MLPP News

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Focus Spread the Word: Medical-Legal Collaborative Projects are Spreading!

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This month's FOCUS examines the recent national growth of medicallegal collaborative projects such as the Center For Children's Advocacy's Medical Legal Partnership Project. What was once a unique phenomenon has become a routine sight in pediatric clinics around the country. This article takes a look at the genesis of multidisciplinary medical-legal projects and how pediatric and family medicine providers can adopt the model to improve health outcomes for their patients.

An eleven year old boy with a diagnosis of sickle cell anemia is denied Supplemental Security Income benefits for the third time. His pediatric providers are at a loss as to how to advocate for the family, and suggest to the child's parents that the child might not be eligible for benefits after all.

A three-year-old girl with chronic asthma returns to a primary care clinic with recurring symptoms that have been exacerbated by the caustic environment of her living arrangements – but to date the landlord has ignored the letters authored by the clinician on her behalf.

These are two examples of how the legal system intervenes in pediatric health care provision, and how, despite their best intentions, pediatric practitioners are often at a loss as to how to remedy the socio-legal ills that plague their patients' health.

Up until the recent past, pediatric and family medicine providers struggled with these scenarios and provided families with referrals to legal services attorneys in the community. Ten years ago, pediatricians at Boston Medical Center decided to address this very situation by hiring an attorney to work in tandem with pediatric providers in the clinical setting. Four years ago, the Center for Children's Advocacy combined its legal expertise with the



pediatric excellence of the Connecticut Children's Medical Center to do the very same – establish a legal advocacy presence in the clinical setting in Connecticut's only free-standing pediatric medical center. Since that time, the Connecticut project, the Medical-Legal Partnership Project (MLPP), has expanded its reach to serve the pediatric populations at two Hartford area, federally qualified health centers (Charter Oak Health Center and Community Health Services). MLPP also serves as a consultant to providers to community based and urban clinical pediatric and family medicine providers in the Hartford area.

National Growth and Recent Developments

Since the inception of the Boston Family Advocacy Program and the MLPP, thirty other medical-legal collaborative projects have sprung up around the country. Pediatric centers of excellence in New York, Providence. Cleveland, Washington D.C., Atlanta, Chicago and San Francisco have all developed relationships with public interest attorneys to provide multidisciplinary interventions to children at risk. In Worcester. Massachusetts, legal services providers collaborate with local community pediatricians to form a medical-legal collaborative project that addresses the medical and legal consequences of poverty and child health in Central Massachusetts.

Recently, medical-legal project directors, academic scholars, legal services attorneys and private sector companies met to discuss the future of medical-legal collaboratives and the impact of such projects on healthcare and access. On August 10, 2004, the Pfizer Corporation sponsored a nationwide conference to discuss the impact of medical-legal collaborative projects, and how the private sector can work with public interest lawyers and healthcare institutions to promote healthcare access and improved outcomes for at-risk patients. On November 5, 2004, the Boston Medical Center's Family Advocacy Program

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will host its third annual medical-legal collaborative conference that brings together medical providers, lawyers, social workers, public health advocates and academics in a day-long session that provides training, discussion, and networking for all who work in the medical-legal collaborative field.

The Future of Medical-Legal Collaboratives

While the future is bright for medicallegal collaboratives around the country. there are still significant challenges that face existing projects. First, long-term national funding sources need to be tapped to ensure that medical-legal collaborative projects continue to replicate and thrive around the country. Second, the measurement of success for collaborative projects continues to be a challenging and thought-provoking issue facing project directors and attorneys. The good news is that several local and national foundations have taken an interest in assisting collaborative projects in formulating evaluative criteria for long-range studies that will help confirm the intuitive notion that medical-legal advocacy improves health outcomes for children at risk.

Learn more about the MLPP and the upcoming Boston conference

For information about the MLPP, go to the Center for Children's Advocacy's website, www.kidscounsel.org and click on the Medical Legal Partnership Project link.

For information about the upcoming Boston conference, call the Family Advocacy Project Office at (617)414-7430.

We Want to Hear from You! Submit questions for the next edition of the MLPP newsletter to jsicklic@law.uconn.edu or, call Jay Sicklick at 860-570-5327. For information about the Medical-Legal Partnership Project, please check the MLPP website at www.ccmckids.org/mlpp or, check the CCA website at www.kidscounsel.org

Back to School:Five Tips for Educational Compliance

It's that time of year again – kids are back in school and those students who are entitled to special education services should be provided with all of the appropriate services and supports mandated by each student's individualized education plan (IEP). Here are five brief tips for pediatric practitioners to ensure that their school-aged patients are receiving the services to which they're entitled:

1. Make sure that the school is complying with the existing IEP. Special education students are entitled to all of the services provided for in the IEP that the team designed last spring. If the school district is not providing services to the letter of the IEP, advocate for the student with the district, or contact the MLPP or other legal advocate to advance this child's claim.

2. It is never "too early" to request a PPT.

If you, or the child's parent or guardian, believe that the child's educational needs are not being met by the present IEP, advise the parent to request a planning and placement team (PPT) meeting immediately. There is nothing that precludes a parent from requesting as many PPTs as necessary to ensure that his/her child's educational issues are addressed.

3. A school district may NOT change a child's IEP without the consensus of a PPT meeting.

Unilateral changes in a student's IEP are not allowed without the PPT's consent. If the school district changes your patient's program without the PPT's input, advise the parent to request a PPT *immediately and*

contact a legal advocate and/or the State Department of Education at once!

4. Evaluations, including psychological, psychiatric and therapies (PT, OT and Speech), are the responsibility of the school district – not the child's medical provider.

If the child is experiencing difficulty in school and a specific evaluation is required to determine why the student's educational performance is being affected, then the school district is required to provide the appropriate evaluation, at their expense, as part of the special education process.

5. Below-average performance is NOT ACCEPTABLE just because all of the other students in the school are performing below average.

The special education laws are designed to provide individualized services and supports to children who qualify under the law's criteria. Don't let teachers and administrators get away with generic explanations about student performance and expectations. Special education students are entitled to achieve readily defined goals as enumerated in their IEPs, and failure to achieve those goals mandates review and reevaluation of the student's educational program.

To learn more about special education advocacy, please contact the MLPP at CCMC (860-545-8581) or the MLPP Project Director at the Center for Children's Advocacy (860-570-5327). Two informative special education based resource websites are www.wrightslaw.com and www.ideapractices.org.

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