

Chapter 3

PLACEMENT IN SKILLED NURSING FACILITIES

3-1. Purpose. This chapter describes the Department's policies and procedures for the placement and oversight of children in the custody of the Department in skilled nursing facilities. It is the policy of the Department of Children and Families that medically complex and medically fragile children are placed in the least restrictive, most family-like, and most nurturing environment that is medically appropriate, together with the necessary supports and services to help them remain in the community. It is also the policy of the Department of Children and Families that when a child is in need of placement in a skilled nursing facility on a temporary basis, the Department, in collaboration with our agency partners at AHCA, DOH and APD, will continually work to transition the child to a less restrictive, medically appropriate environment. The Department's goal is to preserve and strengthen families by enhancing their capacity to care for their medically complex and medically fragile children's needs.

3-2. Scope. The policies and procedures within this operating procedure apply to all staff of the Department, community-based care (CBC) lead agencies and subcontracted providers involved with medically complex and medically fragile children who reside in skilled nursing facilities or who are being considered for placement in skilled nursing facilities. This includes child protective investigators, case managers, Children's Legal Services attorneys, and Department program specialists. Contract providers must be governed by the terms of the contract.

3-3. Requirements to Request Approval.

a. All decisions to place children in skilled nursing facilities will require a prior case review by the Office of the Assistant Secretary of Operations.

b. When a child has been identified as eligible for placement in a skilled nursing facility by the Children's Multidisciplinary Team (CMAT), the region and CBC staff must evaluate all of the child's information to determine the placement that is in the child's best interest. The following placements must be considered prior to seeking approval for placement in a skilled nursing facility:

- (1) Medical Foster Care with or without wraparound services.
- (2) Traditional Foster Care with wraparound services.
- (3) Relative or Nonrelative Placement with wraparound services.
- (4) Group Home with or without wraparound services.

c. Prior to seeking approval for placement in a skilled nursing facility, region and CBC staff shall discuss the case with the Care Coordinator assigned to the child by the managed care entity in which the child is enrolled or, if the child is a fee-for-service recipient, with the Care Coordinator assigned to fee-for-service recipients. The purpose of this discussion is to ensure that region and CBC staff fully consider and are knowledgeable regarding all placement alternatives and all of the available community resources, medical services, and supports the child would be eligible for if placed in the community.

d. The request for approval for placement of a child in a skilled nursing facility shall include the following information:

- (1) Name of the child, date of birth, FSFN identifying number.
- (2) Judicial status of the child.

- (3) Skilled nursing facility identified for placement.
- (4) CBC Case Manager and the case manager's contact information.
- (5) Children's Medical Services Case Manager and the case manager's contact information.
- (6) Assigned Care Coordinator and the care coordinator's contact information.
- (7) CMAT documentation listing the child as eligible for Skilled Nursing Facility placement.
- (8) CMAT documentation regarding eligibility for Medical Foster Care.
- (9) Description of the medical care required.
- (10) A statement regarding whether the Care Coordinator assigned to the managed care entity participated in the CMAT staffing.
- (11) Documentation of the region/CBC's discussion with the Care Coordinator regarding placement alternatives, community resources, medical services, and supports available for the child if placed in the community.
- (12) A statement from the child's treating physician regarding whether it is medically appropriate to place the child in a less restrictive setting.
- (13) Documentation of efforts to place the child in a less restrictive environment, such as those listed above in paragraph 3-3b above.
- (14) Statement regarding the opinion of the parent or legal guardian, when they are able and willing to participate in placement planning for the child. If a statement cannot be obtained, a statement regarding the efforts made to include them in the discussion is required.
- (15) Statement regarding the status of the child's relationship with the child's biological family.
- (16) Statement regarding the opinion of the Attorney ad Litem for the Child. If there is no Attorney ad Litem, a description of the efforts to assign an attorney to the child.
- (17) Statement regarding the opinion of the Guardian ad Litem.
- (18) Permanency Plan for the child.
- (19) List of key contacts from each agency (DCF, CBC, AHCA, DOH, CMS, APD, etc.) working on this child's case.
- (20) Transition Plan to move the child to a less restrictive environment within 180 days.

3-4. Approval by the Assistant Secretary for Operations.

a. Any placement of a child into a skilled nursing facility requires the approval of the Assistant Secretary for Operations. Approval will not be granted without compelling evidence showing that the child is in need of the skilled nursing facility placement.

b. If there is compelling evidence showing that the child is in need of placement in a skilled nursing facility, the approval will be granted, but only temporarily. The approval will only be granted for 180 days.

c. Once approval is granted for the 180 day placement in the skilled nursing facility, the CBC case manager shall submit monthly updates to the Office of the Assistant Secretary for Operations regarding the child's transition to a less restrictive environment in the community.

d. Any request for approval for placement in a skilled nursing facility for an additional 180-day period shall comply with the requirements applicable to the initial request for approval.

3-5. Monthly Review of Placements. The placement status of all children placed in skilled nursing facilities will be reviewed monthly. The following information shall be provided to the Office of the Assistant Secretary for Operations every month by the region/CBC:

a. Age of the child and length of time in the skilled nursing facility.

b. Name of Managed Care Plan and summary of updated discussion with the Care Coordinator regarding placement options and Medicaid services the child would be eligible for in the community. The CBC case manager shall communicate with the child's assigned Care Coordinator at least monthly while the child resides in a skilled nursing facility.

c. Educational information for the child.

d. Efforts over the last 30 days to transition the child to a less restrictive environment.

e. Efforts over the last 30 days to reach permanency for the child.

f. Updated Transition Plan.

