

# STEPS FOR QUALIFIED RESIDENTIAL TREATMENT PROGRAM DETERMINATION AND PLACEMENT

#### STEPS FOR QRTP DETERMINATION AND PLACEMENT

## 1. Complete TOP Assessment for the child (CR, CM, Clinical Scales)

The TOP is required for children over 12 who are being placed in out of home care. Completion of the TOP will assist in determining if a QRTP is needed or if another less restrictive setting is more appropriate. The initial TOP activities are completed by the assigned worker. Once the assigned worker has determined the Licensed Practitioner of the Healing Arts (LPHA) who will complete the QRTP Admission Clinical Review Form, the worker will need to invite the LPHA as a rater so they can proceed with the assessment.

Link to TOP protocol: <a href="https://dhs.iowa.gov/sites/default/files/lowa\_TOP\_Protocol\_1.">https://dhs.iowa.gov/sites/default/files/lowa\_TOP\_Protocol\_1.</a>
<a href="pdf?070120201510">pdf?070120201510</a>

Link to TOP system: <a href="https://www.wellnesscheck.net/cw/login">https://www.wellnesscheck.net/cw/login</a>

#### 2. Set up Admission Clinical Review Form with an LPHA

Admission Clinical Review Form is two part - administration of the TOP and the clinical write up. A template has been created for the assigned worker to share with the LPHA who is completing the assessment. More information on the intent, the clinician requirements, and the write-up are below:

- Administration of the TOP (must use an age-appropriate, evidence-based, validated, and functional assessment tool to assess the child's strengths and needs).
- Clinical write-up that explains the following: The assessment shall determine if family members or another appropriate placement can meet the child's needs, consistent with the child's short and long-term goals, in the least restrictive setting consistent with the child's permanency plan. The assessment must also document why having the child/youth live with a foster family or one of the other acceptable non-family foster home settings cannot meet their needs and why a QRTP is the most effective and appropriate level of care for the child/youth. Note, a lack of sufficient foster families in not an allowable reason. The assessment shall document the family and permanency team's placement preference that acknowledges the importance of keeping siblings together and, if their preference is different from that of the LPHA's, the reason why the preferences of the child and the team are not recommended. Finally, the assessment must develop a list of child-specific short- and long-term mental and behavioral health goals. This assessment is a Medicaid-billable service so LPHA can bill Medicaid directly for payment.
- The clinician is a qualified individual meeting the following: In Iowa, an LPHA will need

to complete the clinical review. Licensed Practitioner of the Healing Arts (LPHA) means a practitioner such as a physician (M.D. or D.O.), a physician assistant (PA), an advanced registered nurse practitioner (ARNP), a psychologist, a social worker (LMSW or LISW), a marital and family therapist (LMFT), or a mental health counselor (LMHC) who is licensed by the applicable state authority for that profession. See Iowa Administrative Code 441.78.12(1).

Admission Clinical Review Form can be completed by an LPHA that has an existing relationship with the child (preferred). If this is not possible, shelter care providers in Iowa have identified clinical staff that will be available to complete the Admission Clinical Review Form, regardless if the child is placed in the shelter or not. Finally, it may be allowable for the QRTP provider themselves to complete the Admission Clinical Review Form after the child is placed.

# 3. Observe required timeframe

The Admission Clinical Review Form, including TOP, has to be completed within 30 days of the placement of the child in the QRTP (either before or after, but must be within 30 days). If it is being completed by QRTP provider after placement, it should occur within the first 14 days of placement to ensure timeliness.

# 4. Review results of Admission Clinical Review Form and secure placement, if applicable

If completing prior to placement in QRTP: Once the clinician is finished with the Admission Clinical Review Form, and QRTP is the recommended level of care, continue with normal process of securing a court order and referring child to local providers in your service area. Complete TOP Level of Need Tool to assist in identifying provider best matched to your child's specific needs. Attach QRTP Admission Clinical Review Form to referral packet.

If completing Admission Clinical Review Form after placement in QRTP: Ensure provider is aware they will need to be completing, preferably within the first 14 days of placement.

#### Link to Referral Packet:

https://dhs.iowa.gov/sites/default/files/470-5608\_fillable.doc

## 5. Upload as exhibit to court for Judicial Review

Upon receipt of the completed Admission Clinical Review Form completed by the LPHA, follow local protocols for uploading this information (include template, clinical write up and TOP results) as an exhibit to the court.

#### 6. Participate in required Judicial Review

Per federal guidelines, the judge will need to review these documents and approve placement within 60 days of child's placement in a QRTP. In Iowa, at the time of the court order for QRTP being issued, a motion will be made by DHS/County Attorney asking the judge to administratively review the Admission Clinical Review Form within 60 days. This will likely occur via a paper review by the judge. The judge will issue an order after this paper review approving of the placement. Ensure this court order is maintained electronically in the IVE module of JARVIS, as well as a paper copy in the child's hard-copy file.