

HEALTH SERVICES FOR THE CHILD AND YOUTH

Policy no.: 3.21

Effective Date: March 2007

Date Revised: June 30, 2011; April 16, 2015; February 6, 2017

Policy Cross References: Medical Consent

Legislative References:

PURPOSE: To outline the medical, dental and vision care services that children and youth in the care or custody of a manager are eligible for and to identify a social worker's responsibility in ensuring children and youth have their health care needs addressed.

POLICY:

1. A social worker shall ensure that children and youth in the care or custody of a manager have access to timely vision, dental and health care.

PROCEDURES:

1. The social worker shall advise foster parents and residential Service Providers that should a child or youth in the care or custody of a manager become ill, he or she should be taken to the family doctor or the nearest medical facility. Please refer to the *Medical Consent* policy for direction regarding consent for medical treatment.

Health Coverage

2. Children and youth in the care or custody of a manager are entitled to complete medical, dental and vision coverage provided through:
 - a) Medical Care Plan (MCP);
 - b) Newfoundland and Labrador Prescription Drug Program (NLPDP); and
 - c) Children, Seniors and Social Development (CSSD) direct payment for service.
3. Where a child or youth has not been previously registered with MCP and/or NLPDP the social worker shall make an application on the child or youth's behalf.
4. Where a child or youth has previously been registered with MCP and/or NLPDP, the social worker shall ensure the child or youth's address is updated. When completing forms the social worker shall ensure his or her name and contact information are provided.
5. When making application to the NLPDP the social worker shall use the *NLPDP Eligibility*

Confirmation form. All forms associated with MCP can be accessed online at: <http://www.health.gov.nl.ca/health/forms/index.html#3>.

6. The MCP card shall be provided to the foster parent or residential Service Provider and shall accompany the child or youth if his or her living arrangement changes. A copy shall be placed on the child or youth's file.
7. If a child or youth is placed for adoption, please refer to the *Adoption Policy and Procedures Manual (June 30, 2014)* for further direction relating to MCP and NLPDP.
8. Prescription medication, special items or equipment to meet an identified medical or special need if these costs are not covered by another external source (e.g. MCP, NLPDP, the Department of Health and Community Services or a Regional Health Authority program, etc.) may be approved as follows:
 - a) up to a maximum of \$250 per year by a social worker;
 - b) up to a maximum of \$500 per year by a supervisor;
 - c) up to \$2500 per year by a zone manager; or
 - d) the Regional Director (RD) may approve special items or equipment that exceeds the cost of \$2500 per year.

Immunizations

9. The social worker shall ensure that all infants and pre-school children are referred to the community health nurse in their area. Contact information for the Regional Health Authorities can be accessed online at:
http://www.health.gov.nl.ca/health/findhealthservices/in_your_community.html#contact
10. If a child moves to a new placement while in the care or custody of a manager or returns home, the social worker shall notify the community health nurse of the new address.
11. The social worker shall obtain a child's immunization record where available and ensure that it is updated and accompanies the child if his or her living arrangement changes or the child returns home. If the parent is unable to provide a copy of the child's immunization record, the social worker shall request a copy from the Regional Health Authority where the child resides. A copy of the record shall be placed on the child's file. Contact information to obtain an immunization record can be found at:
<http://www.health.gov.nl.ca/health/publichealth/cdc/immunizations.html>
12. The social worker shall refer to the ***Consents: Medical Consent*** policy for information on when they may provide consent for medical treatment, including immunizations.

Dental Care

13. A social worker shall ensure that a child or youth in the care or custody of a manager receives at minimum an annual dental checkup and any necessary follow up (e.g. fillings, extractions, etc.) is completed.
14. The social worker or foster parent/residential staff person should confirm with the child or youth's dental office any eligibility for the coverage of dental services through one of the Provincial Government's Dental Health Plans:
 - a) Children's Dental Health Program through the Department of Health and Community Services- all children 12 and under are eligible for certain dental services through this program. Refer to the program site for current services: http://www.health.gov.nl.ca/health/dentalservices/general_info.html; or
 - b) NLPDP- children/youth aged 13 – 17 years, who are eligible for prescription drug coverage may also be eligible for some basic dental coverage.
15. Where dental services are not covered by another program or a private insurance (e.g. a child has coverage through a parents insurance plan) the following may be approved by a social worker:
 - a) an examination and cleaning every 12 months;
 - b) routine fillings, extractions and root canals; and
 - c) emergency examinations and treatment.
16. Where it is recommended by an orthodontist, a manager may approve braces for a child or youth where the plan is for the child or youth to remain in care for the duration that the braces will be required.

Vision Care

17. A social worker shall ensure that a child or youth in the care or custody of a manager receives at minimum an annual eye exam and that any necessary follow up is completed.
18. Vision care includes eye examinations, prescription glasses or contact lenses, repairs to prescription glasses as well as replacement glasses when glasses cannot be repaired. A supervisor may approve the following services:
 - a) eye examination – up to a maximum of \$70;
 - b) glasses or contacts – \$300.00; and
 - c) the cost of repairs for damaged glasses not exceeding the amount to purchase replacement glasses.
19. Where it is determined that prescription glasses will cost more than the guidelines listed above (e.g., child/youth requires special lenses), the cost may be approved by a zone manager if the increased cost is due to a condition identified by an Eye Care Professional

(e.g., optometrist).

20. The social worker shall inform the foster parent or the residential Service Provider of the cost guidelines and efforts shall be made to receive the service at these rates. In an area where the normal rate for these services exceeds the guidelines above, extra funding may be approved by the RD.

Other Health Services

21. The social worker, in consultation with other members of the *In Care Planning Team*, shall consider any other services the child or youth may require (e.g., Occupational Therapy, counselling, etc.). If services are required, the child or youth shall be referred to community services or those offered by a Regional Health Authority where available. When these services are not available or are not considered sufficient to meet the child or youth's needs, funding may be approved for private services for children and youth in care placed in Level 1, 2 or 3 placements. These services can be approved as follows:
 - a) supervisor up to \$300 per month;
 - b) zone manager up to \$400 per month (this includes the \$300 that the supervisor can approve); and
 - c) ADM-exceptional circumstances in excess of \$400 per month.

EXCEPTIONS: None

RELEVANT DOCUMENTS:

- *NLPDP Eligibility Confirmation* form