

DEPARTMENT OF HUMAN SERVICES
DIVISION OF JUVENILE JUSTICE SERVICES
POLICY AND PROCEDURES

Policy No: 07-01	Effective Date: 10/15/04	Revision Date:10/23/15
Subject: Non-Emergency Medical and Dental Services		

I. Policy Statement

Division facilities and programs shall provide for non-emergency medical and dental services as reasonably needed for juveniles placed in Division custody, using the services of licensed health care and dental care providers, on or off-site. Records of such services shall be maintained and treated with appropriate protection of privacy.

II. Rationale

The Division has an obligation to protect the health of juveniles in Division custody, which includes implementing procedures to assess their needs for medical or dental services, and to arrange for those services to be provided by licensed providers. Procedures are intended to describe the responsibilities of staff, in context with medical and dental services that are performed by licensed medical personnel.

III. Definitions

- A. "HIPAA" is the federal Health Insurance Portability and Accountability Act, which protects the privacy of patients in a healthcare setting and prevents the disclosure of personal information of patients other than what is necessary, or in some cases, only in emergency settings.
- B. "GRAMA" is the Utah state Government Records Access and Management Act, in the Utah Code beginning with Title 63G-2, which establishes rules for the handling of records retained by the Division, including rules regarding any release of such records to the public.

IV. Procedure

A. Medical Services: Intake Assessments and Health Care

- 1. Health Care Needs Assessments:
 - a. Initial Health Screen: An Initial Health Screen shall be completed by facility staff upon intake for every juvenile *admitted into a residential facility*, using the approved Initial Health Screen Form (03-03A). The results shall be reviewed by Division medical personnel within three business days. The Initial Health Screen shall be completed in a private setting and address the following:
 - i. Health issues that may require immediate attention.
 - ii. Suicide ideation and risk.
 - iii. Other observations by the intake worker that may be relevant to the care of the juvenile.

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- b. Nursing Assessment: A focused nursing assessment shall be completed on every juvenile *admitted into a residential facility*. It shall be completed within three (3) business days, and shall be administered by qualified health care personnel. The nursing assessment shall address the following:
- i. Physical examination preparation including height, weight, vision screening, and vital signs.
 - ii. Current illnesses and health problems, including mental, dental, and communicable diseases.
 - iii. Medications taken and special health requirements.
 - iv. Use of alcohol and other drugs, and history of usage and problems associated with usage.
 - v. Immunizations status and records.
 - vi. Other health problems and gynecological history for females.
 - vii. Notes on observation of behavior and appearance.
 - viii. Bodily deformities and ease of movement.
 - ix. Condition of skin, marks, lesions, rashes, needle marks, or other.
 - x. Need for referrals to appropriate health care services (either later, or on an emergency basis, when deemed necessary).
- c. Medical Assessment/ Physical Exam. A medical assessment/physical exam shall be conducted of every juvenile *committed to the Division's custody*, within thirty (30) days of placement. It shall be administered by the assigned Advanced Practice Nurse/Nurse Practitioner (APRN) as per contract with the Division. The medical assessment shall include but not be limited to the following areas:
- i. Review of the results of the Initial Health Screen and the Nursing Assessment (conducted per this Policy).
 - ii. Collection of additional data to complete the medical, psychiatric, and dental exams.
 - iii. Laboratory and/or diagnostic tests to detect communicable diseases, including venereal disease and tuberculosis.
 - iv. Recording of height, weight, pulse, blood pressure, and temperature.
 - v. Other tests and examinations as appropriate.
 - vi. Review of the results of the medical examinations' tests and identification of problems.
 - vii. Initiation of therapy when appropriate.
 - viii. Follow-up on immunization schedule, as required.

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2. Response to Individual Complaints of Illness or Injury after Intake:
 - a. Each facility or program shall have procedures in place for routine monitoring of the health of juveniles in their care and custody, including a scheduled “sick call” procedure for reporting of illness or injury.
 - b. Staff shall document medical complaints or sick call results for each resident for non-emergency illnesses or injuries, and refer those to the program’s health care providers for attention.
 - c. When illness or injuries are reported, staff of the facility or program shall contact the designated qualified health care providers for further instructions.

B. Non-emergency Medical Treatment (on-site or off-site)

1. Routine and other non-emergency medical services shall be performed by the facility’s medical personnel or other qualified health care personnel:
 - a. Case managers, facility staff, and parents/ legal guardians shall make arrangements for the provision of outpatient services that are not available within the facility. The determination for the necessity of these services shall be made by trained medical staff and approved by the facility director. Staff shall notify parents/ legal guardians of the juvenile and seek their consent for medical services.
 - b. When the program’s health care staff considers referring a juvenile to receive services from a juvenile’s private health care provider, staff shall contact the case manager for further instructions, and shall contact the juvenile’s parents/guardian, for further instructions and to obtain consent for treatment.
 - c. In-patient hospital care shall be available, when required, as determined by a health care provider. Arrangements for security precautions and supervision during extended hospital care for a juvenile who has been placed in secure facilities shall be the responsibility of facility staff as needed.
2. Transportation and Security for Off-site Non-emergency Medical Care:
 - a. Staff shall follow approved transportation procedures (see Division Transportation Policy 05-04) when transporting a juvenile for a routine and other non-emergency medical visit.
 - b. Staff shall accompany a juvenile to each medical care visit and maintain supervision needed according to the program Operations Manual.

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- c. A juvenile in detention or secure care who requires emergency transport and/or hospitalization shall be supervised by Division staff in accordance with Division Policy 07-02, Emergency Medical Care, and 05-04 Transportation.
- d. Staff shall document medical and transport information in the juvenile's file, the shift log, and an incident report as appropriate.

C. Special Medical Cases

1. Communicable Diseases:

- a. Staff shall take universal precautions to prevent the spread of communicable diseases from a juvenile to other juveniles, staff and volunteers, and the general public, in accordance with the Divisions mandatory training regarding communicable diseases.
- b. A juvenile receiving services by the Division shall not be denied access to services solely because of being infected with a communicable disease.
- c. All medical information will be private and protected, and only released according to HIPAA and GRAMA standards.

2. Special Diets and Activities Based on Medical Conditions:

- a. Staff shall adhere to special instructions regarding a juvenile with a medical condition that may require individual attention, a special diet, and/or special physical activity.
- b. Program staff, at the direction of medical staff, shall be responsible for providing individualized menus for a juvenile who cannot eat from the regular menu.

3. Pregnant Juveniles---Special Care:

- a. A juveniles who is pregnant shall receive regular prenatal care coordinated by their parent/ legal guardian, and/or case manager, to include medical examinations, appropriate activity levels, safety precautions, nutrition guidance and counseling.
- b. A pregnant juvenile while placed in a Division facility shall be monitored by a physician (ordinarily the same physician who will deliver the child) and advance arrangements will be made for hospitalization and delivery.

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D. Dental Services: Intake Assessments and Dental Care

1. Dental care screening and services shall be conducted within thirty (30) days of placement by the facility or program for a juvenile who has been committed to the Division's custody for ***Community Placement or Secure Confinement***. This process shall include the following items:
 - a. Dental examination/screening after admission to include the taking or reviewing of the juvenile's dental history, charting, and examination.
 - b. Instructions on oral hygiene, dental education, and providing of fluoride toothpaste.
 - c. Dental treatment as determined by a dentist.
 - d. Crowns and other major dental improvements shall only be done with the expressed written consent of the facility director.

2. A dental care screening shall be conducted within thirty (30) days of placement by the facility or program for a juvenile who has been committed to the Division's custody for ***residential Observation and Assessment***. This shall include the following items:
 - a. Dental screening (a visual check by the nurse), shortly after admission.
 - b. Instructions on oral hygiene, dental education, and providing of fluoride toothpaste.
 - c. In the event the nurse observes obvious dental problems or the juvenile expresses concern over his/her dental condition, the juvenile will be referred to a dentist for examination and treatment as determined by the dentist.
 - d. Crowns or other major dental improvement shall only be done with the expressed written consent of the facility director.

E. Emergency Medical or Dental Treatment.

Refer to Division Policy 07-02 regarding Emergency Medical or Dental Services.

F. Recordkeeping and Confidentiality of Records.

1. All medical and dental services received by a juvenile while in the Division's custody shall be documented, and records shall be maintained and kept confidential according to HIPAA, GRAMA and the facility and program requirements, (in accordance with Division Policy 07-04 regarding Medical and Dental Records).

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2. All records, maintained by health care providers that are under contract with the Division to provide services to juveniles, shall be available to Division staff as needed (e.g., to ensure ongoing medical care at a new placement).
3. Health care records are the property of the Division and shall be returned to the Division when the juvenile leaves the care of the provider.

V. Continuous Renewal

This policy shall be reviewed every three (3) years to determine its effectiveness and appropriateness. This policy may be reviewed before that time to reflect substantive change.

This policy has been reviewed by the Board of Juvenile Justice Services and is approved upon the signature of the Director.



Russell K. Van Vleet, Chair
Board of Juvenile Justice Services

10/23/15

Signature Date



Susan V. Burke, Director
Division of Juvenile Justice Services

10/23/15

Signature Date