Statement of Consideration (SOC)

PPTL 22-08. The following comments were received in response to SOP 1.5.1 Consult for Clinical Services Youth and the Clinical Services Branch Consult Request Form drafts sent for field review. Thanks to those who reviewed and commented. Comments about typographical and grammatical errors are excluded; these errors have been corrected as appropriate

SOP 1.5.1

1. Comment: Suggestion to change the name of SOP 1.5.1 to "Consults for Clinical Services Youth"

Response: Change has been made.

2. Comment: Under the section of Statewide CRP Staff #5 – would it be possible to include Regional Permanency Branch Staff (FSOS/Specialist)? They are not on all the cases, but definitely we have a lot that end up needing calls, and not always made aware, or made aware very last minute as CRP does not include. I know the SOP mentions others as appropriate and so that may be one of the intentions in that wording.

Response: Change has been made.

3. Comment: There needs to be established timeframes between when a call is requested and when it's scheduled, giving priority to cases with 2 week notices, or for children sitting in detention or psychiatric hospitals because there's no placement. We have timeframes outlined in Policy for when regional office is required to consult specific cases, so it's not unrealistic to ask the same of our Central office.

Response: Specific timeframes for the call to be scheduled cannot be guaranteed due to Clinical Services Branch staff workloads. However, other timeframes were added to SOP.

4. Comment: The referral form has duplicate information that can be found with the attachment of the individual summary and the 886a. It creates more work for the staff, when the information is already available.

Response: Referral form has been revised and will be completed by regional placement coordinators.

- **5. Comment:** There are 4 gatekeepers that the Clinical Consult Form must go through before finally having a Clinical Consult scheduled. This seems like it would create delays given the number of people it would have to be approved by. Each has to review/ approve the consult and can ask for more info per the SOP.
 - o SRCA
 - o RPC
 - o CRP
 - Clinical Branch

Response: Regional Placement Coordinators (RPCs) will be the gatekeepers of this process. SOP has been revised to provide clarity.

6. Comment: This agency has worked to reduce red tape and any unnecessary paperwork for front line. Is there a way to support the Clinical Branch's objective without creating more paperwork for frontline?

Response: SOP has been revised. Referral form has been revised and will be completed by regional placement coordinators.

- **7. Comment:** There are no timeframes provided within the SOP.
 - When form is submitted to each gatekeeper, what's the timeframe to review?
 - If more info is requested of SSW, what's timeframe to provide response?
 - Once Clinical Branch has all info and approves, what's the timeframe to schedule a consult?

Response: See response #3.

8. Comment: What about EMERGENCY needs for Clinical Branch consultations?

Response: Emergency placement needs are not addressed by this SOP. This SOP pertains to consultation around clinical issues. Clinical Services Branch staff should be utilized for clinical consultations, not placement consultations.

9. Comment: How can regions avoid waitlists for true emergency situations?

Response: See response #8.

10. Comment: What would the Clinical Branch classify as an emergency?

Response: A clinical emergency would be one in which a youth is in need of mental or behavioral health services and there are barriers to obtaining those services.

11. Comment: RO staff should initiate this request with SRCA/ SRAA signing off and not SSW/ FSOS. The request form should be modified to align with this.

Response: See responses #4 and #6.

12. Comment: What is the process by which outside agencies (PCC/ PCP) will request consults with Clinical Branch?

Response: Outside agencies should discuss issues with the assigned SSW/FSOS who have case responsibility.

13. Comment: Who are gatekeepers for these requests?

Response: See response #5.

14. Comment: This should be included in this SOP as well if PCC/ PCP agency staff have the ability to request consults with the Clinical Branch.

Response: See response #12.

15. Comment: "I'm not sure I really see the point of the referral form since most of the data they are looking for is in the 886a already or is communicated via email"

Response: The intent of the form was to reduce emails requesting additional information. SOP and form have been revised. The form will be completed by regional placement coordinators.

16. Comment: "the calls with Central Office, aren't always useful anyway. Maybe the perm clinicians could help getting records, since the workers never seem to have them. The workers won't have time to fill out the form, then "we" (aka regional office/SRCA" will be scrambling around at the last minute looking for placement. "

Response: Clinical Services Branch consultations are not designed to resolve placement issues. Please see Legal Authority/Introduction

section of the SOP for areas in which Clinical Services Branch can be helpful.

17. Comment: the workers don't have time to fill this form out. They barely have time to complete a good/thorough 886. They don't have time to get all those records and if they do have time to request, it takes weeks to get them. The list that is being recommended is a huge list. By the time a DTP call is scheduled, we are way past the two week notice and are often in crisis. Most of the time what is suggested by CO has already been done"

Response: The form and SOP have been revised removing SSW/FSOS responsibility for completing the form. The form will be completed by regional placement coordinators. Submission of clinical documentation is necessary for a clinical consult. Please see response #16.

18. Comment: "the form is concerning. Not that it is a difficult form, it's just that workers won't do it, but rather call us in a panic and expect a magic wand to be waved"

Response: The form and SOP have been revised removing SSW/FSOS responsibility for completing the form. The form will be completed by regional placement coordinators.

19. Comment: "maybe we need more people in the Clinical Services Branch. They too seem like they are spread thin"

Response: With implementation of this SOP, Clinical Services Branch staff will be able to focus on providing consultation on clinical issues in a more timely fashion.