POLICY TITLE: Healthy Horizons Assessment Center and Nurse Care Manager Program CHAPTER: Healthcare Manual		PAGE 1 OF 11
	CHILD AND FAMILY SERVICES AGENCY Approved by: _____ Signature of Agency Director Date:_____	PROFESSIONAL STANDARDS
EFFECTIVE DATE:	LATEST REVISION: December 5, 2012	REVIEW BY LEGAL COUNSEL: November 19, 2012

I. AUTHORITY	The director of the Child and Family Services Agency (CFSA or Agency) adopts this policy to be consistent with the Agency's mission and applicable federal and District of Columbia laws and regulations, including the Health Insurance Portability and Accountability Act (HIPAA) of 1996 (Pub. L. No. 104-191, 110 Stat. 1936 (1996)) and its implementing regulations (45 CFR Parts 160 and 164); Title VI of the Civil Rights Act of 1964; Section 504 of the Rehabilitation Act (Section 504) and its implementing regulations at 45 CFR Part 84; Title II of the Americans with Disabilities Act (ADA) and its implementing regulations at 28 CFR Part 35; Language Access Act, DC Law 15-167, effective June 19, 2004 (reprinted at DC Official Code § 2-1935 (b)(6), 2-1931(c) *et seq.*); provisions of Title 4, Chapter 13 (Child Abuse and Neglect), Title 7, Chapter 12 (DC Mental Health laws) and Title 16, Chapter 23 (Family Division Proceedings) of the DC Official Code; 22 DC Municipal Regulations (DCMR) Chapter 6; 29 DCMR Chapters 60, 62 and 63; and the Implementation and Exit Plan in *LaShawn A. v. Gray.* **This policy supersedes administrative issuances CFSA-10-14 Nurse Care Manager Teaming with Staff, and CFSA-10-13 Healthy Horizons Assessment Center.**
II. APPLICABILITY	All Agency employees, CFSA-contracted agency staff, and contracted personnel.
III. RATIONALE	According to the American Academy of Pediatrics (AAP), children and youth in foster care generally have special health care needs and a higher utilization of health care services. CFSA children enter the foster care system due to multiple factors that may include an adverse prenatal environment, parental depression and stress, drug exposure, malnutrition, neglect, abuse, and physical and emotional trauma, all of which negatively impact a child's subsequent development. Issues of multiple placements, lack of accurately documented health and mental health histories, and lack of coordination between health care providers can further compromise a child's health status. In light of this information, the Agency established CFSA's on-site limited-service medical clinic, the Healthy Horizons Assessment Center (HHAC), and the Nurse Care Manager Program (NCMP) to address the delivery of appropriate and timely health and mental health services for each child entering the District's child welfare system. Under the auspices of CFSA's Clinical and Health Services Administration (CHSA),

	NCMP and HHAC document and monitor children's health care in addition to effectively engaging stakeholders to improve child well-being and to ensure quality care is provided for children. *Note: for purposes of this policy, the term "child" includes infants and youth as applicable*.
IV. POLICY	It is the policy of CFSA to ensure initial medical screenings for all children entering out-of-home care and to conduct timely, comprehensive, health assessments of children so that all children's health care needs are identified and appropriately met. Further, it is the policy of CFSA to conduct these initial medical screenings and comprehensive health assessments at HHAC, the CFSA on-site medical screening clinic for children who are entering, re-entering, exiting, or changing placements while in foster care. HHAC ensures that children (from birth up until an older youth's 21st birthday) are seen at one location by a nurse practitioner who has been trained in the clinical needs of children entering the child welfare system. This allows for CFSA to identify the best placement for children and to inform resource providers of the child's immediate health and behavioral health needs. When medical and mental health assessments determine that a child requires individualized targeted case management (TCM) services, it is CFSA's policy to enroll the child in the Nurse Care Manager Program and to assign a nurse care manager (NCM) to ensure that the child's medical, dental, mental health care, and medically-related educational, social, and other needs are assessed, provided for, and monitored in a timely and appropriate fashion.
V. CONTENTS	**A.** Healthy Horizons Assessment Center **B.** Medical Screenings and Health Assessments **C.** Placement Screening Exceptions **D.** Nurse Care Manager Program **E.** Roles and Responsibilities of the Nurse Care Manager, Social Worker, and Family Support Worker **F.** Confidentiality
VI. ATTACHMENTS	**A.** Healthy Horizons Assessment Center Intake Form **B.** Cleared for Placement Authorization Form **C.** Definition of Medical Necessity **D.** Roles and Responsibilities
VII. PROCEDURES	**Procedure A: Healthy Horizons Assessment Center (HHAC)** 1. HHAC is staffed with licensed nurse practitioners and certified medical assistants 24 hours a day, 7 days a week. a. HHAC is closed between the hours of 1:00 pm and 2:00 pm to accommodate a lunch hour for staff. b. In the event that CFSA headquarters closes e.g., due to an emergency, HHAC will also close or re-locate as determined by CFSA's executive management team. • In the event of Agency closure, medical consultation from the CHSA medical director and other CHSA staff shall still be available 24 hours per day.

	2. HHAC shall also serve as a health information resource for children in out-of home care, as well as a resource for social workers, resource parents, birth parents, and other caregivers. 3. HHAC is not a full-service medical clinic. It shall only provides services as delineated in this policy. It shall not provide "sick visit" services, routine well-visits, physicals, or services to children who have open in-home cases with CFSA. 4. As needed, HHAC staff shall make reasonable efforts to ensure that CFSA's Language Access Services are available to clients or their parents or other caregivers with limited and non-English proficiency. (*See Language Access Services policy.*) 5. HHAC staff shall also make every effort to ensure that reasonable accommodations are available to all clients with disabilities in accordance with the provisions of Title II of the Americans with Disabilities Act (ADA). • HHAC staff shall ensure that any ADA accommodations provided are appropriate and sufficient to prevent a delay or disruption in the delivery of services provided by the clinic or NCMs. *(For additional guidance, see CFSA's policy on Services for Deaf and Hard of Hearing or contact the District's Office of Disability Rights.)*
	Procedure B: Medical Screenings and Health Assessments HHAC provides comprehensive health assessments for initial entry and re-entry into care. For any other circumstance that does not meet the criteria established in this policy for a medical screening, the CHSA administrator may, at his or her discretion, schedule a medical screening. 1. Each child entering, re-entering, or changing placements in out-of-home care shall receive a medical screening prior to an initial entry, re-entry, or change in placement. (*For exceptions, please see Placement Screening Exceptions* below.) a. This screening (also known as a "placement screening") identifies health conditions that require prompt medical attention, such as acute illnesses, chronic diseases (e.g., asthma, diabetes, and seizure disorder), signs of abuse or neglect, infectious or communicable diseases (e.g., chicken-pox, scabies, ring worm), hygiene or nutritional problems, substance use, and developmental or mental health concerns. This screening may also identify medication needs. i. Every effort shall be made to complete the medical screenings and comprehensive assessments at the time of the visit. ii. If the required screening or assessment cannot be completed at the initial visit, the medical assistant follows up with the social worker and resource parent to re-schedule an appointment.

b. The following procedures shall be performed by the nurse practitioner at the initial medical screening:
   i. The medical assistant shall obtain vital signs and prepares a chart for each child.
      a) Depending on the child's age or any special needs, the accompanying adult may be asked to assist, as needed.
      b) The medical assistant shall enter the chart information into FACES.NET within 24 hours of the visit.
   ii. The HHAC nurse practitioner shall obtain a medical history from the accompanying adult, social worker, and from the age-appropriate child.
   iii. The HHAC nurse practitioner shall take the child into the examining room for a physical examination.
      - Depending on the age of the child, the accompanying adult may be asked to leave the room during the physical examination.
   iv. A blood sample (via finger stick) shall be drawn from children ages 9 months to 6 years old in order to record a base-line blood lead level prior to placement (only during initial entry and re-entry medical screenings).
c. As part of the screening, the nurse practitioner may obtain one or more of the following specimens as needed, based on presenting conditions:
   i. Urine samples
   ii. Blood test
   iii. Throat culture
   iv. Oral swab
   v. On occasion, the child may need to obtain outside laboratory services for other tests. The nurse practitioner shall make the necessary referrals.
d. HHAC shall provide the social worker, CFSA staff, or other accompanying adult with an Intake Form (*see Attachment A: Intake Form*).
   i. The intake forms hall be completed by the adult accompanying the child, and should include as much information as possible for each child, including demographics, name of the child's social worker, and health care providers (including the primary care provider).
   ii. Upon completion, the form shall be returned to the medical assistant at the time of the visit.
e. The social worker shall bring a list of the child's medications, allergies, and information on medical and mental health histories to the screening and presents this list to the nurse practitioner who documents the information on the physical exam form.

	f. The accompanying adult or social worker shall be prepared to provide Medicaid or other insurance information for the child. g. If during the course of the screening the nurse practitioner determines that the child requires a higher level of care than can be offered at HHAC, s/he shall refer the child to the Children's National Medical Center (CNMC) emergency department or other medical emergency facility. • In the event of a mental health crisis, the nurse practitioner shall contact the Children and Adolescent Mobile Psychiatric Service (ChAMPS). h. Following the medical screening, the nurse practitioner shall review the results with the social worker, accompanying adult, and age-appropriate child. • The social worker and patient representative (if applicable) receives any prescriptions, and educational or instructional materials related to the diagnoses. i. For all placements, the medical assistant shall provide the social worker with a written *Cleared for Placement Authorization Form* (*see Attachment B*) that must be completed and signed by the nurse practitioner and patient representative. i. This form shall include diagnoses, medicines, prescriptions, and future appointments. ii. Upon completion, the form shall be added to the placement folder that accompanies the child or youth to their new residence. j. At any time during the medical screening (initial, re-entry or re-placement), the nurse practitioner or CHSA administrator shall inform the Placement Services Administration (PSA) of any medical information that may have a bearing on placement decisions for the child. i. PSA shall then notify the nurse practitioner of the child's placement information once obtained. ii. The nurse practitioner shall then notify the caregiver of the placement and shares any health or medical concerns. k. The HHAC medical assistant shall contact the caregiver to make the appointment for the child's comprehensive health assessment (following the initial screening). i. The comprehensive assessment includes a mental health and dental screening. ii. The medical assistant shall enter the information into FACES.NET within 24 hours of scheduling each appointment, and notifies the social worker and supervisor by email of the scheduled appointment.

iii. The medical assistant shall contact the caregiver 48 hours prior to the scheduled comprehensive health assessment to remind the caregiver of the scheduled appointment.

l. The medical assistant shall ensure all scheduling information is provided to the assigned social worker.

m. The nurse practitioner shall answer any questions asked by the age-appropriate child, social worker, and accompanying adult.

i. At any time, the nurse practitioner shall also be available to answer any questions from the resource and birth parents and to discuss any diagnoses after the screening with the consent of the age-appropriate child *(see policy on Medical Consents).*

ii. If the age-appropriate child does not consent to the sharing of this information to the resource or birth parents, the social worker is advised to contact the CFSA privacy officer in the Office of the General Counsel.

n. Following completion of an initial medical screening and receipt of the *Cleared for Placement Authorization Form,* the social worker shall ensure that any or all prescriptions are filled and taken with the child to the placement.

Note: for further information on the initial medical screening, see CFSA's policy on Initial Evaluation of Children's Health.

2. A comprehensive health assessment shall take place within 30 days of a child's initial entry and re-entry into out-of-home care.

a. The comprehensive health assessment shall build on the information obtained from the family and primary care provider, in addition to the outcomes of the initial medical screening.

b. The assigned social worker shall invite and make reasonable efforts to transport the birth mother and father to the comprehensive health assessment to participate in early and ongoing engagement in the health of the child or youth, unless such involvement would not be in the best interest of the child.

c. The resource parent shall be invited and is expected to accompany the child to the exam. If the resource parent cannot attend, the social worker must attend.

d. Comprehensive assessments are in-depth examinations that include the following procedures performed by the nurse practitioner:

i. A traditional physical examination (the child must remove his or her clothes)

ii. Developmental screening for all children under 6 years old

iii. Laboratory testing, as appropriate, including testing for lead toxicity

iv. Tuberculosis skin test

v. Hearing and vision screening

vi. Review of immunizations

vii. Discussion of all of the findings and referrals, as needed

e. The medical assistant shall make every effort to schedule a mental health screening for the same date as the comprehensive health assessment, in consultation with the caregiver.

   i. Mental health screenings are performed by an assigned Department of Mental Health (DMH) specialist.

   ii. If the mental health screening is not available for the same date as the comprehensive health assessment, the social worker shall schedule the screening in direct consultation with the DMH specialist for a date within 5 days of the comprehensive assessment.

   iii. The caregiver and/or the social worker shall accompany the child to the mental health screening.

      a) For children 8 years old and younger, the child must be accompanied into the session by an adult who is knowledgeable of the child's growth and development.

      b) Children and youth 9 years old and older do not require an adult to accompany them into the session with the DMH specialist.

   iv. The DMH specialist shall document the outcome of the mental health screening tool in FACES.NET.

      a) The social worker shall review the screening outcomes and determines any subsequent needed mental health services for the child.

      b) All mental health information is considered "protected health information" and shall be safeguarded in accordance with adopted confidentiality laws. (*See Procedure F: Confidentiality below*.)

f. The medical assistant shall also schedule a dental screening to be completed within 30 days of the child's entry into foster care.

   i. The medical assistant shall document the scheduled appointment date in FACES.NET.

   ii. After the appointment, the medical assistant updates FACES.NET by indicating that the appointment occurred. (It is important that the medical assistant follow up with the dentist and enters all information into FACES.NET. *See Initial Evaluation of Children's Health policy, Procedure E: Initial Dental Examination.)*

g. Within 24 hours of the scheduled comprehensive health assessment, the medical assistant shall document in FACES.NET whether the appointment was completed or missed.

   - The medical assistant shall also notify the assigned social worker of any missed appointments and follow up with the assigned social worker and the caregiver to reschedule the appointment.

h. The results of the comprehensive assessment shall form the basis of the report submitted to the NCM by the nurse practitioner.
   i. Assessments shall be used in collaboration with case plan information (provided by the social worker to the NCM, if assigned) to develop the comprehensive care plan.
   ii. The NCM shall share the information on the child's identified needs with the age-appropriate child and the child's assigned social worker or resource parent. (*Please see Procedure D below on the assignment of a NCM*.)

i. For children who are not assigned an NCM, the nurse practitioner shall share the information on the child's identified needs with the age-appropriate child, the assigned social worker, or caregiver.
   - The assigned social worker takes the lead in the coordination of care for the child with consultation from the CHSA clinical team, as needed.

Note: for further information on the comprehensive health assessment, see the Initial Evaluation of Children's Health policy.

3. Medical screenings at HHAC shall be conducted for changes in placement, including the discharge of a child from a psychiatric residential treatment facility or from St. Ann's Infant and Maternity Home.
   - The adult accompanying the child brings the discharge documents to the screening.

4. When a child receives a medico-legal examination (for more information on medico-legal exams, please refer to CFSA's *Investigations Procedural Operations Manual*), the CFSA staff member who accompanies the child brings any hospital documents (e.g., examination report, body chart, and discharge summary) to HHAC and requests the *Cleared for Placement Authorization Form*.
   a. It may be necessary for the nurse practitioner to perform an additional medical evaluation to clear the child for placement.
   b. Children who receive a medico-legal examination shall be scheduled for a 30-day comprehensive health assessment, dental evaluation, and a mental health screening (unless already in care).

5. When a child exits from the foster care system (either through reunification, guardianship, adoption, or aging out), the social worker shall complete the following tasks:
   a. Notify the HHAC medical assistant as soon as possible (in the case of reunification) or within 30 days of a child's plans for exit.
   b. Schedule an exit medical screening to identify any health concerns and to make recommendations as needed for follow-up care.
   c. Follow the same procedures for completing *Intake Forms* as outlined above, as well as the procedures for the remainder of the intake process.
   d. Encourage the birth or adoptive mother and father, or legal guardian, to attend the exit medical screening.

Procedure C: Placement Screening Exceptions

1. For allegations of sexual or physical abuse, the Child Protective Services (CPS) social worker shall take the child directly to CNMC for a medico-legal examination.

2. For children discharged from the hospital, a medical screening at HHAC is not necessary.
   - Although a medical screening is not necessary, the social worker shall bring all discharge documents to HHAC in order to establish the medical record and to have the medical assistant schedule any needed appointments.

Procedure D: Nurse Care Manager Program (NCMP)

CFSA established the NCMP in order to support social workers' efforts to improve child health and developmental outcomes, including safety and well-being. The fundamental goal of NCMP is to enhance child well-being through management and oversight of all medical and health-related social, educational, and other needs of children in foster care.

1. Through consultation with the CHSA clinical team, the medical needs of a child along with any supportive documentation shall be discussed and reviewed as needed for NCMP referral. A child may be referred to NCMP and assigned an NCM based on the following criteria:
   a. Medical necessity (*see Attachment C for definition of "medical necessity"*) via the HHAC nurse practitioner
   b. Necessity for intensive case management for health or health-related social, educational, or other needs (as identified by the assigned social worker)
   c. Identified need for TCM services

2. A youth who is pregnant upon coming into care or who subsequently becomes pregnant while in care is assigned an NCM.

3. The NCM is specifically assigned to support the assigned social worker in the coordination, provision, and timely monitoring of any eligible child's medical, dental, mental health, and medically-related social, educational and other needs.

4. NCM responsibilities include, but are not limited to the following tasks:
   a. Collecting and updating health information
   b. Conducting comprehensive assessments
   c. Developing a care plan
   d. Assessing and re-assessing health care needs
   e. Referring and coordinating health-related services
   f. Providing consultation
   g. Facilitating health care-related communications between the child's social worker, biological and foster family, health care provider, school, and other team members (*See Procedure E: Roles and Responsibilities below.*)

5. Through the collaboration between the NCM and other team members who are knowledgeable about the needs of the child, the NCM develops the TCM Comprehensive Care Plan.

6. The NCM facilitates health-related communications between all members of the child's team and for monitoring the progress of the child towards care plan goals.

Procedure E: Roles and Responsibilities of the Nurse Care Manager, Social Worker and Family Support Worker

This section provides general information on roles and responsibilities. Please refer to *Attachment D: Roles and Responsibilities* for additional, detailed information.

1. The TCM comprehensive care plan is approved by the NCM supervisor.

2. The NCM monitors the progress of the child towards care plan goals and completes the following components of the plan:
   a. A comprehensive assessment and periodic reassessment of a child to determine the need for any medical, dental, mental health, and medically-related educational, social or other services
      - Reassessments occur, at the least, every 6 months for enrolled children up until their 21st birthday, or until the child exits foster care.
   b. Development and periodic revision of a comprehensive care plan, based on the assessment information collected from the CPS social worker, the assigned social worker, the HHAC nurse practitioner, the community-based medical providers, family members, resource parents, the child (if appropriate), and others knowledgeable of the needs of the child
   c. Referral and related activities that assist the child or youth in obtaining needed services
   d. Monitoring and follow-up activities that are necessary to ensure that the care plan is implemented and adequately addresses the child or youth's needs
      - Monitoring shall occur at least monthly.

3. The roles and responsibilities of the child's assigned social worker and family support worker for addressing the child's identified medically-related needs include the following activities throughout the life of the case:
   a. Participating in meetings with the NCM and other members of the child's team to identify medical and medically-related educational, social, and other needs that will inform the development of goals and plans for services to address those needs
   b. Promptly forwarding to the NCM any newly-discovered information that may not have been known during the assessment and any new developments or information on the child or youth's case

	c. Ensuring that any needs for both internal and external services, including educational, mental health, and other needed social services are forwarded to the NCM for prompt referral for these service needs • The above information is also shared with the placement resource provider or caregiver.
	Procedure F: Confidentiality 1. All HHAC forms and documents that contain medical, mental health, or dental information (known as protected health information or "PHI"), is safeguarded in strict accordance with the Health Insurance Portability and Accountability Act (HIPAA) as well as the District's mental health and confidentiality laws. (*For additional guidance, see the District of Columbia's HIPAA Privacy Policy, which can be found on the District of Columbia's website and has been adopted as the official policy of CFSA.)* 2. HHAC and the NCM may not disclose patient PHI, except either a. upon receipt of a valid authorization for release; or b. when otherwise permitted under HIPAA. 3. Any PHI that is scanned and saved to a network or transmitted in electronic form via email or fax automatically becomes Electronic Protected Health Information (e-PHI) and falls within the regulations of CFSA's HIPAA security policies. 4. All HHAC e-PHI is transmitted in strict accordance with HIPAA security laws, as outlined in CFSA's HIPAA security policies. (*For additional guidance, staff should review the HIPAA security policies located on CFSA's Intranet Website. For access by private agencies, staff should contact the assigned CFSA contract monitor.*)

Healthy Horizons Assessment Center
DC Child and Family Services Agency
200 I Street, S.E.,Washington, DC 20003
TEL: 202-727-8096 FAX: 202-727-7772

INTAKE
DATE:
TIME:

FACES CASE #: _____ **LAST NAME:** _____

FACES CLIENT #: _____ **FIRST NAME:** _____

DOB: _____

AGE: _____y _____m _____wk

TYPE OF VISIT: Please use "X" to indicate choice

INITIAL SCREEN		
1.	Initial Foster Care	( )
2.	Re-Entry	( )

REASON FOR INITIAL/RE-ENTRY:			
1.	**Alleged Sexual Abuse**	☐Yes	☐No
2.	**Alleged Physical Abuse**	☐Yes	☐No
3.	**Alleged Neglect**	☐Yes	☐No
	Referred to Medical/Legal?	**☐Yes**	**☐No**

REPLACEMENT SCREEN		
1.	**Abscondence**	( )
2.	**Adoption**	( )
3.	**Emancipation**	( )
4.	**Guardianship**	( )
5.	**In-Home**	( )
6.	**Reunification**	( )
7.	**Replacement**	( )
8.	**Comprehensive**	( )

Child's Representative Information

REPRESENTATIVE bringing child to HHAC :
SW ___ FAMILY SUPPORT WORKER___ FOSTER PARENT___
NAME of REPRESENTATIVE:
AGENCY where REPRESENTATIVE WORKS:
TEL of REPRESENTATIVE:

Social Worker Information (name/tel.) ☐Unknown

NAME:
AGENCY:
ADMINISTRATION AND/OR UNIT:
Office TEL:
CELL:

NEW PLACEMENT INFORMATION: ☐Unknown

Provider Agency: _____
Provider Address: _____
Provider Phone #: _____

TYPE OF PLACEMENT: ☐Unknown

☐Traditional Foster Home ☐Traditional Group Home
☐Therapeutic Foster Home ☐ Therapeutic Group Home
☐Reunification ☐ Independent Living
Other (specify):

Child's Demographic Information

SEX: ☐ Male ☐ Female
LANGUAGE:

RACE/ETHNICITY:

☐ Black ☐ Asian ☐ Caucasian
☐ Biracial ☐ Multiracial ☐ Hispanic
☐ Native American ☐ Filipino ☐ Other

Child's Personal Information

Length of Time in Foster Care: _____
SSN: _____
INSURANCE: ☐ **Medicaid** ☐ Other _____
INSURANCE POLICY #: _____

Child's Primary Care Provider ☐Unknown

NAME:
ADDRESS:
TEL:

Child's Therapists ☐Unknown

NAME:
ADDRESS:
TEL:

Child's Dentist ☐Unknown

NAME:
ADDRESS:
TEL:

CHILD & FAMILY SERVICES AGENCY
Healthy Horizons Assessment Center
Clinical and Health Services Administration

Cleared for Placement Authorization Form

Date: _____ Time: _____

Dear Caregiver:

_____ was examined in the CFSA Healthy Horizons Assessment Center (HHAC**). He/she has been cleared for placement into your home.**

We have information that we would like to share with you about the health needs of the child that were identified at their visit to the Healthy Horizons Assessment Center. Please look at the information and the instructions to support you in making sure that the child/youth makes a smooth transition into your home.

Discharge Instructions for Caregiver:
Diagnoses Identified for the child at the time of the screening visit: ☐ Clinically Stable at the time of visit

Diagnoses 1:_____ Diagnoses 4:_____
Diagnoses 2:_____ Diagnoses 5:_____
Diagnoses 3:_____ Diagnoses 6:_____

Medications Prescribed for the child: ☐ No Medications Prescribed at this visit

Medication 1:_____
Medication 2:_____
Medication 3:_____
Medication 4:_____

Instructions:_____
_____
_____
_____

Follow up needs and/or appointments for the child identified at the time of visit:
Follow up/Appointment**:** _____
Follow up/Appointment**:** _____
Follow up/Appointment**:** _____
Follow up/Appointment**:** _____

☐Because this child is entering foster care; he/she must receive a dental screening, a comprehensive health assessment and a mental health screening. A representative from Healthy Horizons Assessment Center (HHAC) will be contacting you to schedule these visits or you may contact the HHAC at (202) 727-8096.
Thank you.

Please be advised that in accordance with the Health Insurance Portability Act (HIPAA), as well as other local federal and privacy laws and regulations, the information included herein is privileged and confidential and should not be disclosed to any person or entity without the express consent of the Agency.

Nurse Practitioner Signed: Print: Date:

_____ _____ _____

I certify that I have received instructions and/or prescriptions pertaining to the above patient and all my questions have been answered.

Patient Rep.(Print) _____ (Signature):_____ Date: _____

NURSE CARE MANAGER – MEDICAL NECESSITY

Children entering foster care are often in poor health, have higher rates of serious emotional and behavioral problems, chronic physical disabilities, birth defects, developmental delays, and poorer school achievement than children in the general population.

Nurse Care Manager Targeted Case Management (TCM) is provided by licensed registered nurses and may be deemed appropriate for the prevention, diagnosis, or treatment of an illness, injury, disease, or condition of a child or youth who is under age 21 and who is in the custody of the Child and Family Services Agency. Case management services must be consistent with the generally accepted standards of practice and appropriate for the type of condition and expected outcome.

Children or youth identified for Nurse Care Manager TCM services must have significant health care needs such as (1) an acute catastrophic event or (2) chronic physical, developmental, behavioral, emotional, or health-related educational or social conditions that require services of a type or amount beyond that generally required by children. Medical necessity shall be determined by one or more of the following criteria:

1. The child has a diagnosed condition for which medication is required and/or needs treatment for a recurring condition that if left untreated may lead to serious illness or impairment.
2. There is a suspected condition that without in-depth evaluation and case management may lead to serious illness or impairment.
3. Identified risk factors that have been noted by a comprehensive history, or a developmental or other evaluation, could result in impaired functional capabilities if left unattended.
4. An informed clinical opinion of a licensed professional suggests the need for medically-related intervention and case management to prevent the development of serious illness or impairment.

Relevant medical evidence must support the conclusion that the service is

1. appropriate to the age, functional, and developmental status of the individual;
2. clinically appropriate and consistent with the current and generally acceptable standards of medical, developmental health, behavioral, or dental practice; and
3. likely to assist in achieving one or more of the following goals:
    a. Promoting growth and development
    b. Preventing, correcting, or ameliorating a physical, mental, developmental, behavioral, genetic or congenital condition, injury, or disability that can affect a child's healthy growth and development
    c. Achieving, maintaining, or restoring the medical and health-related social and educational functional capabilities

Necessary services must

1. be reasonably expected to produce the intended results for the child and to have expected benefits that outweigh potentially harmful effects;
2. take into account available clinical evidence as well as the opinion of the treating clinician and other clinical, education, and social service professionals who treat or interact with the child;
3. take into account the specific needs of the child and family; and
4. reflect current bioethical standards.

Roles and Responsibilities

Major Category	Roles and Responsibilities	Task to be Completed By			
		Nurse Care Manager (NCM)	Social Worker	Family Support Worker	NCMP Assistant
Information Gathering and Generation	This chart identifies who has the ultimate responsibility for each task ("L" for lead). All other team members, including resource parents, birth parents and other members of the child or youth's team, are engaged and play a critical role in the care of the child or youth. It is the expectation that members of the team will cooperate to ensure each task is completed.				
	Complete the initial Comprehensive Assessment.	**L**			
	Provide health documentation and resource information to the NCM for children in the foster care system.		**L**		
	Support the social worker to provide health and medically-related education, social and other needs documentation to the NCM.			**L**	
	Create and approve TCM Care Plan; forward care plan and related foundational health documents to the social worker for support in developing the case plan and ongoing service needs.	**L**			
	Provide NCMs with pertinent health information from structured progress reviews, case planning teaming meetings, transitional conferences, and discharge planning in order to facilitate ongoing health needs planning.		**L**		
	Ensure that appropriate medical consents for medical treatment and surgery are obtained and are available.	**L**			
	Obtain complete medical consent documentation by the legal guardian or by the Family Court.		**L**		
Assessment/ Evaluation/ Planning	Organize, review, and maintain all health-related information, including mental health evaluations and developmental evaluations.	**L**			
	Review Hotline report, Investigative Summary, Family Team Meeting report, Contact Notes, and Case Plan.		**L**		
	Develop and approve a unique TCM Care Plan for each child by teaming and consulting with other stakeholders.	**L**			
	Provide summary of child health and medically-related education, social, and other needs in FACES.NET for social worker access and to include in the child case plan to ensure integration of planning for health and medically-related education, social, and other needs.	**L**			

Roles and Responsibilities

Major Category	Roles and Responsibilities	Task to be Completed By			
		Nurse Care Manager (NCM)	Social Worker	Family Support Worker	NCMP Assistant
Assessment/ Evaluation/ Planning (continued)	Review and integrate the goals and activities of the TCM Care Plan into the ongoing child case plan during initial case plan development and regular updated versions.		**L**		
	Routinely team with the NCM to ensure knowledge of comprehensive health and related educational, social, and other needs. Integrate all needs into the ongoing case management planning to support case goals and achieving permanency.		**L**		
	Assist in compiling health-related information for social worker court reports.	**L**			
	Review case plan reports and progress reports from the social worker and the caregiver.	**L**			
	Review education evaluation summaries and progress from the social worker and the caregiver.	**L**			
	Conduct a face-face visit within 15 days of assignment and then quarterly.	**L**			
Service Coordination and Facilitation	Coordinate health and medically-necessary education, social, and other needs through systematic communication and coordination of care among medical personnel, social workers, resource and birth parents, and other team members.	**L**			
	Coordinate and communicate with the caregiver and the NCM to ensure that caregivers are informed and understand health and medically-related education, social and other services appointments, and information.		**L**		
	Educate social workers, resource parents, children and youth, and family members regarding the health and medically-related education, social, and other needs and activities to support achieving TCM Care Plan goals.	**L**			
	Ensure that children attend and receive appropriate services to meet health and medically-related education, social, and other needs and monitor progress toward TCM Care Plan goals.	**L**			

Roles and Responsibilities

Major Category	Roles and Responsibilities	Task to be Completed By			
		Nurse Care Manager (NCM)	Social Worker	Family Support Worker	NCMP Assistant
Service Coordination and Facilitation (continued)	Coordinate and facilitate health and medically-related education, social, and other needs appointments with the caregiver and child.	**L**			
	Communicate information to birth parents regarding health and treatment needs and preventive health education.	**L**			
	Participate in bringing the child to identified appointments and providing information back to the social worker and NCM regarding the outcome of the service.			**L**	
	Complete and submit service needs applications including Supplemental Security Income (SSI) and Youth Forensic Services Division of DC Superior Court. ***Note: referrals will be completed in collaboration with the nurse care manager providing appropriate health information.***		**L**		
	Review, assess, and complete referrals for service needs.	**L**			
	Recommend and coordinate second opinions.	**L**			
	Activate and monitor health insurance enrollment.		**L**		
	Enter accurate and complete documentation of health and medically-related education, social, and other needs information into FACES.NET and auxiliary databases.	**L**			
Monitoring and Service Assessment	Monitor health and medically-related education, social, and other needs and services by assessing whether the services provided to children are meeting immediate and long-term goals. Evaluate the success of the services and treatment activities to meet desired health and medically-related education, social, and other goals.	**L**			
	Monitor the progress of the child on identified TCM Care Plan goals.	**L**			
	Provide periodic updates on the progress of the child to achieve goals.		**L**		
	Coordinate health care services by monitoring the use of the health care system services for primary and specialty care in a timely manner.	**L**			

Roles and Responsibilities

Major Category	Roles and Responsibilities	Task to be Completed By			
		Nurse Care Manager (NCM)	Social Worker	Family Support Worker	NCMP Assistant
Monitoring and Service Assessment (continued)	Communicate with the assigned NCM regarding the outcomes of the medical treatment services requested.		**L**		
	Communicate with social workers, caregivers, family members, child or youth, medical providers, and other team members about health issues to meet the TCM Care Plan goals.	**L**			
	Coordinate and complete health information sharing and education with parties engaged.	**L**			
	Attend staff meetings of the administration or private foster care agency that the NCM supports.	**L**			
	Communicate information to birth parents regarding health and treatment needs as well as preventive health education.		**L**		
	Communicate health and medically-related education, social, and other information to the caregiver, the guardian *ad litem*, assistant attorney general, the family, and other support team resources.	**L**			
	Ensure that the caregiver and family are aware of the health and related needs of the child. Ensure the caregiver or social worker receives the anticipatory guidance and the health and related needs information packet.	**L**			
	Participate in teaming meetings to identify health and medically-related education, social, and other needs to develop goals and plans for services.	**L**			
	For children or youth with complex medical needs: (1) participate in structured progress reviews, case planning teaming meetings, transitional conferences, and discharge planning; (2) assist in determining appropriate placement for children with complex health problems.	**L**			
	Manage hard copy and email service requests and information provided from HHAC.				**L**

Roles and Responsibilities

Major Category	Roles and Responsibilities	Task to be Completed By			
		Nurse Care Manager (NCM)	Social Worker	Family Support Worker	NCMP Assistant
Program Support Activities	Telephone providers in the community to request information regarding children engaged in their practice.		**L**		
	Support the NCM in making and confirming appointments for services.				**L**
	Support the NCM in obtaining and organizing health and related information from team members.				**L**
	Support the NCM in gaining information and enrollment of children into fee-for-service Medicaid.				**L**
	Receive and monitor in-box for completed summaries and documentation to provide to the respective NCM (including developmental and mental health evaluation summaries, educational evaluation summaries, and substance abuse treatment outcomes).				**L**
	Act as the point person for the respective Healthy Horizons NCM team to receive calls for the NCMP and the on-call team for in-home cases.				**L**
	Ensure that social workers and other team members receive necessary documentation.	**L**			
	Other administrative duties to support nurse care manager teams.				**L**
	Support the NCM in requesting and organizing health and related documentation (such as medical records, immunization records, medical consents, individual education plans, labs, and medication management reports).				**L**
Discharge Procedure	Complete the discharge form in its entirety.	**L**			
	Notify the social worker and supervisor of case closure.	**L**			
	NCM completes a contact note in FACES.NET.	**L**			