Medical Legal Assistance for Families: How to Help Your Patients

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Grand Rounds, September 2010
University of Texas Health Science Center at San Antonio-Department of Pediatrics

Overview

- Update of Medical Legal Partnerships
- Health Impact of Housing
- CSHCN- Transition from Adolescence to Adulthood
- MLAF- Legal Assistance for Housing Problems
- Guardianship- A New MLAF Service
- Referrals

Sometimes, the best way to help a family protect or improve a child’s health is for physicians and attorneys to work together to resolve a child’s related health and legal problems.

We can do more together than we can alone.

MLPs in Texas

Active Programs:
- San Antonio – First Program in Texas – Began October 2008
- Brownsville 10/2008
- El Paso 08/2009
- Waco 04/2010
- Dallas 06/2010

In Development:
- Austin
- Houston
MLAF Partners

- **Texas RioGrande Legal Aid, Inc** – A non-profit organization providing high quality legal services and community education to low income Texans. Provides 3.5 attorneys, one paralegal and one administrative assistant.
- **UTHSCSA Department of Pediatrics** – Serving children and their families through patient care, teaching, service and research. Provides medical direction of two pediatricians and part-time coordinator. Provides office space.
- **City of San Antonio/Department of Community Initiatives (DCI)** – Promoting economic self-sufficiency, family strengthening and enhanced quality of life for San Antonio families. Provides one part-time case manager and supervisory support.
- In addition to these key partners, MLAF has received project support from Christus Santa Rosa Children’s Hospital, Catholic Charities, and a grant from San Antonio Area Foundation.

MLAF’s Priority Areas (Legal)

Primary areas addressed:
- Housing
- Education
- Benefits (Medicaid, food stamps, Social Security, utilities assistance)

Training for Professionals

Didactics for pediatric residents
- Annual curriculum module: Advocacy
- December 10, 2009 and January 7, 2010: Special Education
- April 1 and 15, 2010: Basics of Medicaid and SCHIP

Targeted small group sessions – March-August 2010
- UTHSCSA Division of Endocrinology
- UTHSCSA Division of Pulmonology
- UTHSCSA Children’s Cancer Center
- UTHSCSA Dental Center for Children
- CSRCH - Social Workers
- CSRCH - Physical Therapy Group

Third Annual Pediatric Grand Rounds – 09/24/2010

2009 Case Statistics

**Intakes per Month**

![Graph showing intakes per month from Jan-09 to Dec-09.]

2009 Cases by Type

![Bar chart showing cases by type for each quarter of 2009.]

2009 Percentage of Cases by Type

![Bar chart showing percentage of cases by type for 2009.]

**Case Statistics**

- 0% - 5% - 10% - 15% - 20% - 25% - 30% - 35%
- Housing - Education - Public Benefits - Utilities Asst - Other

**2009 Intake Statistics**

- March: 15
- May: 20
- July: 10
- November: 30

**2009 Intake Percentage**

- Housing: 20%
- Education: 15%
- Public Benefits: 30%
- Utilities Asst: 25%
- Other: 10%
Impact of Substandard Housing: Environmentally Attributable Fraction

- Lead poisoning: 100%
- Asthma: 30% (10-35%)
- Childhood Cancer: 5% (2-10%)
- Neurobehavioral Disorders: 10% (5-20%)


Substandard Housing: Total Annual Costs

- Lead poisoning: $43.4 Billion
- Asthma: $2.0 Billion
- Childhood Cancer: $0.3 Billion
- Neurobehavioral Disorders: $9.2 Billion

Total: $54.9 Billion


Childhood Asthma in the U.S. - 2007

- 9.1% Prevalence of asthma in children
- 6.7 million children affected
- 13.1% children diagnosed with asthma during their lifetime


Social Determinants of Asthma

- Race/Ethnicity
- Socioeconomic Status
- Physical Characteristics of Housing
- Family Stressors
- Segregation


HOUSING COST BURDENS on U.S. Families - 2008

- 40.3 Million (36%) households spent more than 30% of income on housing
- 18.6 Million (17%) households spent more than 50% of income on housing

Source: Joint Center for Housing Studies of Harvard University, 2009

HOUSING PROBLEMS IN SAN ANTONIO

- 101,355 (25%) households spent more than 30% of income on housing
- 41,758 (10%) of households spent more than 50% of income on housing
- 31,623 (8%) of households with overcrowding and/or inadequate plumbing or kitchen facilities
- 27% of housing over 50 years old
- 62% of housing built before 1980

Source: City of San Antonio Five Year Consolidated Plan, HUD Program Years 2010-2014
Transition Services Offered to Adolescents with Special Needs

<table>
<thead>
<tr>
<th>Assistance with:</th>
<th>For All/Most</th>
<th>For Some</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referral to specific adult providers</td>
<td>47%</td>
<td>33%</td>
</tr>
<tr>
<td>Creating a portable medical summary</td>
<td>27%</td>
<td>26%</td>
</tr>
<tr>
<td>Creating a health care transition plan</td>
<td>12%</td>
<td>26%</td>
</tr>
<tr>
<td>Identifying options after Age 18</td>
<td>19%</td>
<td>22%</td>
</tr>
</tbody>
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Source: 2008 AAP Periodic Survey of Fellows


A consensus statement on health care transitions for young adults with special health care needs. *Pediatrics* 2002; 110:1304-1306

Consensus Statement

......The goal of transition in health care for young adults with special health care needs is to maximize lifelong functioning and potential through the provision of high-quality, developmentally appropriate health care services that continue uninterrupted as the individual moves from adolescence into adulthood.

Important Steps for Successful Transitioning

- Prepare and maintain an up-to-date medical summary that is portable and accessible
- Create a written health care transition plan by age 14, reviewed and updated annually


How Can MLAF Help?

Rental Housing

- Substandard housing is a legal problem if the family rents
- LANDLORD’S DUTY TO REPAIR OR REMEDY. (a) A landlord shall make a diligent effort to repair or remedy a condition if...
  - (3) the condition:
  - (A) materially affects the physical health or safety of an ordinary tenant...
  - Texas Property Code, Section 92.052

How Does This Come Up?

- You notice clinical symptoms
  - Please ask about social determinants!!
  - Does the family rent?
  - Is substandard housing quality making your patient sick?
  - You refer to MLAF
- Family in crisis: Eviction
  - Common misunderstanding about the law
Then What?

- MLAF counsels and develops plan with family
  - Family options
    - Move out (avoid adverse consequences of early lease termination)
    - Stay and request improvements (in writing)
  - Next steps
    - Has landlord sued?
      - No? Written demand letter to landlord
      - Yes? Respond in court

Protector for Tenants with Disabilities

If someone in your patient’s household:
- has a physical or mental disability that substantially limits one or more major life activities
- has a record of such a disability or
- is regarded as having such a disability

The landlord must:
- let the tenant make reasonable modifications to the dwelling or common use areas, if necessary for the disabled person to use the housing. (Cost may be an issue)
- make reasonable accommodations in rules, policies, practices or services if necessary for the disabled person to use the housing.

Source: [http://www.hud.gov/offices/fheo/FHLaws/yourrights.cfm](http://www.hud.gov/offices/fheo/FHLaws/yourrights.cfm)

Guardianship: New MLAF Service

- POLICY; PURPOSE OF GUARDIANSHIP. A court may appoint a guardian with full authority over an incapacitated person or may grant a guardian limited authority over an incapacitated person as indicated by the incapacitated person’s actual mental or physical limitations and only as necessary to promote and protect the well-being of the person...
  - Texas Probate Code, Section 602

Why Would A Family Want a Guardian?

- Guardians can take care of your incapacitated patient:
  - Decide where your patient lives
  - Be sure your patient has clothes, food, health care, shelter
  - Consent to medical, psychiatric, surgical treatment but NOT inpatient psychiatric commitment
  - Manage your patient’s public benefits (Social Security, Medicaid, etc.)

“Incapacity”

"Incapacitated person" means...:

(B) an adult individual who, because of a physical or mental condition, is substantially unable to provide food, clothing, or shelter for himself or herself, to care for the individual’s own physical health, or to manage the individual’s own financial affairs; ...

Texas Probate Code Section 602
Who Should You Refer to MLAF for Guardianship?

• Patient who is approaching adulthood or already an adult (17 years, 9 months or older)

• Incapacitated and in need of a guardian
  – As a practical matter, Courts will require Determination of Mental Retardation before they approve guardianship

Then What Will Happen?

• MLAF and Catholic Charities
• Catholic Charities’ attorney specializes in guardianship (about 1/3 of Bexar County cases/year)
• MLAF will work with your patient/family
• MLAF will coordinate with you. Courts need good medical information to order guardianships!
• MLAF and Catholic Charities will appear in court with your patient’s family to request guardianship

How to Refer to MLAF: Our Offices

Goldsbury Lower Level/Behind Reception Desk

Goldsbury 3rd Floor by Exit of Walk-In Clinic

New MLAF Attorney, Laurie Burns, offices on Goldsbury Lower Level

Steps to Refer to MLAF

Identify a legal problem or case management need during the social history

Refer families with problems involving housing, education or public benefits, guardianship and/or need for utility or rental assistance.

Fill out a referral form with patient- family name and address and include a brief description of the problem.

If you do not have referral form, use a sheet of paper.

Provide a copy of the face sheet.
First Way to Refer

Walk your patient-family and paperwork to the MLAF Intake Office near the exit of the Walk-In Clinic. This may not work if you are not in the Goldsbury Center for Children and Families.

If an intake appointment is available, the MLAF staff may be able to meet with the family right away. Some families prefer to meet later; this is fine with us, too.

Second Way to Refer

Fax the paperwork to MLAF at 704-8743 and direct the family to the MLAF offices near the exit of the Walk-In Clinic.

Third Way to Refer

Give the family a fact sheet about MLAF with the phone number to call: 704-8730.

Feedback for Professionals

- With patient/client’s consent
- Feedback about your patient referred to MLAF
  - What happened??
  - Simple referrals: one memo
  - Lengthier representation: two memos
  - Please call us if you have questions about your patient. If we have consent, we’ll be happy to talk with you.
  - 704-8730 (MLAF main number)

Thank you! Questions?

Save the Date

MLAF Giving Thanks Gathering
Friday, November 19, 2010
4 p.m. to 6 p.m.
Reception Area in CSRCH Goldsbury Lower Level