Child Safety
POLICY

Title: Child Related Costs – Medical
Policy No: CPD596-5

Policy Statement:
The Department of Communities (Child Safety Services) provides financial support for the care and protection of children and young people subject to statutory intervention, in accordance with the following requirements:

- for children in out-of-home care, reimbursement is for costs that are specific to the child’s individual needs; as recorded in the approved case plan, and are in excess of financial support provided by the allowances provided (including the fortnightly caring allowance, high support needs allowance and complex support needs allowance)
- for children residing at home, reimbursement is for costs that will enhance the child’s safety and wellbeing and minimise the need for more intrusive child protection intervention
- all other avenues of financial support have been explored, for example other government allowances and benefits
- expenditure is in accordance with appropriate financial delegations and standards
- all transactions are substantiated, and substantiating documentation (for example, invoices and receipts) is filed to ensure an audit trail
- all items purchased under this category belong to the child.

Principles:
- The safety, wellbeing and best interests of the child or young person are paramount.
- Carers have the right to support that will contribute towards ensuring a safe and caring environment in which the needs of children and young people will be met.
- The child or young person has a right to be placed in a care environment that best meets their needs.

Objectives:
To inform Child Safety Services staff of the eligibility criteria for use of the child related costs accounts detailed in this policy to support decision making and case planning.
Scope:

Child Related Costs may be provided for children and young people subject to statutory intervention under the Child Protection Act 1999. Eligibility for each account category is outlined below.

The following account categories are part of the Medical cost category:

- Medical – General (Account code: 54353)
- Medical – Child Health Passport (Account code: 54355)
- Medical – Specialist - Physical Health (Account code: 54347)
- Medical – Specialist - Mental Health (Account code: 54329)
- Medical – Hospital Services (Account code: 54338)
- Medical – Dental and Orthodontic (Account code: 54350)
- Medical – Substance Testing (Parents) (Account code: 54342)

Roles and Responsibilities:

The Child Safety Officer is responsible for responding to requests for support by a child or young person, their carer or their parents.

As part of the case planning process, the pre-approval of the financial delegate is required for any child related cost reimbursement or expenditure to proceed. Only these delegated officers, or above, where specified, can authorise the provision of child related costs for children and young people. This is obtained by submitting a Child Related Costs Approval Form to the Child Safety Service Centre Manager or the relevant financial delegate who can approve the child related costs.

In emergent circumstances, where a carer has had to seek urgent medical treatment at costs not covered within the allowances provided (including the fortnightly caring allowance and high support needs allowance or complex support needs allowance, where relevant), the Child Safety Service Centre Manager may approve this child related cost. In emergencies, the carer must access the services necessary to assist the child or young person according to the advice of a medical professional. Carers should be advised to contact with the Child Safety Service Centre as soon as possible.

The processing of approved child related costs expenditure or reimbursement is made by submitting the approved form with required payment documentation (for example, receipts and invoices) to a child safety service centre administrative officer who will process the payment or reimbursement according to the Financial Management Practice Manual (FMPM). Once processed, the form is placed on the client file.

Wherever practical, reimbursement of child related cost expenses should be processed when the accumulated total of the receipts is $50 in value or higher.

Carers must be advised by their Child Safety Officer that receipts for child related costs reimbursement should be submitted during the current financial year and therefore be less than 12 months old.

For young people subject to both child protection and youth justice orders, refer to the procedures for dual orders in the Child Safety Practice Manual.

Health Care Card

The carer’s and/or the child or young persons’ Health Care Card is to be utilised on all occasions where available. For further Health Care Card details, refer to the website:

Children and young people should access general practitioners for low level illness as an alternative to public health services. Public health services and bulk billing options for medical treatment are to be accessed as a first option.

Other sources of reimbursement (for example, the Medicare threshold, Pharmaceutical Benefits Scheme, Patient Travel Subsidy Scheme) must be accessed prior to the provision of financial support from the department. For further information please access the following web sites:


**Medical reimbursements and carer allowances**

The fortnightly caring allowance covers all general medical expenses such as:

- all costs incurred for consulting a general practitioner including the Medicare gap
- one-off specialist visits
- all one-off prescribed, and non/prescribed pharmaceuticals.

However, where a range of individual specialist visits have been recommended as part of the baseline health assessment related to the Child Health Passport, the carer pays for the first specialist visit and the remainder may be covered by child related costs.

Reimbursement of medical costs will not be provided to carers who are in receipt of the high support needs allowance or complex support needs allowance and it has been agreed that these types of costs are to be covered by the respective allowance.

Carers may obtain, at their own expense, private medical insurance for the child or young person in their care.

**Authority:**

*Child Protection Act 1999*

*Financial Accountability Act 2009*

**Delegations:**

The use of child related costs will be in accordance with departmental financial delegations and standards.
Cost items

1. **Medical – General (Account code: 54353)**

All one-off general practitioner and specialist visits (including the Medicare gap) and one-off prescription and non-prescription pharmaceuticals are covered in the fortnightly caring allowance (for example, a visit to the doctor and a subsequent prescription for antibiotics for a case of tonsillitis).

This account category is used for medical costs for on-going medical treatment, diagnostic tests, and pharmaceuticals not covered by the Pharmaceutical Benefits Scheme.

If the carer is in receipt of the high support needs allowance or complex support needs allowance, consideration should be given to whether the allowance is provided, wholly or in part, for these types of costs.

Examples of costs included in this account category include:
- where a child or young person requires ongoing visits to a general practitioner as part of an approved health plan
- where a young person who is living independently requires general (non-specialist) medical assessment and treatment
- diagnostic tests, as referred by a general practitioner or specialist, as part of ongoing medical treatment, including X-rays, scans, pathology tests, hearing and eye tests
- interstate ambulance costs
- extraordinary or on-going pharmaceutical expenses that are not covered through the Health Care Card such as:
  - non-prescribed medication and treatments for an ongoing medical condition as recommended by a medical practitioner
  - pharmaceuticals prescribed by a medical practitioner and not covered by the Pharmaceutical Benefits Scheme
  - vaccination and immunisation costs, where vaccinations are listed on the Australian Standard Vaccination Schedule, or for any vaccination or immunisation that is recommended in writing by a medical practitioner (the Australian Standard Vaccination Schedule is available online: [http://www.mydr.com.au/default.asp?Article=3271](http://www.mydr.com.au/default.asp?Article=3271))
- specialised meal supplements for a stabilised or permanent functional disability as determined by an approved case plan, unless these are covered by the high support needs allowance
- to be eligible for expenditure under this category, the treatment must be approved as part of a case plan and detailed in the child health needs assessment.

To be eligible for expenditure under this category, the child or young person must be subject to
- statutory intervention under the *Child Protection Act 1999* or
- an adoption care agreement or adoption consent or dispensation of consent.

2. **Medical – Child Health Passport (Account code: 54355)**

This account category is only to be used for costs associated with charges incurred with a health professional for the initial baseline health assessment related to the Child Health Passport. The full
costs associated with these assessments are covered through this category. For any subsequent medical costs, the costs are to be covered by either the allowances provided to the carer or through other account categories within the Child Related Costs – Medical cost category. To be eligible for expenditure under this account category, the child must have remained in out-of-home care for 30 days and be subject to:

- a child protection care agreement that has been extended beyond a 30 day period or
- an interim order granting custody to the chief executive or
- a child protection order granting custody or guardianship to the chief executive.

3. **Medical - Specialist - Physical Health (Account code: 54347)**

This category is to be used when a child or young person requires ongoing specialist assessment and/or treatment as part of ongoing medical treatment for physical health needs (for example, speech therapy, physiotherapy, or mobility aids) as recommended by a general practitioner, specialist or other qualified professional.

If the carer is in receipt of the high support needs allowance or complex support needs allowance, consideration should be given to whether the allowance is provided, wholly or in part, for these types of costs.

Mobility aids and equipment can include:

- optical equipment
- audio logical aids
- aids and equipment for a child or young person with a disability (for example, nebulisers, wheelchairs, incontinence aids, diabetes home tests).

In the first instance, services are to be sought from a practitioner who bulk bills and/or through the Medical Aids Subsidy Scheme (MASS), if applicable. MASS provides subsidised medical aids and equipment from an approved list for holders of the Health Care Card with a stabilised or permanent functional disability. Applications are made by a health professional following a needs assessment. For more information on MASS contact your local MASS service centre, health care professional/provider or community health centre or go to the MASS website at: [http://www.health.qld.gov.au/mass/default.asp](http://www.health.qld.gov.au/mass/default.asp)

The treatment must be approved as part of a case plan and detailed in the child strengths and needs assessment.

To be eligible for expenditure under this account category, the child or young person must be subject to:

- statutory intervention under the *Child Protection Act 1999* or
- an adoption care agreement or adoption consent or dispensation of consent.

4. **Medical - Specialist - Mental Health (Account code: 54329)**

This account category is to be used when a child or young person requires ongoing psychiatry or psychology specialist assessments and/or treatment.

If the carer is in receipt of the high support needs allowance or complex support needs allowance, consideration should be given to whether the allowance is provided, wholly or in part, for these types of costs.
The treatment must be approved as part of a case plan and detailed in the child strengths and needs assessment.

To be eligible for expenditure under this account category, the child or young person must be subject to:
- statutory intervention under the Child Protection Act 1999 or
- an adoption care agreement or adoption consent or dispensation of consent.

5. Medical - Hospital Services (Account code: 54338)

This account category is to be used when a child or young person requires hospital services. Unless hospital services are required in an emergency, hospital admission of a child or young person must be authorised by a general practitioner or a specialist.

The public hospital system must be accessed in the first instance. If admission as a public patient is not possible within the timeframe recommended in writing by the general practitioner or specialist, then the Child Safety Service Centre Manager may grant permission for the child or young person to access the private health system.

If the carer prefers, and chooses, to use a private or intermediate hospital when a public vacancy is available within the recommended timeframe, the carer will meet the additional costs.

With the exception of emergency treatment, treatment under this category must be detailed in the child health needs assessment and case plan.

To be eligible for expenditure under this account category, the child or young person must be subject to:
- statutory intervention under the Child Protection Act 1999 or
- an adoption care agreement or adoption consent or dispensation of consent.

6. Medical – Dental and Orthodontic (Account code: 54350)

This account category is to be used when a child or young person requires dental or orthodontic treatment and where access to public services is not available.

Dental treatment is not covered by the fortnightly caring allowance.

The child or young person’s carer should arrange for the child or young person to visit a dental hospital, school dental clinic, or a local dentist every six months.

The Federal Government provides the Teen Dental Plan for all children and young people aged 12 to 17 years, to help with dental costs. This plan contributes towards the cost of an annual dental preventative check and will be available for each young person through Medicare, where Family Tax Benefit A applies. This financial assistance should be taken into account when the reimbursement of dental costs is discussed with the carer in case planning.

To be eligible for expenditure under this category for dental treatment, the child or young person must be subject to:
- a signed assessment or child protection care agreement
- an adoption care agreement or adoption consent or dispensation of consent or
- a child protection order granting custody or guardianship to the chief executive.
Regional Director approval is required for all orthodontic treatment. Where orthodontic treatment is recommended, the public hospital system is to be accessed as a first option. If public services cannot be accessed within the timeframe determined by the recommending dentist/specialist, the Regional Director may approve access through the private health system.

All treatment must be detailed in the child health needs assessment and case plan.

To be eligible for expenditure under this account category for orthodontic treatment:
- the child or young person must be subject to a child protection order granting long-term guardianship to the chief executive or
- the orthodontic treatment commenced prior to the child or young person entering out-of-home care.

7. Medical – Substance Testing (Parents) (Account code: 54342)

This account category is used for the costs associated with substance testing of a parent. Where there are indicators that a parent is engaging in serious and persistent substance misuse, contributing to a child being in need of protection, substance testing will be required as part of the case plan for ensuring the child’s safety and wellbeing.

For further information on the substance testing of a parent please refer to the procedures in the Child Safety Practice Manual, Chapter 10.
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Office: Communities, Child Safety and Disability Services
Help Contact: Child Protection Development – 3235 9411

Links:
Legislation:
Child Protection Act 1999
Child Protection Regulation 2011
Adoptions Act 2009
Financial Accountability Act 2009
Related policies and procedures:
Case planning (263)
Intervention with parental agreement (343)
Investigation and assessment (386)
Expenses – fortnightly caring allowance and interstate foster payments (365)
Expenses – fortnightly caring allowance and interstate foster payments (procedure 365)
High support needs allowance (296)
High support needs allowance (procedure 296)
Complex support needs allowance (612)
Complex support needs allowance (procedure 612)
Child related costs – carer support (597)
Child related costs – client support and family contact (598)
Child related costs – education support (599)
Child related costs – long-term guardian support (608)
Child related costs – long-term guardian support (procedure 608)
Child related costs – outfitting (600)
Child related costs – travel (595)
Related Government Guidelines:
Statement of Commitment between the Department of Child Safety and the foster care services and the carers of Queensland
Schedule of Financial Delegations
Child Safety Practice Manual
Financial Management Practice Manual

**Forms:**
Child related costs approval form

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