

DEPARTMENT OF SOCIAL SERVICES

CHILDREN'S DIVISION

P. O. BOX 88

JEFFERSON CITY, MISSOURI

April 27, 2010

MEMORANDUM

<p><u>What's Inside:</u> Screening information for children in alternative care</p>
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TO: REGIONAL EXECUTIVE STAFF, CIRCUIT MANAGERS, AND CHILDREN'S DIVISION STAFF

FROM: PAULA NEESE, DIRECTOR

SUBJECT: INITIAL AND ONGOING SCREENINGS FOR CHILDREN IN ALTERNATIVE CARE

DISCUSSION:

The purpose of this memorandum is to clarify the policy and practice requirements for obtaining the initial and ongoing medical examinations while a child is in alternative care. The initial health examination should occur within 24 hours of a child coming into care. This examination does not need to be a full Healthy Children and Youth (HCY) assessment. The purpose of the initial health examination is to identify the need for immediate medical or mental health care and assess for infectious and communicable diseases. When possible, this examination should be completed by the child's current primary care physician as they know the child and have knowledge of the child's medical history.

In addition, there have been changes made to the policy regarding provider accessibility. If a provider is not readily accessible, the initial health examination must occur within **72 hours** of the initial placement. Policy previously allowed ten days for the examination to occur when a provider was not readily accessible. The purpose of this change is to ensure that any immediate medical or mental health concerns are addressed in a timely manner.

To meet Council on Accreditation Standards and statutory requirements, the following must be completed no later than 30 days after the child is placed in Children's Division (CD) custody:

- The full HCY assessment including eye, hearing, and dental examinations;
- Alcohol and drug screenings;
- Developmental screening; and
- Mental health screening

Priority efforts should be made to ensure that this assessment is completed by the physician who knows the child and his/her medical history. If this is not possible, the

child's medical records should be taken with the child for the HCY assessment. When possible and safe to do so, it may be advantageous for the parent(s) or previous caregiver(s) to be present during the assessment to give the physician historical medical information.

Ongoing Screenings

This memorandum also introduces [Section 210.110, RSMo](#), which requires **all children from birth to age 10** in CD custody to receive a physical, developmental, and mental health screening every six (6) months following the initial health examination, as long as the child remains in care. The HCY form, created by the MO HealthNet Division, includes screening questions for those areas. Prior to all Permanency Planning Review Team (PPRT) meetings, a full HCY assessment should be completed, thus staff should schedule appointments in a timely manner to ensure the appointment occurs prior to the PPRT meeting.

Procedure

It is the Children's Service Worker's responsibility to ensure that children in CD custody receive the appropriate screening, assessment, and follow-up services as necessary. During the screening, staff must either request the physician to complete a Healthy Children and Youth (HCY) examination, or give a copy of the appropriate [HCY form](#) to the physician to complete. Resource providers who accompany the child to the appointment should be given a copy of the appropriate HCY form by the worker to be completed by the physician. If there are no changes medically, or additional medical assistance is needed, staff should receive such documentation from the child's physician and take appropriate action, if necessary. After the HCY exam is completed, the Children's Service Worker should obtain the medical results and record(s) and share the information with the Family Support Team. If the resource provider accompanies the child to the health examination, the Children's Service Worker should obtain the results of the examination from the resource provider or request the resource provider share the medical results with the Family Support Team.

These screenings may occur as frequently as needed. All charges should be billed to MO HealthNet (Medicaid) or the appropriate managed care plan. The developmental and mental health screening portion of the HCY examination may also be completed by other professionals such as: Parents as Teachers, Nurses for Newborns, Early Head Start, Head Start, First Steps, child care centers, the child's therapist, or the school the child attends.

Documentation

Copies of the screenings and assessments should be maintained in the child section of the case record. Medical documentation including the screenings and assessments should be obtained prior to the PPRT meeting so that the information can be available for the meeting. Staff should also discuss any changes in the child's medical status at the PPRT meeting. All medical needs identified should be discussed with the Permanency Planning Review Team. The date of the initial physical examination and the date of the last physical examination should be entered on the Medical Information screen in FACES.

The Children’s Service Worker must ensure that **all** initial medical information is given to the resource provider within 72 hours of the child coming into care if possible, but no later than 30 days following placement. A list of the medical information to be obtained can be found in [Section 4 Chapter 24.2](#) of the Child Welfare Manual. The changes outlined in this memorandum will be effective as of today’s date.

NECESSARY ACTION:	
<ol style="list-style-type: none"> 1. Review this memorandum with all Children’s Division staff. 2. Review revised Child Welfare Manual chapters as indicated below. 3. All questions should be cleared through normal supervisory channels and directed to: 	
PDS CONTACT: Christy Collins (573) 751-9603 Christy.Collins@dss.mo.gov	PROGRAM MANAGER: Dena Driver (573) 751-3171 Dena.Driver@dss.mo.gov
CHILD WELFARE MANUAL REVISIONS: Section 1 Chapter 3.3 Responsibilities of the Placement Provider Section 4 Chapter 4.6 Preparing the Child for Placement Section 4 Chapter 5.1 Placement in a Resource Family Section 4 Chapter 6.1 Out-of-Home Placement Support Activities Section 4 Chapter 6 Attachment B Direct Service Worker Duties Section 4 Chapter 11.8 Healthy Children and Youth (HCY) Section 4 Chapter 24.1 Legal Basis for the Provision of Medical/Mental Health Services Section 4 Chapter 24.2 Medical Information to be Obtained When Child Enters Care Section 7 Chapter 6 Nutrition, Health, and Development	
FORMS AND INSTRUCTIONS HCY Forms	
REFERENCE DOCUMENTS AND RESOURCES N/A	
RELATED STATUTE 210.110 Child Protection and Reformation	
ADMINISTRATIVE RULE N/A	
COUNCIL ON ACCREDITATION (COA) STANDARDS COA Standard PA-FC 2 COA Standard PA-FC 10 COA Standard PA-KC 2 COA Standard PA-KC 10	
CHILD AND FAMILY SERVICES REVIEW (CFSR) CFSR, Item 22, Physical Health of the Child	
PROTECTIVE FACTORS Parental Resilience-N/A Social Connections-N/A	

Knowledge of Parenting and Child Development-N/A Concrete Support in Times of Need-N/A Social and Emotional Competence of Children-N/A
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FACES REQUIREMENTS

N/A
