Project ECHO: Sunflower Health Plan Case Presentation

Presentation Information

Series: Closing the Gap - Care Coordination with Community Providers

Session: Infant/Toddler and School-based Programs

Name: Deborah Rear Date: 7/10/2025



Patient Information

Gender: ⊠ Male □ Female					
Age: 13					
Race:					
	American Indian/Alaskan Native Asian		Native Hawaiian/Pacific Islander		Multi-racial Other
	Black/African American	\boxtimes	White/Caucasian		Prefer not to say
Ethnicity:					
	Hispanic/ Latino	\boxtimes	Not Hispanic/Latino		Prefer not to say

Strengths and Preferences (goals, motivators, preferences, Important to the individual)

Member benefits from having a routine and familiar people around. Those who know member would describe him as goofy, happy, giggly, extremely smart, and loving.

Member is non-verbal, but is able to communicate with others through use of his iPad and talking device. He does have preferred items, and these items help him to remain calm and secure (water, fidgets, stuffed animals, blankets, toy food, and his iPad for communication).

Member likes to make decisions about his day and to be provided with options to aid in this whenever possible, with the support from others.

In the future, member would like to obtain his high school diploma, attend day and residential services, and participate in community activities with peers. Member would like to learn how to use the bathroom independently, dress himself independently, bathe himself independently, in addition to other independent tasks in the home.

Relevant Social and Trauma History (Current living situation, employment status, pertinent legal history, level of education, relationship status, children, support system, etc.)

Member is a minor currently placed in a PRTF setting. When not in the PRTF, member lives part time with his Mother and part time with his Father, who are his legal guardians. Support system includes Mother, Father, Maternal and Paternal Grandmother.

Legal history: Member has a history of multiple law enforcement officer contacts due to aggressive behaviors. For example, pushing mother down, pulling hair of mother and therapist, and becoming aggressive towards law enforcement officer. Member does not have any current probation or charges.

Education: Member attends school at the PRTF currently. When not in PRTF, member attends school and is in a specialized classroom with an IEP. At school, member has an individual para and 1:1 support throughout the day.

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Relevant Medical History (Diagnosis, conditions, etc.) Medication Summary (Name, dose, frequency, route) **Primary Diagnosis:** Current medications: • Attention Deficit Hyperactivity Disorder, Clonidine 0.1MG TID combined type F90.2 Eucerin cream QAM Secondary Diagnoses: Risperdal ODT 0.5MG 2 tabs BID Autism Spectrum Disorder F84.0 Disruptive Mood Dysregulation Disorder F34.81 Member wears briefs and is on a toileting schedule every 30 mins at school to avoid incontinence. Member refuses to have BM's in the toilet and will only use briefs for this. Member has a history of smearing behaviors when left unattended in the bathroom. Lab Summary (Test, result, date, etc.) Toxicology Summary (Test, result, date, etc.) Not applicable for this member. Not applicable for this member.

Substance Use History (Substance, age of first use, age where use became problematic, longest period of sobriety, how sobriety was achieved, method of use)

Not applicable for this member.

Psychiatric History (Age of first mental health contact, past diagnosis, self-harming behavior, suicide attempts, etc.)

Behaviors:

- Physical aggression: pulling hair out, hitting, kicking, pushing, broken Mother's nose and Grandma's arm, given black eyes.
- Defiance
- Hostile and threatening behaviors
- Property Destruction: has destroyed multiple TV's, stove, couches, beds, punches through walls
- · Self-injurious: head banging or hitting self
- Poor impulse control
- Will refuse to eat some foods and will overeat others
- Struggles to complete ADL's independently

Hospitalizations:

- Currently in a PRTF placement
- multiple in-patient acute hospitalizations due to aggression and unsafe behaviors

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Treatment Summary (Form of treatment, engagement in treatment, date entered, voluntary, etc.)

Current Services through the PRTF:

- Individual Therapy- weekly
- Family Therapy- weekly
- CM- daily
- Group- offered multiple times a week
- Medication Management
- School (groups are offered in the school setting as well)
- · Passes with family

Service plan post-DC:

- Institutional Transition back onto the IDD Waiver (PCS self-direct, FMS, IDD TCM). Potentially looking into Children's Residential options as well
- Individual Therapy
- Family Therapy
- CPST and any available non-waiver Attendant Care
- Medication Management
- Applied Behavior Analysis (ABA) services
- Potentially Parsons Outreach or Kansas Family Support Center
- Gatekeeping has been discussed in the past, but not currently pursuing

Barriers to Treatment

Members refusal to engage in services, aggressive and threatening behaviors towards staff, need for 1:1 level of care, and barriers with communication due to member being non-verbal.