



Background

Engaging families effectively is essential for the development and implementation of shared plans of care to optimize child and family health and meet clinical care needs. Yet, models, tools and research on best practices and outcomes are not well established.

The **Child and Adolescent Health Measurement Initiative (CAHMI)** at Johns Hopkins University, with funding from the Lucile Packard Foundation for Children’s Health, in 2016, started developing a model and tools for engaging families of children who are in need of care planning and care-coordination.

The **CARE_PATH for Kids (CPK)** model and tools were developed in consultation with families, clinicians and leading researchers, using evidence-based practices. The model and tools were pilot tested with families and clinic teams at two practice sites and are being tested at additional clinical sites.

The tools can be used by families and care teams in paper and fillable PDF forms that can be easily downloaded from the **CPK website** at www.carepathforkids.org.

In the future, we hope to evolve the CPK into web-based tools that link family information into the child’s electronic health record.

CARE_PATH for Kids (CPK) Model and Tools

Family engagement is the first step and foundation for the development and implementation of shared plans of care to meet a child and family’s clinical care needs and other supports. Centering plans around the child and families’ strengths, priorities, goals, and their social and environmental context is essential.

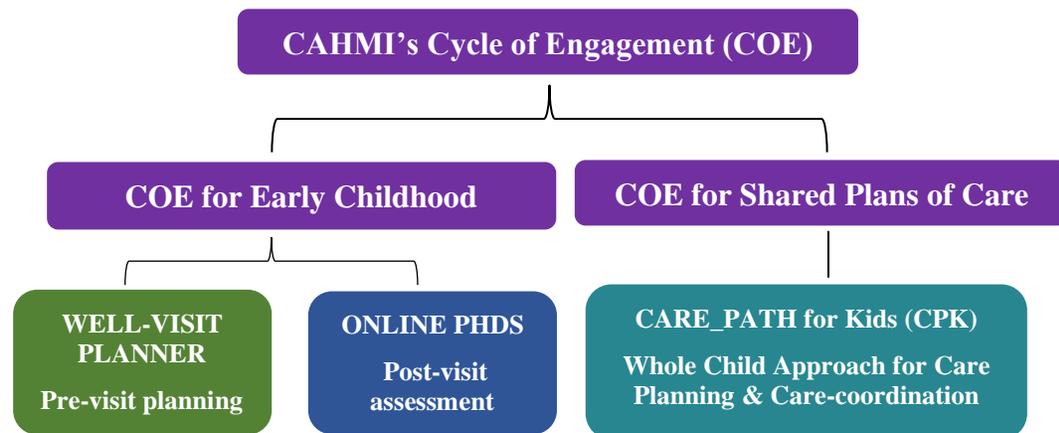
The **CARE_PATH for Kids (CPK)** is a model and suite of tools designed to engage families and care teams in a comprehensive assessment of a family’s strengths, needs, visions, priorities and goals, to inform the development of a shared plan of care. The CPK uses a **three-step whole child approach** for families to engage, plan, and improve care planning and outcomes in partnership with their child’s care team(s).

The CPK promotes improved partnerships between families and their care teams to work together to build a shared plan of care. The three CPK steps are 1) the Family Foundations of Care (FFC) Planner, 2) the Family Foundations of Care (FFC) Plan, and 3) the CPK Shared Planning Meeting.

CPK website: Families and care teams can learn about the CPK and access the **CPK tools and implementation resources** on the CPK website at www.carepathforkids.org.

The CPK is a part of CAHMI’s **Cycle of Engagement (COE)**, which is a model for engaging parents in an ongoing, collaborative way to learn about, measure, and improve the quality and outcomes of care for children using a personalized and systems-integrated approach, based on the American Academy of Pediatrics’ guidelines and best practices. To learn more about the COE, go to coe.cahmi.org.

The COE Model



Benefits of using the CPK model and tools:

- Families reflect and share their life context, wishes, beliefs and priorities with their child’s care team(s).
- Creates a central location of information to make sharing easy across different providers.
- Care team(s) partner with families to address their needs and priorities, develop shared goals, and identify action steps to achieve the goals.
- Increased trust and collaboration between families and their child’s care team(s).

Expected outcomes with continued use of the CPK:

- Improved care planning, care-coordination and outcomes.
- Improved quality of care over time.
- Improved treatment use and results.
- Reduction in treatment costs.
- Increased care value and efficiency.

CARE_PATH for Kids Tools

Family Foundations of Care (FFC) Planner:

The FFC Planner is **step-1** in the 3-step CPK process. It is an **engagement tool for families** to reflect on and share their child and family’s strengths, current care and needs, priorities, goals, and their social and environmental context. Families can complete it on their own or with help from their child’s care team(s), and it takes about **15 - 30 minutes to complete**.

Family Foundations of Care (FFC) Plan:

The FFC Plan is **step-2** in the 3-step CPK process. It can be completed by families and a member of their child’s care team(s) through a **Shared Planning Meeting (Step-3** in the 3-step CPK process). The Plan represents families’ responses as graphics representing the child and family’s **map of care** and their **overall well-being** across multiple domains. It includes a **dashboard** summarizing key information, shared goals and action steps identified and discussed by families and their child’s care team(s), which can be uploaded into **electronic health records (EHR)** and shared across care teams. The **dashboard can be used during encounters** to help focus the interaction on the child and family’s assets and needs.

Providers review the Plan and finalize the larger shared plan of care with families. The care team(s) continue to partner with families to continuously improve care planning and outcomes.

