

Health and Wellness Guide for Transitional Age Youth

The purpose of this guide is to provide DCF staff working with young adults with a framework to assist the youth with becoming familiar with their health (physical, dental, vision, specialized health care, and mental health) and wellness. Throughout this document, the term "health" is inclusive of physical, dental, vision, specialized health care, and mental health. The goals of this work is to ensure that our youth are prepared and empowered to take care of their personal health and wellness, advocate for their own needs, have learned how to navigate the health care system, and are empowered to access available health insurance options through their transition from DCF and into adulthood. This guide provides the resources staff and youth will need in order to ensure that each youth is able to become empowered to make lifelong decisions regarding their health and wellness. This guide contains practical guidance and suggestions for staff working with youth to achieve these desired outcomes and is a supplement to the DCF [Adolescent Services Practice Guide](#) and [Health Care Standards and Practice Guide for Youth in Care](#).

Staff and the youth's medical professionals and/or placement resources should partner to provide the youth with the information and resources they will need to successfully manage their physical (physical, dental, and vision) and mental health and wellness. This guide provides areas of pertinent health topics, guidance to support staff in empowering youth to self-advocate, and resources youth will need as they transition out of DCF care. Within this guide, the use of the term "medical" should be viewed as including physical, dental, vision, specialty, and mental health care.

Health Literacy

Youth in care should have an age/cognitive age appropriate understanding of their routine medical, dental, vision needs, mental health, medical condition(s) and treatment to maintain optimal health and be empowered to advocate appropriately for themselves regarding their routine medical needs, conditions, and treatments. As such, each adolescent, starting at the age of 14 years old, should receive information about health literacy from DCF staff and medical provider(s). Health literacy is achieved when a youth is competent to oversee and manage their personal health and is a critical skill to ensure that a youth's well-being continues into and throughout adulthood.

Adolescents should be given medical information consistent with the American Academy of Pediatrics (AAP), American Dental Association (ADA), American Academy of Ophthalmology (AAO) or American Ophthalmological Society (AOS), and the Center of Disease Control and Prevention (CDC). This information can be provided in various format by different professionals including the social worker and adolescent's medical provider. Medical information should be age/cognitively appropriate, offered in various literacy standards, various media formats to support learning styles, and languages as needed. The medical information provided regarding health (physical, dental, vision, specialized, and mental health) that supports their individualized needs both present ongoing to support their ability to advocate and care for their overall health. Staff should maintain contact with a youth's medical providers to ensure that

youth are provided with information and education to support their ability to advocate and care for their health.

When partnering with youth and providers to support the youth in attaining the knowledge and skills to be able to manage their health a partial list of some areas to consider follows:

- The importance of Sleep, Exercise and Nutrition (S.E.N.) to overall well-being.
- Information on routine medical care schedules for physical, dental, and vision, including the difference between routine, chronic and acute medical care/conditions. Also specialized care and mental health treatment if applicable.
- Information on the types of medical, dental, vision, specialty, and mental health providers. For example, the difference between a specialist and primary care provider, or a primary care physician and an OBGYN.
- Information on any prescription medication(s) the youth is taking including administration instructions, schedules, the importance of taking medication regularly, how to contact the prescriber, and how to secure prescription refills and/or renewals. Additionally, the danger of taking prescription medication in ways in which they were not prescribed or taking someone else's prescription medication.
- Information on over the counter (OTC) medications and/or supplements (e.g. acetaminophen, ibuprofen, antihistamines, supplements, etc.) including: how to read package inserts, determine dosing, know and recognize adverse reactions that may occur, and the importance of taking them as indicated when symptoms for use are present, and for youth with prescription medication how to obtain a pharmacy consult to review the potential adverse reactions or contraindications when taken with the youth's current prescriptions.
- An understanding that vaccinations continue into adulthood, e.g. annual flu vaccinations; tetanus updates; vaccine schedules; and the knowledge that there is a patient information sheet with a vaccine that identifies the vaccine given, lot number, and potential side effects such as tenderness at the injection site.
- Information on Sexually Transmitted Infections (STIs) and pregnancy prevention.
- What is consent for procedures/treatment and at what age can youth consent without a parent and/or guardian.
- An understanding of patient's rights.
- How to access their medical records.
- The importance of making informed decisions to support their well-being including how to evaluate potential health risks (e.g. those associated with tanning, body piercings, and tattoos, etc.).
- How to determine if a provider is licensed to practice and is following public health guidelines.

Health Literacy Education Modifications or Exemption

Modifications to the health literacy education may be granted by the Program Supervisor for youth who have mild to moderate developmental delays, are non-verbal, or otherwise require a modification to the educational curriculum to support their individual learning.

Exemptions to the health literacy education may be granted by the Program Supervisor for adolescents who are diagnosed with severe developmental disorder or cognitive issues which affect their ability to understand their own health/health care.

Any modification or exception should be documented in the youth's LINK record as a narrative and in each ACRI.

Health Insurance

During a youth's tenure with DCF the agency is legally responsible for ensuring that all youth are enrolled in an insurance plan that provides coverage for medical, dental, vision, and mental health services. Youth in DCF independent living settings (CHAP, CHEER) should be provided with their insurance plan(s) information and contact information.

Youth who are employed at least part time may be eligible for insurance coverage through their employer. The AOSW should assist the youth in determining if the youth is eligible for such coverage and supporting them in applying for their employer's insurance plan. The DCF Health Advocate can be a resource in evaluate plan options when multiple plans are available to the youth.

Health Insurance for Youth After Transitioning from DCF

The 2014 Affordable Care Act mandates medical coverage for former foster youth who were in care on their 18th birthday under Medicaid as a special eligibility group. A youth who meets that criteria is entitled to Husky A Health Insurance through age 26 regardless of income once they transition from DCF. The Social Worker must complete the DCF-MA1 Medical Assistance Form and submit it to the DCF Medical Assistance Unit when the youth passes from care. Youth can apply directly for coverage through DSS; the Social Worker should inform the youth of their eligibility prior to transitioning from DCF and provide the youth with the contact information, phone and website, for DSS.

Access to Health Care

DCF is a responsible for ensuring that youth in the care and custody of the Department have access to adequate health care and that health care is provided at the frequency prescribed, e.g. annual physicals, twice yearly dental cleanings, etc. Caregivers for youth in DCF care are partners supporting youth in receiving physical and mental health services. Information about health resources for youth is available in the variety of health resources are available on the [DCF Health Advocate Unit webpage](#).

Access to health care requires that a youth is provided with the knowledge of how and when to contact, and the contact information of, their health care providers and health insurance (health, dental, prescription coverage) company. The DCF Health Advocate can be a resource in determining how to contact insurance companies.

Transitioning to Adult Health Care Providers for Youth Age 18 and Older

This responsibility includes ensuring youth who turn age 18 continue to have providers. DCF should determine prior to a youth turning age 18 if the youth will need to transition from a pediatric provider to an adult provider, i.e. pediatricians, pediatric dentists, etc. may as a provide not service patients beyond age 17. If the provider will not serve a youth beyond age 17 the Social Worker should consult with or schedule an appointment with the identified provider to identify and plan for the youth's transition to a new provider, ex: from their pediatrician to an adult primary care provider (PCP). A partial, but not inclusive, list of areas to discuss to ensure continuity of care include:

- Identifying a new medical provider and transitioning medical care if needed.
- How to obtain their medical records
- Identifying on-going medical conditions
- Obtaining medication and medical supplies until new medical care is established.
- Transitioning to adult specialty medical care if needed.

As cognitively able to, the youth should participate in this process to support their health literacy education.

Youth Enrolling/Attending in College

Many colleges/universities offer student health plans for purchase and most require that proof of insurance be provided through their financial portal to prevent a youth being charged for the school's plan. This is done prior to the onset of each academic year.

- **In State** college students should opt out of the coverage and provide proof of their existing coverage. These youth have HUSKY insurance which will cover their health care needs.
- **Out of State** college students may be better covered if they opt into their school's health plan as HUSKY may not be accepted by some out of state providers. The determination of if the school's health insurance plan should be purchased should be made with the consultation of the DCF Health Advocate. The Health Advocate can assess in determining the best health insurance coverage for their youth prior to the youth leaving Connecticut.

Medical Self-Advocacy

The skill to self-advocate for medical care is necessary to empowering transitional youth to feel respected and confident when navigating their personal medical care in the community.

- Everyone has the right to access care
- Everyone has the right to quality care.
- Everyone has the right to seek and obtain care without judgement.
- Everyone has the right to privacy in their health care.

For youth to effectively self-advocate health care professionals and DCF staff must partner to prepare them in learning how to self-advocate prior to transitioning from DCF. Social Workers

should ensure that youth are provided with the resources for future needs. This includes identifying a "safety-net" for medical care and adults who can ensure they are able to obtain needed medical care and are supported in the process of self-advocacy. Youth should be provided with the contact information (names, phone numbers, websites, etc.) of providers, community agencies, and caring adults who can provide the resources, safety net, and support of self-advocacy as needed. Social Workers and health care providers should communicate with the youth, as age/cognitively appropriate, to support the youth in the gaining the knowledge and confidence to understand their health needs, health care, and be empowered to make confident decisions. Literature such as pamphlets may support this; literature provided must be consistent with the American Academy of Pediatrics (AAP), American Dental Association (ADA), American Academy of Ophthalmology (AAO) or American Ophthalmological Society (AOS), and the Center of Disease Control and Prevention (CDC). Youth should be encouraged to invest in their continuing care. Empowering a youth to feel confident in asking questions, and trust the communication with the health care provider, will be better able to maintain a healthy self-care outlook and continuity of health care.

Consent to Health Issues

Please refer to DCF's Policy and the Health Care Standards and Practice Guide regarding consent related to health care, release of records, etc.

Other Resources for Health Literacy and Health Advocacy

The DCF Health Advocates are available in each office to support the health care needs of our youth and assist Social Workers.

DCF has partnered with the Office of the Health Care Advocate (OHA) to assist families to access and appropriately utilize available health insurance plans to pay for health care services. OHA will assist families to resolve barriers to accessing health care services by helping to:

- Resolve questions about private insurance plan benefits
- Filing appeals on behalf of the family for services that have been denied by the private insurer.

For youth with private insurance the DCF Health Advocate is available to assist in referrals to OHA.

Resources

DCF Resources

Practice Guides:

[DCF Health Care Standards and Practice Guide for Youth in Care](#)

DCF Health Policies and Forms:

Policy:

[Policy 21-5 Health and Wellness](#)

Forms:

[Form DCF-741HS Health Summary](#)

[Form DCF-742 Report of Health Care Visit](#)

[Form DCF-2147 Medical Questionnaire/Request for Information](#)

Other Resources:

[Got Transition - A federally funded national resource center on Health Care Transition](#)