




Policy and Procedures

<u>Department Name</u>		
Quality Management		
<u>CHAPTER:</u>	<u>SUBJECT:</u> Use of Professional Opinions and Resolving Opposing Medical Opinions	<u>POLICY NUMBER:</u> QM-035
<u>APPROVAL:</u> 	<u>EFFECTIVE DATE:</u> 4-9-2021	<u>REPLACES (policy # and date):</u> QM-035 August 17, 2018

- I. **PURPOSE:** To provide guidance regarding the necessary and appropriate consideration of clinical assessments and professional recommendations submitted to Child Welfare Case Managers regarding their families. It details procedures for documentation of professional opinions, documentation of the safety implications raised in these reports, and resolution process to work out differences of opinion.

- II. **REVIEW HISTORY:** Updating policy, QM-035, approved August 17, 2018.

- III. **CONTACT:** Quality Management Department.

- IV. **PERSONS AFFECTED:** Children’s Network of Southwest Florida Staff and contracted case management organizations.

- V. **POLICY:** It is the policy of the Children’s Network of Southwest Florida to assure that Child Welfare Professionals fully consider professional opinions from the local Child Protection Team and/or other medical or mental health professionals or document their rationale for not acting on these opinions and recommendations. It also provides a resolution process for opposing medical opinions.

- VI. **RATIONALE:** Describing actions needed to assure that all information provided from mental health or medical professionals is analyzed and appropriate actions are taken to assure the safety and well-being of children and their families.

- VII. **CROSS REFERENCES:** Department of Children and Families memos dated April 25, 2006 and October 12, 2006. CFOP 170-10 Chapter 2, Behavioral Health Care. Last update April 15, 2020.

http://centerforchildwelfare.fmhi.usf.edu/kb/DCF_Pol/CFOP_170/CFOP170_10-Ch2.pdf

- VIII. **PROCEDURES:** To ensure compliance with the intent of Florida Statute the following actions should be implemented:

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1. The Child Welfare Case Manager will document in Florida Safe Families Network (FSFN) the date and time that information is received from the professionals to whom the referral was made, detailing the specific information and recommendations provided. Any written documentation received from the professionals must be included in the case file.
2. The Child Welfare Case Manager will document in FSFN all follow-up activities that have been made regarding all recommendations provided by the medical or mental health professional. The Child Welfare Case Manager shall request written documentation of the progress of the medical or mental health service and such documentation shall be included in the case file.
3. In instances when differences of opinion between the Case Management agency and other professionals occur, the Child Welfare Case Manager will notify his/her immediate supervisor and a staffing/consultation will be coordinated with the Program Director. The results of this staffing/consultation must be documented in FSFN with a rationale of the reasons such recommendations were made.
4. Different assessments may result in different diagnoses. For example, a child admitted to a Baker Act Receiving Facility will be assessed at that point-in-time and it is likely that the clinician will not have access to previous evaluations. Therefore, the diagnosis may not be consistent with previous diagnoses. When this occurs, the child welfare professional should contact either the current therapist or the CBC Lead Agency Behavioral Health Coordinator for assistance in determining next steps.
5. In cases where a professional consensus cannot be reached by the outside professionals and the Case Management Agency then a second staffing/consultation will be conducted to include the COO or an appointed designee of the Children's Network. The results of this second staffing/consultation must be documented in FSFN with a rationale of the reasons such recommendations were made.