


Category:

	Policy Title:	Medical Case Management Policy			
	Policy Number:	Post-Custody Policy 001	Version:	2	Effective Date:

Approved By: Operations Team

Date: 07/12/2018

Overview

Description:

The Medical Case Management policy seeks to guide instruction around the process by which Mecklenburg County Department of Social Services-Youth and Family Services (DSS-YFS) nursing staff will work with biological parents, placement providers, and medical providers to assess children's physical health and well-being, as well as secure and coordinate services designed to meet children's well-being needs.

Purpose/Rationale: Mecklenburg County Youth and Family Services is committed to strengthening families and communities to keep children safe. One key aspect of promoting safety for children is the assessment and identification of child well-being needs. North Carolina Department of Health & Human Services (DHHS) policy mandates that all child well-being needs or any lack of medical, dental, mental health, or other care of the child be:

- Assessed during the provision of all child welfare services
- Addressed by the child welfare agency or through service referrals
- Reviewed during development and review of Family Services Agreements
- Documented¹

Applicability: Frontline, supervisory, and managerial staff from Permanency Planning & Nursing; Director & Deputy Director(s)

Definition(s):


Well-Being Needs: needs occurring within the following domains: physical/medical health, behavioral/mental health, social/cultural, educational/developmental

Placement Provider: any foster parent or relative/non-relative kinship caregiver serving as the primary caregiver for children in custody

Failure to Comply:

¹ North Carolina Child Welfare Manual for Intake, Assessments, In-Home & Permanency Planning, Cross-Function Topics: Well-Being

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Policy

Medical case management services must be provided to children in DSS custody in accordance with the procedures outlined below.

Procedure(s) that apply:

Youth and Family Services nurses will work with all children 2 years old and younger; those with a chronic illness, or those that appear ill (actively running fever, coughing, lethargic etc.- call YFS nurse to discuss) and require an immediate placement physical when they enter DSS custody.

All children that enter DSS custody require an immediate doctor visit within 7 days of custody and a complete physical within 30 days. This appointment will be scheduled ASAP and held within 7 days of the child coming into custody.

Youth and Family Services nurses will schedule the 30-day physical at the child's primary care physician (PCP) or an appropriate pediatric office if the child has no PCP and give the appointment information to the placement provider and the child's social worker.

An assigned Youth and Family Services nurse will schedule and attend the 30-day visit unless the appointment is at Teen Health Connection. In that case, it will be the social worker or the nurse who attends the visit with the child. The placement provider and/or child's social worker will assume responsibility for scheduling all subsequent medical visits unless they reach out to the assigned nurse for assistance.


Placement providers and biological parents are encouraged to attend all doctor visits unless otherwise noted in a court order.

All children in DSS custody will have routine well checkups according to the following schedule:

- Newborn check within a week of hospital discharge
- 1 month, 2 months, 4 months, 6 months, 9 months
- 12 months, 15 months, 18 months, 24 months
- Children 2 years and older will be seen yearly

All children in DSS custody will follow the required immunization schedule unless there is a verifiable religious exemption:

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Type of Immunization	Number of Doses	Administration Age/Intervals
Diphtheria, tetanus, pertussis (DTP)	5 doses	2mo, 4mo, 6mo, 15-18mo, 4-5yrs
Polio	4 doses	2mo, 4mo, 6-18mo, 4-6yrs
Measles, Mumps, Rubella (MMR)	2 doses	12-15mo, 4-6yrs
Haemophilus influenza type B (HIB)	4 doses	2mo, 4mo, 6mo, 12-15mo
Pneumococcal (Prevanar)	4 doses	2mo, 4mo, 6mo, 12-15mo
Varicella (Chickenpox)	2 doses	12-15mo, 4-6yrs
Meningococcal	2 doses	12yrs, 17yrs
Hepatitis B (HEPB)	3 doses	newborn, 2mo, 6-18mo

All children in DSS custody will receive the recommended immunizations unless parent refuses:


Type of Immunization	Number of Doses	Administration Age/Intervals
Hepatitis A (Hep A)	2 doses	12mo, 6-18mo after the 1 st given
Influenza (Flu)	Yearly, October-March	Ages 6mo and older
Rotavirus	3 doses	2mo, 4mo, 6mo
Human Papillomavirus	3 doses	9-12yrs, 2mo and 6mo after 1 st dose

YFS nurses will work with placement providers and social workers to verify that referrals are made by the pediatrician and the appointments are completed (i.e. eye doctor, neurologist, dermatologist, urologist etc.)

When a child in DSS custody is ill, placement providers will call and schedule a sick visit at the PCP office and will alert the biological parents and the assigned YFS nurse.

In case of an emergency, placement providers should call 911 or take the child to the nearest emergency room (ER), preferably CMC Levine Children's ER or Novant Health Presbyterian Children's ER. Placement providers should also alert biological parents **and** either the social

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worker or assigned YFS nurse. Should the child require emergency surgery or anesthesia for any procedure, the social worker or YFS nurse will need to be the one to give consent, not the placement provider. All attempts will be made to inform the biological parents of the situation but if it is an emergency, YFS will give consent to proceed.

For general medical questions, placement providers should call the nurse line at the pediatrician's office. There is a YFS nurse on call 24 hours per day/7 days a week that can be reached for notifications or in case of emergencies by calling the Help Line.

When a child in DSS custody needs to be put to sleep to have elective surgery (i.e. dental surgery, tonsils removed, tubes placed, knee surgery etc.), the placement provider will notify the child's social worker, YFS nurse, and biological parent(s). All attempts should be made for the biological parents to be present for the surgery to give consent. If the biological parents will not be able to attend, they will need to give written consent for the social worker or YFS nurse to give consent for the surgery on their behalf.

Form(s) that apply:

Reference(s):

YFS Medical Management of Children in Custody for Staff, Parents, & Caregivers-June 2016

North Carolina Child Welfare Manual for Intake, Assessments, In-Home & Permanency Planning, Cross-Function Topics: Well-Being

Contact(s):

Nursing Supervisor
Policy & Practice Model Supervisor

Policy History:

Developed 5/11/18.