



*Commonwealth of Massachusetts*

*Executive Office of Health and Human Services*

**Department of Youth Services**

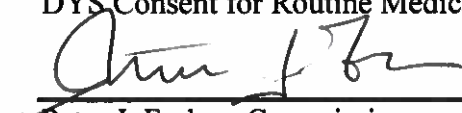
**Official Policy**

**Policy Name:** Authorization for Medical Care

**Policy #:** 02.05.04(a)      **Effective Date:** Feb 1, 2021

**Repeals:** 02.05.04

**References:** Vaccine Information Statements (VIS's) Form  
DYS Consent for Routine Medical and Dental Care Form

**Signature:**  \_\_\_\_\_ 1/1/21  
Peter J. Forbes, Commissioner      2021

**Applicability:** This policy shall apply to DYS. Providers are expected to have their own policy covering this topic area.

**Policy**

It is the policy of the Department of Youth Services (DYS) that consent is required for all medical care except for care given in an emergency.

A parent, guardian, or the DYS youth, if over 18, shall complete and sign a general consent for routine medical and dental treatment in accordance with these procedures. If the youth does not have a living parent and no guardian is appointed, DYS may consent to treatment as provided in G.L. c. 120, §23. General consents are valid for one year.

Informed written consent shall be obtained by the treating provider before any and all nonroutine, diagnostic, therapeutic or invasive procedures, and medical interventions or treatment, including psychotropic medication regimens, where disclosure of significant medical information, including risks involved, would assist a patient in making an informed decision whether to undergo the proposed procedure, medical intervention or treatment. DYS may assist in obtaining the written or electronic signatures in accordance with these procedures after informed consent is received by the treating provider.

Only the parent, guardian, and the youth, if 18 or older, may consent to elective or invasive medical care.

No consent is required for emergency medical treatment as defined below.

## Procedure

### A. Definitions

1. The following definitions shall have the meanings assigned to them in this policy for purposes of interpreting this policy.

Elective Treatment: Any medical treatment recommended by a physician which may be postponed without subjecting the youth to significant pain, deterioration of the condition, complications, or irreparable harm. Elective procedures are usually medically necessary and may be major; however, are beyond the scope of procedures outlined in routine care.

Electronic Signature: A signature obtained through the use of a digital platform.

Emergency Treatment: Medical, dental, or psychiatric treatment that needs to be provided immediately and that, if postponed, may result in permanent injury, loss of function, or death.

Informed consent: Agreement by the youth and/or parent or guardian to proceed with a specific course of nonroutine treatment after receiving information from the person who will perform or oversee the treatment. Such information shall include the reason(s) for the treatment, potential benefits of the treatment and risks associated with and without the treatment and review of alternatives. Requires treatment provider to find some indicia of comprehension by the youth and/or parent or guardian if the youth is younger than 18 years old of the information provided, including an understanding of the ability to ask questions and to decline or discontinue the treatment at a later date.

Invasive Treatment: Any test or treatment that carries a significant risk of harm or major side effect. This includes but is not limited to all medications prescribed for psychiatric or behavioral treatment, all surgical procedures, and any procedure that requires more than local or topical anesthesia.

Routine Treatment: This includes but is not limited to all routine medical and dental examinations including routine blood, urine or other tests, routine x-rays or other non-invasive tests. It also includes immunizations currently required by the Massachusetts Department of Public Health (MDPH), Massachusetts Immunization Program, and all medical or dental treatments, including medication for common or minor illnesses or minor injuries like antibiotics and over the counter medications.

2. Terms that are defined Policy #01.01.04, "Policy Definitions" shall have the meanings assigned to them in that policy, unless a contrary meaning is intended.
3. Terms not defined in Policy #01.01.04 or in this policy shall have the meanings assigned to them by reasonably accepted standard dictionary definitions of American English.

**B. General Guidelines for Routine Care**

1. A detained youth's clinician or designee shall verbally notify the parent or guardian within 12 hours of intake that DYS provides routine medical and dental care to youth while detained.
  - a. After notification, the youth's clinician or designee shall obtain a signed DYS Consent for Routine Medical and Dental Care Form and Release of Information Form.
  - b. The parent/guardian may use an electronic signature on such forms.
2. A committed youth's assigned Caseworker shall verbally notify the parent or guardian within 24-48 hours of commitment that DYS provides routine medical and dental care to youth during out-of-home placements.
  - a. After notification, Caseworker shall obtain a signed DYS Consent for Routine Medical and Dental Care and Release of Information Form.
  - b. The parent/guardian may use electronic signature on such forms.
3. The signed DYS Consent for Routine Medical and Dental Care and Release of Information forms shall be scanned into JJEMS master file with a hard copy to medical record where youth is located and the JJEMS consent e-file completed.
4. The signed consent forms shall authorize DYS to provide the youth with all routine medical and dental treatments including MDPH required immunizations.

**C. General Guidelines for Non-Routine Care**

1. The parent or guardian shall also be informed that he/she will be contacted and asked to provide informed written consent whenever a physician or dentist recommends any non-routine medical or dental treatment. This includes but is not limited to:
  - a. any surgery;
  - b. treatment with psychotropic medication(s);
  - c. any procedure requiring general anesthesia; and
  - d. any procedure considered invasive that carries a risk beyond that associated with routine medical care.
2. DYS shall inform the parent or guardian of a youth younger than 18 years old in the event of a medical or psychiatric emergency and provide information on the nature of the emergency and location of the treatment.

3. DYS shall also inform the parent or guardian of a youth younger than 18 years old in the event of a significant change in a youth's medical treatment or condition such as:
  - a. the youth's refusal to accept medical treatment;
  - b. modification or discontinuation of psychotropic medication; and
  - c. significant deterioration of a youth's medical condition.
4. DYS Health Services Provider shall ensure they are utilizing the current Vaccine Information Statements (VIS's) form as provided by MA Immunization Information System (MIIS) and the most recent DYS Consent for Routine Medical and Dental Care form as needed.
5. Parental/Guardian consent for treatment of a youth younger than 18 for pregnancy, sexually transmitted infections, or substance abuse is not required under GL c. 112, §12S.
6. Youth over 18 will be consulted regarding whether they wish to have their parent or prior guardian provided information about a medical or psychiatric emergency and/or a significant change in a youth's medical treatment or condition. Youth who are willing to have such information provided will sign a consent to do so, specifying who may be provided such information.