SPECIALIZED CHILD WELFARE SUBJECT MATTER

Certification of a Child's Complex Medical Needs

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Effective Date: January 2, 2019 (New)

Policy

A child with complex medical needs is one who has one or more of the following:

- a diagnosable, enduring, life-threatening condition;
- a medical condition that has resulted in substantial physical impairments;
- medically caused impediments to the performance of daily, age-appropriate activities at home, school or community; or
- a need for medically prescribed services as identified on the DCF-2101, "Certification of Child's Complex Medical Needs" form.

Those children with behavioral disorders, mental health needs, or intellectual disability who do not have one or more of the conditions listed above are not included in the category of children with complex medical needs.

Initial Certification of Complex Medical Needs

Prior to requesting a placement for a child with complex medical needs, the child's Social Worker shall obtain a signed DCF-2101 from the child's primary health care provider that identifies and certifies the child's complex medical status.

The Social Worker shall:

- first consult with the Regional Resource Group (RRG) nurse to make a preliminary determination that the child has complex medical needs;
- complete Section I of the DCF-2101;
- forward the DCF-2101 to the child's primary health care provider for identification and certification of the child's specific medical needs;
- upon receipt of the signed DCF-2101 from the primary health care provider, submit the form to the (RRG) nurse, Social Work Supervisor, and Program Supervisor for review and signatures;
- document the child's complex medical needs status in the electronic medical profile:
- document any consults and the completion of the DCF-2101 in the electronic case record medical narrative;
- notify the RRG Nurse of all hospital discharge planning meetings; and
- file the original DCF-2101 in the child's record, and send a copy of DCF-2101 to the RRG nurse.

Recertification of Complex Medical Needs

The child's medical status must be reviewed and re-certified by the child's primary health care provider every six (6) months.

To obtain re-certification, the worker shall follow the same procedures as for initial certification, submitting a new DCF-2101 for signatures.

To remove a child from medically complex status the Social Worker must submit the DCF-2101 to the child's primary health provider for identification that the child currently requires none of the care listed on the form.

DCF 2101

Review of the The most recent DCF-2101 shall be reviewed at each six-month Administrative Case Review (ACR).

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Role of the Regional Resource Group (RRG) Nurse

The Regional Resource Group (RRG) Nurse shall:

- review all Certification of a Child's Complex Medical Needs, Form DCF-2101, for appropriateness of medically complex certification and compliance with policy;
- assist the Social Worker in the completion of the DCF-2102, "Discharge Plan for a Child with Complex Medical Needs" form and review of all DCF-2102 forms for accuracy and completeness of medical information and compliance with policy:
- review all Medical Alerts, Form DCF-741 for accuracy and completeness;
- participate in hospital discharge planning meetings for medically complex children;
- participate with FASU, the area office social worker, and the social work supervisor in providing medical consultation during the placement of medically complex children;
- maintain a log or database of all medically complex children known to the RRG and update regularly with current medical information;
- review results of any medical information provided by the social workers on medically complex children and assist in ensuring medical follow up as needed; and
- document consults, assessments, treatment services and recommendations in the electronic case record, medical narrative.

Case Review (ACR)

Administrative The RRG nurse shall attend the Administrative Case Review (ACR) in the following situations:

- when the child's Social Worker or Social Work Supervisor has determined that the child's unique needs require the ARG nurse's special expertise; or
- when the RRG nurse has provided assessment services to the child or family within the six (6) months prior to the ACR.

Connecticut Department of Children and Families

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