



New Jersey Department of Children and Families Policy Manual

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| Issuance: | 1300 | Pre-Placement and Re-Placement Assessment | |

Purpose **7-28-2008**

The purpose of this policy is to state when, where, and by whom a pre-placement or re-placement assessment (health) is completed for a child entering placement.

Authority **7-28-2008**

N.J.S.A. 9:6-8.30c, Action by the division upon emergency removal

N.J.S.A. 30:4C-27, Temporary removal with consent

N.J.A.C. 10:122D-2.5, Health care services

N.J.A.C. 10:129-5.6(a), Medical evaluation and treatment

Definitions **7-28-2008**

“Child Health Unit (CHU)” means a unit sited within a CP&P Local Office, staffed with nurses and administrative support personnel, responsible for ensuring the delivery of coordinated health care for children in out-of-home placement and providing consultative and care coordination services, as needed, for children residing in their own homes. Child Health Units develop health care plans in consultation with Workers.

“Medicaid” means a state and federally supported medical assistance program designed to make payments to participating providers for qualifying medical services, supplies, equipment, and medicines rendered to eligible individuals.

“Pre-placement Assessment” means a general health assessment provided to a child upon out-of-home placement. The purposes of the assessment are to evaluate, document, and address the child's immediate health needs and to ensure that he or she is free from contagion.

“Regional Diagnostic and Treatment Center” means centers legislatively created to evaluate and treat child abuse and neglect. The centers provide training and consultative services and emergency telephone consultation. They are a source of research and training for medical and mental health personnel dedicated to the identification and treatment of child abuse and neglect.

“Re-placement Assessment” means a health assessment which may occur when a child moves from one out-of-home placement to another.

Relevant NJS Windows 7-28-2008

- Document the pre-placement assessment in NJS using the Medical Profile Window.

Related Policy and Forms 7-28-2008

CP&P Form [11-3](#), Pre-Placement/Re-Placement Assessment

Pre-Placement Assessment (Health)

When to Complete a Pre-Placement Assessment 7-28-2008

A pre-placement assessment (health) is required for all children initially entering resource care or any out-of-home placement, i.e., beginning a placement episode in accordance with [CP&P-IV-A-9-100](#). See N.J.A.C. 10:122D-2.5(b). The only exception is when children enter placement from a medical setting, e.g., a newborn going to resource care.

This policy applies to all CP&P staff, including SPRU Workers.

| PLACEMENT FROM: | PLACEMENT TO: | PRE-PLACEMENT ASSESSMENT NEEDED? |
|---|---------------|----------------------------------|
| | | |
| Home | Any placement | Yes |
| Hospital | Any Placement | No |
| Shelter/Detention (if not placed by CP&P) | Any Placement | Yes |

The Purpose of the Pre-Placement Assessment 7-28-2008

The purpose of the assessment is to evaluate and document whether a child entering care appears free of:

- Acute health issues;

- Contagion;
- Injuries and/or bruising requiring immediate medical attention.

The assessment also provides information about the child's health care needs that is to be shared with the child's substitute caregiver, Worker, and primary care doctor.

When, at the time of removal, a child's injuries appear to meet the criteria for referral to a Regional Diagnostic and Treatment Center, it is the Local Office staff's responsibility to consult with its RDTC staff for guidance on where to seek treatment for the child. [CP&P-II-C-2-600](#), Referral Guidelines for Regional Diagnostic and Treatment Centers. However, do not, under any circumstances, delay treatment pending consultation with the RDTC staff.

When a Pre-Placement Assessment Occurs 7-28-2008

The assessment occurs at the time of a child's removal, prior to placement. In limited circumstances, the pre-placement assessment may occur no more than 24 hours after placement when all of the following criteria are met at the time of removal:

- The child does not present with a health issue requiring immediate medical attention;
- CP&P is unable to obtain an appointment with a non-emergency room health care professional prior to placement;
- The Local Office Manager (LOM) gives approval for the delay
For placements after-hours, the SPRU Supervisor requests approval from the LOM.

The Worker is responsible for arranging for, and/or transporting the child to, the pre-placement assessment. This is not required, nor expected, of the substitute caregiver.

Where a Pre-Placement Assessment Occurs 7-28-2008

The pre-placement assessment occurs in an environment that limits a child's exposure to further trauma, with the following choices:

- First Choice - the child's own health care professional;
- Second Choice - Child Health Unit Nurse in the CP&P Local Office;
- Third Choice - Specially designated health care professionals paid an Enhanced Medicaid rate for pre-placement assessments, including pediatricians or practices such as Federally Qualified Health Centers;

- Fourth Choice - In limited circumstances, hospital emergency room. See Use of Emergency Room for a Pre-Placement Assessment.

Use of Emergency Room for a Pre-Placement Assessment 7-28-2008

A Worker uses a hospital emergency room for a pre-placement assessment only if one of the following criteria is met at the time of removal:

- The child is already in an emergency room when CP&P is contacted to investigate an allegation of abuse/neglect;
- A health care professional performing a pre-placement assessment stops the assessment and directs the Worker to take the child to an emergency room for immediate medical treatment of a health issue identified during the assessment;
- The child presents with a medical condition which requires that the child be examined at an emergency room (e.g., the Worker believes the child has a broken bone).

A SPRU Worker, in addition to the criteria above, uses an emergency room for a pre-placement assessment when both of the following criteria are present:

- The SPRU Worker is unable to obtain an appointment with a non-emergency room health care professional prior to, or within 24 hours of the child's placement;
- The SPRU Supervisor has obtained prior approval from the LOM to use an emergency room.

Payment 7-28-2008

In addition to the Child Health Unit Nurse, DCF utilizes a range of health care professionals to perform the pre-placement assessment, including:

- Community health care professionals recruited in partnership with the Division of Medical and Health Services (Medicaid) for its Enhanced Rate program;
- Contracts between CP&P Area and/or Local Offices and community health care professionals;
- Contracts between DCF and community health care professionals
Pre-placement assessments performed during regular business hours by Child Health Unit Nurses employed by FXB-UMDNJ are covered by their existing contract. No additional payment is necessary.

Workers advise the health care professional that they are requesting a pre-placement assessment when they schedule the appointment. Medicaid pays a higher

reimbursement rate for pre-placement assessments performed by community medical health care professionals participating in the Enhanced Rate Program.

With few exceptions, children receiving a pre-placement assessment are eligible for Medicaid. See [CP&P-V-A-2-200](#). The CP&P Medicaid Liaison within the Local Office generates a Medicaid number for the child at the time of removal or the following business day.

When a health care professional participating in the Medicaid Enhanced Rate Program performs a pre-placement assessment for a child who does not yet have a CP&P-generated Medicaid number, the Local Office's Medicaid Liaison is responsible to contact the health care professional immediately after the Medicaid number is generated and supply the health care professional with the child's Medicaid number. An example of this situation is when a child is removed after hours and the Medicaid service line is entered into NJ SPIRIT the following business day.

Medicaid does not pay for pre-placement assessments of children seen by health care professionals contracted with CP&P or DCF to provide this service. When these health care providers are “one-time” non-contracted providers, they are paid with the CP&P Form [K-100](#), Client Service Invoice. If the provider is a “contracted” provider, he or she submits charges for services on his or her monthly CP&P Form [K-100](#), Billing Spreadsheet, to the appropriate Local Office via the [“Secure Billing process”](#).

When a child is seen for a pre-placement assessment and the decision is subsequently made not to place the child, it is CP&P' responsibility to pay the health care professional for services rendered, except for the Child Health Unit Nurse.

Documentation of the Pre-Placement Assessment 7-28-2008

- Provide the health care professional with the CP&P Form [11-3](#), Pre-placement/Re-placement Assessment, for completion.
- Document the pre-placement assessment in New Jersey SPIRIT using the Medical Profile Window.

Follow-Up Care (including HIV Testing) When Risk Factors Are Present 7-28-2008

If the health care professional performing the pre-placement assessment identifies a medical problem, the Worker must initiate or arrange follow-up treatment within the time frame recommended by the health care professional.

Gather collateral medical documentation, as necessary. If the child has a serious medical condition, consult the Child Health Unit Nurse and the Regional Homes Liaison for assistance in determining the appropriate type of out-of-home placement for the child. See [CP&P-IV-B-2-100](#), Resource Home Selection.

Ensure any child, regardless of age, is tested for HIV if any of the risk factors listed in [CP&P-V-A-1-1000](#) exist. Contact the Child Health Unit Nurse with any questions regarding the decision to test a child.

Re-Placement Assessment (Health)

7-28-2008

When a child moves from one placement to another, the decision to seek a re-placement assessment or other medical care for that child is made on a case-by-case basis by consultation among the Worker, the Nurse, and their Supervisors, as needed. Some factors to consider in determining whether a re-placement assessment or other medical care is warranted include:

- The reason for the change in placement;
- Whether the change in placement is a planned or unplanned event;
- The child's age and ability to communicate with his or her Worker;
- Whether the new placement requires medical clearance prior to placement;
- Whether the child has an active health condition at the time of the change in placement. For example, the child has a fever or other issue that requires immediate medical attention.

When a child whose injuries appear to meet the criteria for referral to a Regional Diagnostic and Treatment Center is being re-placed, the Local Office staff must consult with its RDTC staff for guidance on where to seek treatment for the child. See [CP&P-II-C-2-600](#), Referral Guidelines for Regional Diagnostic and Treatment Centers.