




KJCC FACILITY ORDER	SECTION NUMBER 5210	PAGE NUMBER 1 of 7
	CHAPTER & SUBJECT: FACILITY SERVICES: Health Services	
Approved By:  Superintendent		Original Date Issued: 07/06/88 Current Amendment Effective: 03/01/12 Replaces Amendment Issued: 05/21/07

POLICY

The Kansas Juvenile Correctional Complex (KJCC) recognizes that health services are necessary to help youth achieve optimal bio-physical functioning, make the most of opportunities for rehabilitation, normal development, be relieved of unnecessary pain of disease and injury, and gain necessary skills and knowledge to achieve optimal wellness. This policy defines, lists, and describes the procedures for youth health care.

DEFINITIONS

Health Care: The sum of all actions taken, preventative and therapeutic, to provide for the physical and mental well-being of the youth population

PROCEDURES

I. Delivery of Services

- A. A Health Services Division will be maintained with offices in the KJCC. A health service employee will serve as the designated health authority and will arrange for all necessary levels of care, on approval of the responsible licensed physician.
- B. KJCC will make available for youth on the facility or through contract services the following:
 - 1. Physical examination and medical assessment;
 - 2. Dental screening, examination and extractions;
 - 3. Optometrists examination and optical wear. (NO contacts – NO personal glasses);
 - 4. Psychiatric evaluation, consultation;
 - 5. Special medical review/referral. (Neurological, Podiatry, Dermatology, etc.);
 - 6. Pharmaceutical services;
 - 7. Medical consultations. (Emergency, second opinions and payment approval for providers not on contract with KJCC.)
 - 8. Hospitalization as needed; and,

9. Special diagnostic studies. (Radiology, Laboratory, EKG, EEG, etc.)

C. Specialty referrals:

1. Youth may be referred by KJCC health professionals to community medical specialists when deemed necessary.
2. Local hospitals-emergency rooms and public health clinics may be used to provide care when necessary.

D. Medical Contract Services:

1. KJCC will contract with:
 - a. A licensed physician to provide medical care to the youth;
 - b. A licensed psychiatrist to provide psychiatric services;
 - c. A licensed dentist to provide dental services;
 - d. A licensed optometrist to provide optometry services; and,
 - e. A licensed pharmaceutical company to provide pharmaceutical monitoring of medication program.

E. Coverage:

1. Normal medical nursing coverage is scheduled during waking hours seven (7) days a week to assess youth medical complaints, make necessary referrals, do health service assessments, administer medications, admission screening and communicate and/or review treatments with Juvenile Corrections Officers.
2. An RN/LPN will be on-call to make arrangements for emergency care whenever on-grounds medical coverage is scheduled off.
3. Juvenile corrections officers provide health care to the youth as would be provided in a home setting by parents. Training to do these procedures will be provided by qualified healthcare personnel or others certified to provide training (i.e., CPR and First Aid Instructors). Staff will respond to emergency health care situations within four (4) minutes.

F. Admission Procedures:

1. All youth on admission will be screened by qualified health care personnel to assess current illnesses, dental and health problems, medications, evidence of trauma in previous placement, potential for withdrawal symptoms or need for detoxification and need for special placement because of health or safety threat to themselves or others.
 - a. Any youth admitted to KJCC who is at risk for withdrawal from alcohol, barbiturates, opiates or other drugs will be referred by the Health Service Office (HSO) to a Chemical Detox Unit (Regional Medical Center) for evaluation and treatment. When stabilized, the youth will be returned to KJCC. Hospital supervision will be per KJCC policy and/or as approved by the Superintendent.
 - b. Immunization records should accompany the youth at the time of admission. If not available, the KJCC Records Department personnel will contact Community Corrections, the youth's parents/guardian, last school attended or immunization section of Department of Health and Environment. If no records are found, the Nurse

will administer, after 30 days of admit, the vaccines according to the schedule recommended by the Department of Health and Environment.

- c. All admissions will be administered a TB (PPD) skin test. Those admissions transferred from a JJA correctional facility will be tested if last documented skin test was more than three (3) months old. Youth with confirmed history of a positive (PPD) skin test will receive a chest x-ray unless evidence exists of a current chest x-ray.
2. Youth will be informed at the time of admission how to access medical care (i.e., fill out a Health Service Request or tell the staff of his need to see the Nurse or Doctor, Pill line times, etc.).
3. The youth will be examined by the KJCC Physician or Physician Assistant and routine laboratory tests will be done within the first seven (7) days of admission.
4. Dental Care: All youth will have a dental exam and instruction in oral hygiene by the licensed Dentist and will be provided the following:
 - a. An initial dental screening on each admission within seven days of admission.
 - b. Dental hygiene service within at least 14 days of admission.
 - c. Conduct a complete dental examination of all youth within seven days of admission, if indicated from dental screening.
 - d. Provide dental treatment, not limited to extractions, when the health of the youth would otherwise be adversely affected.
5. Optometry Care: Visual screening will be provided to those who are assessed with significant visual need (greater than 20/50) or history of wearing corrective lenses. Personal glasses and contacts are not allowed at KJCC.
6. Follow-Up Care:
 - a. Corrective glasses replaced when:
 - i. Significant vision change; and,
 - ii. Lost, broken or damaged eyeglasses during supervised activities. Restitution required with glasses intentionally lost, broken or damaged.

G. Working with Youth who have Disabilities

1. Youth shall receive an assessment during their intake into the facility to determine if they are in need of an accommodation due to a disability. If it is determined the youth is disabled, Health Services shall:
 - a. Develop a Care Plan which outlines specific orders for the youth to follow.
 - b. Contact appropriately trained individuals within the facility to inform them about the youth's condition. They will then review the Care Plan and provide necessary assistance to help the youth perform his basic life functions.
2. A Care Plan will be developed for each youth identified with a disability. The Care Plan will include:
 - a. The youth's name;
 - b. The youth's expectations and limitations;
 - c. The date and time services were provided; and,
 - d. The type of service provided by appropriately trained staff.

3. The Health Services Administrator will be responsible for reviewing, revising, and approving all Care Plans.

H. Access to Medical Care:

1. A youth needing access to health care should fill out the Health Service Request form, and then place the Health Service Request form in the Health Service box outside the main pill line window. In closed units the forms will be given to HSO staff any time during daily pill lines on the unit. Staff will not prohibit any youth from accessing health care services when requested. Youth needing emergency medical care should notify staff immediately and staff shall declare a medical emergency.
2. Medical illness or injury outside of daily sick call should be referred to the Nurse by radio or telephone. The Nurse may respond in person or give the staff an appointment time or instructions for care.
3. Medical concerns or emergencies occurring outside of clinic hours should be referred to the Shift Manager who will contact the Nurse on call.
4. After the examination or assessment of the youth's health problem, the HSO may give a medical instructions form to the unit with special instructions for health care treatment, medication, special treatments, or restrictions. This information may be available to other areas as a need to know on the shared drive.
5. Youth requiring treatment for chronic medical conditions, convalescent care or other preventive care will be scheduled to see the Physician or Nurse at regular intervals in a chronic care clinic as indicated. A treatment plan may be developed by the HSO for medical conditions requiring close medical supervision as appropriate to the qualified practitioner (doctor, dentist, and optometrist) or qualified mental health practitioner.
6. The informed consent of a parent or guardian is not necessary for the furnishing of on or off-site care; hospital, medical, surgical or dental treatment or procedures. Informed consent of a parent or guardian is encouraged along with medical provider information for continuity of care. The Superintendent or his designee has statutory authority to provide consent for the performance of medical or dental treatment pursuant to K.S.A. 38-1614.

I. Access to Psychiatric Care/Evaluation:

1. Youth admitted on psychotropic medication will be seen by the Psychiatrist within seven (7) days to evaluate the need for continuing medication.
2. All psychiatric referrals will be initiated by the Social Worker and forwarded directly to the HSO.
3. The Psychological Services Request form (Attachment A) will be available to all youth and completed by those youth requesting these services. The youth will place the completed form in the Psychologist Services Request box in front of the main pill line window. These forms should then be retrieved from the Psychologist Services Request box by Psychology staff for processing. These forms should only be reviewed by the Psychology staff
4. Youth who are prescribed psychotropic medication will be seen by the Psychiatrist at monthly intervals to monitor for efficacy and side effects.
5. Youth who become acutely psychotic may be referred to LJCF or a psychiatric unit in a local hospital on recommendation of the psychiatrist.

6. Stimulant, tranquilizer, or psychotropic drugs shall be administered for clinical/therapeutic reasons only and not for the purpose of program management and control or for purposes of experimentation or research.
- J. Reports/Reviews:
1. The designated health authority will meet with the Superintendent no less than quarterly and provide specific monthly and annual statistical summary and reports on the health care delivery system and health environment as applicable.
 2. The facility is reviewed annually by the Department of Health and Environment.
- K. No youth residing at the KJCC will be subjected to any medical, pharmaceutical or cosmetic experimentation. If a youth has been undergoing treatment for a specific condition or special medical procedure not generally available, he is referred to the contract physician for evaluation and necessity of follow-up care.
- L. Youth who require prosthesis to replace a missing body part or to compensate for defective body functioning are referred to the responsible health care practitioner. Prostheses will be provided should the Physician or Dentist determine that prosthesis is necessary to protect the health of the youth.
- M. Special diets are ordered by the contract physician, dentist or their designee for treatment of a medical problem or to prevent development of health problems in the future. Medical or dental diet prescriptions should be specific, complete, and furnished to the food service contractor via the Diet Order form.. A new Diet Order form will be rewritten monthly, and sent to the food service contractor whenever the special diet is changed.
- N. In the event that a youth is seriously ill, seriously injured, or dies, the Superintendent and/or his designee will be notified by the nurse or shift manager and the parents/guardians and responsible agencies will be informed per policy. If a death occurs the coroner and other appropriate law enforcement officials will be notified. The youth's social worker will also be notified.
- O. Medical Records:
1. Each youth will have an active medical record on file in the Health Service Office (HSO) containing:
 - a. The completed Receiving Screening Form;
 - b. Health Appraisal (Physical Exam) Data Forms;
 - c. All findings, diagnoses, treatments, dispositions;
 - d. Prescribed medications and their administration;
 - e. Laboratory, x-ray, and diagnostic studies;
 - f. Signature and title of documenter;
 - g. Consent and Refusal Forms;
 - h. Release of Information Forms;
 - i. Place, date, and time of health encounters;
 - j. Health Service Reports, e.g., dental, mental health, and consultations;
 - k. Treatment Plan, including nursing care plan;

- l. Progress Reports; and,
 - m. Discharge Summary of hospitalization and other termination summaries.
2. Each unit will also maintain the current Diabetic Flow sheets and Medical Instructions/Restrictions sheets on youth in the unit receiving medical care.
 3. All medical records on youth shall be kept confidential and released only by signed permission from the youth, guardian or Superintendent as applicable.
 4. Summaries or transfer information from health records will be sent to the facility (or parents) to which the youth is transferred when necessary to provide ongoing care and/or to avoid duplication of examination or tests.
- P. Infectious Diseases:
1. All youth admitted will be screened for infectious disease by a physician, their designee or nurse. Screening for infectious disease may include indicated lab tests or referral to appropriate consultants. Any youth deemed to have a communicable disease requiring special housing arrangements will be housed first in seclusion or in the manner recommended by public health agencies.
 2. Staff and youth will be provided with education programs on the control, treatment, and prevention of infectious disease.
 3. Confidentiality of individuals with such diseases will be maintained.
- Q. This policy is reviewed annually by a medical authority and recommendations for change will be referred to the KJCC Policy and Procedure Coordinator.

NOTE: The policy and procedures set forth herein are intended to establish directives and guidelines for staff and juveniles and those entities that are contractually bound to adhere to them. They are not intended to establish State created liberty interests for employees or juveniles, or an independent duty owed by the Juvenile Justice Authority to employees, juveniles, or third parties. This policy and procedure is not intended to establish or create new constitutional rights or to enlarge or expand upon existing constitutional rights or duties.

REPORTS REQUIRED

None.

REFERENCES

K.S.A. 38-1614
3-JTS-2C-09-1, JTS: 3-JTS-4C-01, 3-JTS-4C-02, 3-JTS-4C-03, 3-JTS-4C-04, 3-JTS-4C-05, 3-JTS-4C-07, 3-JTS-4C-12, 3-JTS-4C-16, 3-JTS-4C-18, 3-JTS-4C-22, 3-JTS-4C-24, 3-JTS-4C-25, 3-JTS-4C26, 3-JTS-4C-29, 3-JTS-4C-34, 3-JTS-4C-41, 3-JTS-4C-43, JTS-4C-44, 3-JTS-4C-45, 3-JTS-4C-46, 3-JTS-4C-47, 3-JTS-4C-48, 3-JTS-49, 3-JTS-4C-50

ATTACHMENTS

Attachment A – Psychological Services Request Form

Kansas Juvenile Correctional Complex
Psychological Services Request Form

(This form should be completed by the youth and placed directly into the Medical Services Request box by the youth. This request form is confidential and should only be reviewed by psychologists.)

Youth's Name _____ ID# _____

Date _____ Unit _____

Date Received by psychologist _____ Appointment Date _____

NOTE: If your concerns are in regard to issues surrounding good time, phone calls, level advancement, visitations, etc., please contact your social worker.

**THE BOTTOM HALF OF THIS FORM IS
INTENTIONALLY LEFT BLANK.**

**(WHEN YOU COPY THIS FORM, COPY IT ON LIGHT GREEN
PAPER.)**