

W16 Improving Medication Adherence and Clinic Engagement for Children in Foster Care through a Telehealth Initiative

Authors.

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IRB Approval. Research for this study was approved through the MUSC and ODU IRBs.

Key Words. Foster Care, Telehealth, Clinic Engagement

Purpose. This study aims to determine whether a telehealth initiative was effective in improving medication adherence and clinic engagement in a medical home for children in foster care.

Background/Significance. Children in foster care are a vulnerable population with many unmet health care needs complicated by trauma histories. Providing comprehensive care to this special needs' population can be challenging. Youth in foster care have fragmented health care with frequent placement changes, making clinic engagement and medication adherence difficult.

Evidence-based Questions. RQ1. Is there a difference in medication adherence in children in foster care that received the telehealth initiative compared to those that did not? RQ2. Is there a difference in clinic engagement in children in foster care that received the telehealth initiative compared to those that did not?

Methods. A causal comparative design was utilized to evaluate a telehealth initiative, comparing medication adherence and clinic engagement between two groups, a group with no telehealth between February and July 2022 and a group with telehealth between February and July 2023. A convenience sample of patients in foster care, ages birth to twenty-one years of age establishing care in an academic, primary care clinic in the southeastern United States and seen in the requisite timeframe was included in the study. Data was collected through a retrospective chart review utilizing a researcher developed data collection instrument and survey. Descriptive statistics as well as group differences, within and between the groups, were analyzed.

Conclusion. The two groups, no telehealth and telehealth in 2022 and 2023 respectively, were overall similar in comparison except differences noted in placement type. There was no statistical difference between the medication adherence and clinic engagement with the implementation of the telehealth initiative, however greater than 50% of those offered telehealth, engaged in the telehealth initiative. Statistical differences were noted with placement types, with group homes having better engagement at the 2-week and 1-month appointments compared to foster homes.

Discussion. This study's findings contribute to the body of knowledge surrounding youth in foster care and known fragmented and transient care that can lead to poor health outcomes. This study demonstrates the ability for a population with likely high number of social determinants of health to engage in telehealth visits. This study also demonstrates the continued need for research in this area to improve medication adherence and clinic engagement to improve health outcomes for this vulnerable population.