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For Foster Kids, A Health Care Home Base Provides Stability And Better Care

By MICHELLE FAUST (/PEOPLE/MICHELLE-FAUST) • APR 20, 2016

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"Alright, we're going to go check those eyes and ears now buddy. Ok?" Nurse Kristen Marrese leads 4year-old Daniel Atkinson down the hall for an eye exam. It's part of his routine check-up at a clinic in Rochester, New York, Starlight Pediatrics.

During the visit, which took nearly two hours, Daniel also got up to date on his vaccines and his nurse practitioner gave him a thorough check-up of his growth and development. He's been coming here since he was an infant.



Daniel's in good health, but his adoptive mother Jennifer Atkinson knew that wasn't a certainty when



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Jen Atkinson holds her son, Daniel, as his nurse practitioner, Amy Realbuto, checks his heart and lungs.

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he was placed in her foster care only a few days after birth. "Being born with cocaine in his system, it will always put him at a higher risk for ADD, ADHD, and behavioral type problems like that," she says.

Atkinson has fostered 20 other kids over the last six years. She's seen the issues they have to deal with, including fragile physical health and signs of abuse. Each time a new kid enters her home, she takes them straight to Starlight for a check-up.

Because of their backgrounds which often include neglect and abuse, many of the kids in foster care around the country have significant health needs. Kids in foster care suffer from post-traumatic stress disorder at rates higher than combat veterans

(http://www.nrcpfc.org/is/downloads/info_packets/ptsdandchildren_in_fc.pdf). A history of abuse can have lasting health effects (http://www.cdc.gov/violenceprevention/acestudy/)on a child.



These kids need consistent health care, but in many places, no one is on top of managing the details of that care. Foster parents don't always have the ability to make medical decisions for the kids, their medical records may be spread out among several doctors and their regular check-ups can fall through the cracks.

But here at Starlight, things are different. This clinic takes responsibility for making sure kids get seen and treated--and that treatment is sensitive to their complex needs.

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Nurses try to distract 4-year old Daniel Atkinson as he gets his vaccines.

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"What people need to understand is that these kids are being removed from situations where it's either really either acutely chaotic or chronically chaotic," explains Amy Realbuto, the lead nurse practitioner at Starlight, serving the more than 450 foster kids

in Monroe County, New York.

"A lot of their chronic illnesses have been mismanaged prior to coming into foster care," adds Realbuto. "It's very important for us to be on top of that when they come in."

The model of care used at Starlight was developed several years ago in collaboration with a local hospital and Monroe County's department of Health and their department of Child and Family Services.

The model of coordinated care used here has been recognized by pediatric experts, including Sarah Springer who serves on the Council on Foster Care, Adoption, & Kinship Care for the American Academy of Pediatrics.

"[In] places like Rochester kids do get their needs met because they have a really fantastic well-coordinated comprehensive care system that works together with their child welfare system," she said. "There are other communities where there's just none of that and kids have less access."

The providers at Starlight manage a juggling act. They do everything any other pediatric clinic would, but they keep biological parents, foster parents, and social workers in the loop about what's going on with the child. On top of that they're specially trained to look for signs of abuse.

For foster kids whose lives are often all over the place, Starlight is the one constant, a healthcare home base.

The comprehensive coordinated care that Starlight provides can include hunting down medical histories for kids who, unlike Daniel, may not have had a consistent pediatrician, and referring kids out for mental health care services as needed.

Providers in the practice keep kids' history of trauma in mind—it's what's called trauma-informed care and it's at the center of their practice.

"You have that much stress on the child for so long it's going to change the pathways in our brain. It's going to change how we act it's going to change how these children function," says Realbuto.



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Part of this is guiding the child caregivers on how to deal with kids' behaviors. "So, it's a lot of support and a lot of education that takes a lot of time," says Realbuto.

This type of time intensive care is expensive. And Medicaid, which covers foster kids, has notoriously low reimbursement rates, leaving the county to make up the difference.

It's a struggle for Starlight to sustain itself. "We're always working in a deficit," says Realbuto.

Because of tight budgets and inconsistent grant funding, Starlight lost in-house dental and mental health services. Foster parents in the county are concerned about the loss of some of these services because they see how the kids in their care benefit from Starlight's holistic approach.

Atkinson says the nurses there are incredibly attentive to her kids' needs, remembering tiny details about them, like whether they have an allergy to milk ,or in the case of Daniel, that he has particularly waxy ears.

"You know they love these kids as much as we do in a different way so we support each other very well," says Atkinson.

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