



**FLORIDA DEPARTMENT OF JUVENILE JUSTICE
DETENTION SERVICES
FACILITY MEDICAL POLICIES**

Superintendent _____ Signature Designated Health Authority _____ Signature		Effective Date: November 1, 2016	Revised Date: July 5, 2018	Procedure Number: 8005 Medical Services
Subject: SCOPE OF THE AUTHORITY FOR EVALUATION AND TREATMENT			Reference: 63M-2.005; 63M-2.0051 7 63M-2.0052 F.A.C. Quality Improvement Standard 4.04	
Purpose:	The purpose of this policy is to ensure that, to the fullest extent possible, parents and/or legal guardians are afforded the right to give or withhold consent with regard to the healthcare provided to their children.			

PROCEDURE:

A. General

- a. The Authority for Evaluation and Treatment (AET) is the Department’s general consent form authorizing specific treatment for youth in the custody of the Department. For the purpose of the AET document. Departmental custody includes those DJJ facilities where youth are housed 24 hours per day, such as, Detention Centers and Residential Commitment Programs.
- b. This form is a required and critical document to ensure that a youth’s health and mental health needs can be met and services can be rendered. To take effect, the signature of the parent (mother or father) or legal guardian (as defined under 744F.S.) is required for youth under the age of 18. Without the necessary signature, the provision of these services requires a court order. However, under no circumstances will emergency services be withheld pending an unsigned AET.

B. When properly signed, the AET serves as a release of information. It serves as the Department’s authority to provide information to other health care providers that are or will be treating a youth. It is also a standard release to outside health care providers for releasing medical records and relevant information back to the Department and DJJ facilities.

C. Whenever a youth is taken off-site to a health care provider, the health care provider shall be presented the original or current copy of the signed AET, so the health care provider may provide information to the Department on the Summary of Off-Site Care form, and provide any other instructions/order necessary for the health care of the youth (i.e. discharge instructions, consultative reports, and the like).

D. In the event that the youth is taken to a health care provider for medical care and treatment that has been specifically court-ordered (in lieu of the AET, because the parent/guardian refused or was unavailable to sign the AET), a copy of that court order shall be furnished to the health care provider.



- E. The AET is valid for as long as the youth is under any type of supervision, custody or other form of legal control by the Department; OR, for one year after it was signed by the parent/legal Guardian, whichever comes later, OR until the youth's 18th birthday. Legal control will include probation and conditional release. The parent, legal guardian, or court may revoke or modify the AET at any time.
- a. A new AET is not required when a youth has been transferred from one DJJ facility to another, as long as there have been no new modifications or revocations.
 - b. If the AET has expired at the time the youth re-enters the physical custody of the Department (that is, the youth has been under no form of supervision, control, custody, or legal control by the Department AND more than a year has lapsed since the signing of the first AET), the JPO or a DJJ representative must obtain parental signature on a new AET.
 - c. If the youth, who has been released from DJJ physical custody and off all supervision, commits an offense, which brings him/her back under supervision or control, the original AET can be used as long as it was signed less than 1 year prior.
 - d. When a youth who turns 18 remains in the custody of the Department, the AET signed by the parent is immediately invalidated. The youth will provide consent at the point of contact of healthcare services for him or herself. At this time, information may be provided to the parents only with the youth's authorized and explicit written consent. The regional general counsel's office must be consulted if this is the case for a developmentally disabled youth.
- F. Substance Abuse Services
- a. The Authority for Evaluation and Treatment does not give DJJ authority to assume responsibility for the provision of substance abuse evaluation and treatment services to a youth within its custody. This youth must sign his/her own consent for these services.
- G. The DJJ Juvenile Probation Officer (JPO) is responsible for ensuring that the Authority for Evaluation and Treatment (AET) is signed and dated by the parent or guardian and then forwarded to the location where the youth is in custody.
- H. If the parent or legal guardian is not available during detention screening, the assigned JPO needs to schedule an intake conference with the parent/legal guardian as soon as possible to complete the AET.
- I. The DJJ representative who obtains the parent/legal guardian signature on the AET is responsible for reviewing the basic components of the document with the parent using the "Guidelines for Obtaining Parental Signature on AET".
- J. In the event that a parent/guardian refuses to sign the AET the Department's regional general counsel should be contacted to pursue a court order.
- K. Where a signed AET has not been obtained, and the person with the power to consent to examination or treatment cannot be contacted after a diligent search, and has not expressly objected to consent, the Detention Facility Superintendent or Assistant Facility Superintendent may consent to ordinary and necessary medical treatment, including immunizations, and dental examination and treatment as set forth in Section 743.0645, F.S. The assigned JPO shall

conduct the diligent search as set forth in the form Affidavit of Diligent Effort. The assigned JPO shall complete the Affidavit of Diligent Effort and attach to the youth's Limited Consent for Evaluation and Treatment (HS 057, December 2013), The Facility Superintendent providing the consent for the youth shall sign the Limited Consent for Evaluation and Treatment.

- L. Where the youth is in the dependency system and is served by the Department of Children and Families, the following process applies:
- a. Where the youth has not been removed from the parent's home, the JPO shall obtain the parent's consent to ordinary medical treatment by executing the Limited Consent for Evaluation and Treatment.
 - b. Where parental rights have not been terminated and the youth is in out-of-home care, such as a foster home, group home, or unlicensed caregiver, the JPO or Detention representative/ provider shall contact the Department of Children and Families or its contracted service provider to locate the parent to consent to ordinary medical treatment by executing the Limited Consent for Evaluation and Treatment. Parental consent is not required where the court order placing the youth in out-of-home care specifically gives authority to consent to ordinary medical treatment to the Department of Children and Families or the out-of-home caregiver. Where these circumstances exist, either the Department of Children and Families or the out-of-home caregiver may consent to ordinary medical treatment by executing the Limited Consent for Evaluation and Treatment.
 - c. Where parental rights have been terminated and the youth is in the custody of the Department of Children and Families, the Department of Children and Families or its contracted service provider may consent to ordinary medical treatment by executing the Limited Consent for Evaluation and Treatment.
 - d. For youth admitted with prescribed psychotropic medications that are in out-of-homecare, one of the following must occur:
 - Along with the limited consent, a signed (page 7) DCF 5339 form listing all medications that have been consented to;
 - A court order which includes psychotropic medications
 - A court order that indicates wording to continue ALL medications the youth is currently prescribed.
- M. A copy of the AET will be presented to the parent at release if one is not available in the event the youth returns to secure detention prior to the expiration of the AET.
- N. A weekly listing of youth who currently do not have an AET on file will be presented prior to Detention Reviews.
- O. Filing of The Authority for Evaluation and Treatment
- a. The signed and witnessed Authority for Evaluation and Treatment is to be filed in the youth's Individual Health Care Record, the section known to be as the "core health profile". Should a subsequent AET be obtained it should be filed directly in front/on top of the prior AET. (If a court order was obtained because an AET could not be obtained, the court order will be filed in the same fashion/order as the AET.)

P. Copies of The AET

- a. The original AET will be filed in the youth's Individual Health Care Record. If, for some reason, the original AET is not placed in the Individual Health Care Record, a legible copy will suffice, as long as the word "COPY" is legibly hand-written or stamped. It is particularly important that outside health care providers are aware of the parental consent and thus should be provided with a copy of the original. The JPO should also maintain a copy of the AET in their files.

Q. Filing of the Limited Consent along with the Affidavit of Diligent Effort

- a. The signed Limited Consent along with the Affidavit of Diligent Effort form shall be maintained in the IHCR section for AET's in reverse chronological order until which time a court order which includes all necessary care or AET is obtained making the Limited Consent expired.