

e. Specific forensic issues:

f. Other issues:

4. The Department of Children's Services' representative shall facilitate gathering information necessary for a thorough assessment.
5. The mental health facility and DCS shall share any information or data on the child without a consent for release of information, including any information or data obtained from sources other than those referenced in this order. DCS shall share with the mental health facility the non-custodial social services and resources assessment within fifteen (15) days of the entry of this order. The mental health facility and DCS are authorized to provide such information to any other provider recommended to the Court as necessary for additional services to the child.
6. The Department of Children's Services shall immediately proceed with a non-custodial assessment to determine the need for TennCare benefits and services provided by or accessed through the Department and shall report its findings to the Court and the mental health facility within 30 days from date of this order. DCS or the provider shall urge the parent, legal guardian, or legal custodian to apply for TennCare benefits on behalf of the child. The representative of the Department of Children's Services shall meet with the family of the child as soon as possible to assist in the application for TennCare benefits. In the event the parent, legal guardian, or legal custodian refuses or is in any way unavailable to apply for TennCare benefits, DCS is authorized by this court order to apply for TennCare benefits on behalf of the child.
7. The mental health facility shall request services from TennCare, private insurance carrier or other potential payer as soon as possible after determination of any further treatment, care, training, or other services recommended to the Court.

8. When the mental health facility notifies the Court that the evaluation is complete, it shall also notify the sheriff who upon notification shall return the child to the court as soon as practicable thereafter.

ENTERED this ____ day of _____, 20____.

JUDGE

Approved for Entry:

Defense Counsel
Address
Phone Number

District Attorney General
Address
Phone Number