

Complex Youth Care Assessment Protocol

UNIVERSITY OF IOWA

OVERVIEW

Youth receiving Child Welfare services and supports experience higher rates of adverse events than other youth, which increases their risk of having complex medical needs, both behavioral and non-behavioral. For youth that have complex medical care needs, addressing these needs is a part of successful next steps for youth, either to re-integrate with their family or thrive in an alternate living situation.

HHS has partnered with the University of Iowa (UI) to complete Complex Youth Care Assessments at their Complex Care Clinic for Youth (CCCY). HHS staff, caregivers, and/or parents will provide information about concerns and past medical care for the youth. UI CCCY will identify and arrange appropriate medical assessments for the youth and provide assessment information to the youth and their important adults, including recommendations for ongoing services.

You may refer a youth for any of the following reasons:

- Unclear health status at intake
- Mood or anxiety symptoms
- Disruptive behavior symptoms
- Unusual or odd behaviors present over time (not on an isolated basis)
- Problems with eating or growth
- Concerns for harm to self or harm to others on a chronic basis
- Poor adaptation to living situation changes occurring during HHS involvement.
- Poor school academic or behavioral performance

REFERRAL PROCESS

1. Worker or Supervisor will staff the case with their Social Work Administrator (SWA) and Managed Care Organization (MCO) coordinator.
2. SWA will approve the referral form completion and submission.
3. Referral form is filled out and sent by the worker or supervisor to the centralized email inbox.
4. Helpdesk staff will manage the inbox and send a prioritization list as well as the referral forms on to University of Iowa
5. University of Iowa will review the referral and determine acceptance or denial.
6. Information regarding acceptance or denial of the referral will be sent to the Helpdesk, including recommendations for other community services and supports if referral is denied.

7. Helpdesk will notify field staff if the referral was accepted or denied.
8. If youth is accepted, HHS staff will facilitate completion and submission of supporting documents and signing of releases to include an intake packet from University of Iowa.
9. SWCM will help to ensure transportation to the assessment is set up for the youth/child.
10. Once the assessment is complete, a staffing will take place with the family, youth, HHS, & MCO to summarize the care plan.

ELIGIBILITY EXAMPLES

- A youth experiencing instability in their placement (ie. moved 5+ times in one year). Assessment may help identify health needs which will help to guide their care plan.
- A youth prescribed multiple psychotropic medications with inconsistency in their diagnoses.
- Caregivers experiencing a holistic change in a youth's mental health and behavior where current services seem to be ineffective and placement is being compromised.
- A youth is being repeatedly hospitalized which is not meeting the youth or family's need for services.
- A low IQ youth experiencing recurrent and/or changes in mental and physical health presentation and presenting a risk to their current placement.
- A youth that displays atypical behaviors and current services are not addressing the core issues.
- A youth's care team does not share a clear understanding of services needed for the youth and are also unclear on what the underlying factors are in causing the behaviors.