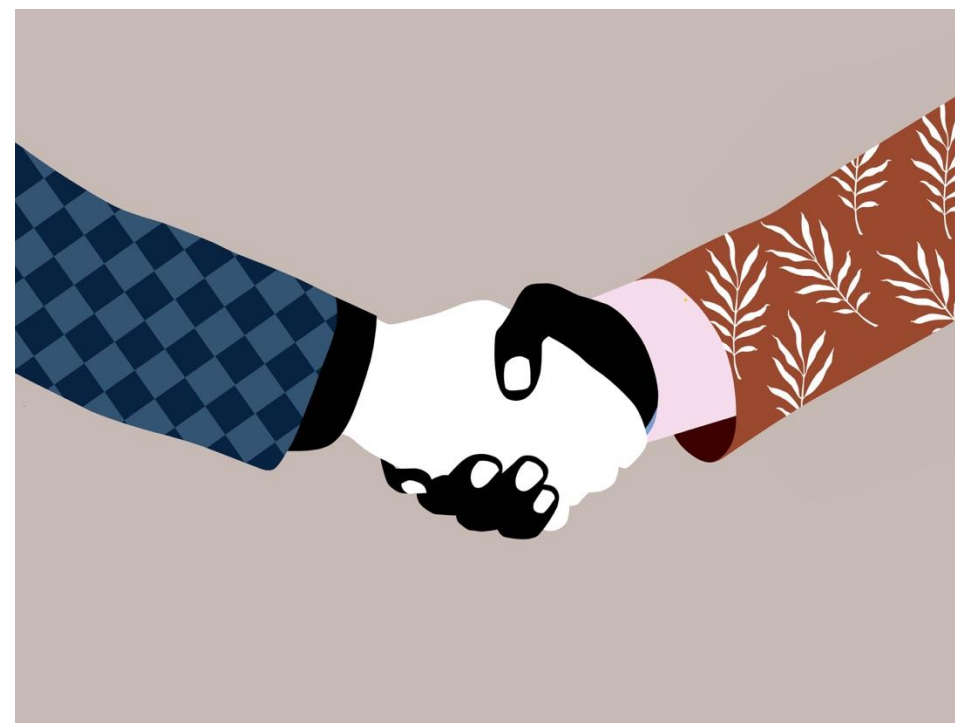


# Set the Stage for Partnership

- Information / data sharing
- FTE commitment
- Varying timelines
- Roles (e.g. leadership)
- Other resources (funding, expertise, etc.)
- Is an MOU needed/helpful?

## ACCESS

- Funding/administrative logistics housed in OCCYSHN
- Met with local teams to determine workflow and other logistics



# Barriers to Cross-Sector Collaboration



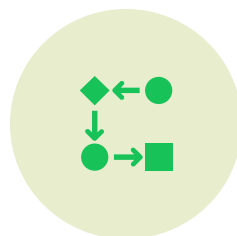
**STAFF TURNOVER**



**LIMITS DUE TO  
EXISTING  
POLICIES (OR  
LACK THEREOF)**



**COMPLEX  
SCHEDULING**



**CONFLICTING  
WORKFLOWS**



**ADMINISTRATIVE  
BURDEN**



**LONG-TERM  
SUSTAINABILITY  
AND FUNDING**

# Facilitating Cross-Sector Collaboration

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- Continuing education/professional development opportunities
- Regular meetings
- Community engagement
- Evaluation: are we meeting our intended goals?

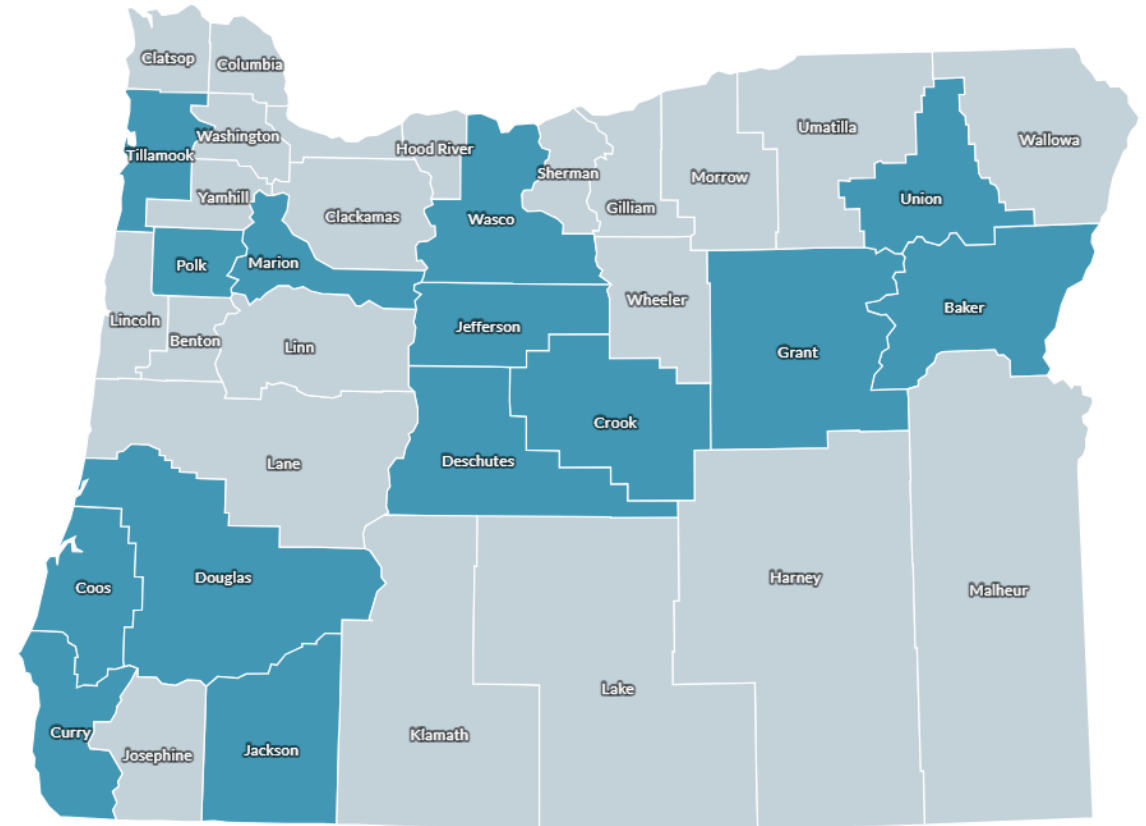
## ACCESS

- Started annual ECHO series in 2019 – case presentation, didactic, and family resources
- Development of quarterly role-specific Community of Practices





# Importance of Community- Responsive Programming



# Sustainability: Expanding the Collaboration

## Autism Assessment Capacity Project (AACP)

- Diagnostic autism assessment training for local primary care providers
- Alternative Payment Methodology (APM)

## ACCESS

- Clinical consultation/mentoring for medical providers
- Systems-level support of ed/med/parent partner collaboration

## Autism Alert

- Virtual family navigation services through diagnostic process, connection to services

## Opt-In Early

- Virtual parent training for home-based interventions

# Other Examples of Cross-Sector Collaboration

**HERO Kids** – Emergency Medical Services for Children (EMSC), hospitals, Oregon Portable Orders for Life-Sustaining Treatment (POLST)

**Shared Care Planning (SCP)** – local public health authorities, school nurses, primary care organizations, family organizations

**Health Care Transition (HCT)** – Randall Children's Hospital's Every Step Clinic, Oregon Department of Human Services, Legacy Health (adult clinic)

**Emergency Planning Resources** – Oregon Family-to-Family Information Center, Developmental Disability Services, The Arc Oregon

**YSCHN Waiver** – Oregon Health Authority (OHA), Medicaid

# Brainstorming Time

1. What examples of cross-sector collaboration do you currently see in your programs or community?
    - What successes or challenges are you seeing with these?
  2. What challenges do you see that might be better addressed through cross-sector collaboration?
    - What might that look like?
    - What would you need in place to support this effort?
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# Q&A



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# Thanks for coming!

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Oregon Center for Children & Youth with Special Health Needs (OCCYSHN) website:  
<https://www.ohsu.edu/occyshn>

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ACCESS website: <https://www.ohsu.edu/occyshn/local-autism-assessment-teams>

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Oregon Family to Family Information Center: <https://www.ohsu.edu/oregon-family-to-family-health-information-center>