



**JUSTICE CABINET  
DEPARTMENT OF  
JUVENILE JUSTICE  
POLICY AND PROCEDURES**

**REFERENCES:**  
**505 KAR 1:120**  
**3-JTS-4C-01— 03, 05, 06, 10, 12,  
15—17**  
**3-JDF-4C-01—03, 05, 06, 14—16**  
**3-JCRF-4C-01, 04, 05, 07**  
**1-JDTP-3B-18**  
**1-JBC-4C-01—06, 12, 13, 15, 16,  
23**  
**NCCHC Y-A-02, Y-A-05, Y-D-03**

<b>CHAPTER: Health and Safety Services</b>	<b>AUTHORITY: KRS 15A.065</b>
<b>SUBJECT: Health Services</b>	
<b>POLICY NUMBER: DJJ 400.1</b>	
<b>TOTAL PAGES: 4</b>	
<b>EFFECTIVE DATE: 4/4/2014</b>	
<b>APPROVAL: A. Hasan Davis , COMMISSIONER</b>	

**I. POLICY**

Each Department of Juvenile Justice (DJJ) operated or contracted residential program shall provide comprehensive health care by qualified personnel to protect the health and wellbeing of the youth. Adequate staff, space, equipment, supplies, materials, and publications shall be provided for the performance of health care delivery as determined by the health authority.

**II. APPLICABILITY**

This policy shall apply to DJJ operated or contracted youth development centers and group homes.

*LIMITED APPLICABILITY*

*Routine medical coverage of youth in day treatment is the responsibility of the parent or legal guardian. However, day treatment programs shall provide access to emergency medical and dental care in compliance with this policy during the time youth are at the facility.*

*Each Juvenile Detention Center shall provide medical, dental and mental health screening, assessment and services. Comprehensive medical, dental and mental health services shall be provided when the health of a youth may otherwise be adversely affected. Emergency services by qualified personnel shall be provided to protect the health and wellbeing of the youth. Reference DJJPP 723 and 724 for Health and Mental Health Services requirements in detention facilities.*

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### **III. DEFINITIONS**

Refer to Chapter 400

### **IV. PROCEDURES**

- A. The Department's Medical Director shall administer the management of medical services. The Department's Chief of Mental Health Services shall administer the management of mental health services.
- B. Medical, including physical, psychiatric, and dental health services shall be an integral part of the overall treatment program. Matters of medical, psychiatric and dental judgment shall be the sole authority of the responsible primary health care provider.
- C. DJJ facilities shall follow the DJJ Medical Standard Operation Procedure. Each DJJ youth development center, group home and day treatment program shall have a facility standard operating manual of written health care procedures appropriate to the scope of health care services provided. Health care procedures shall be approved by the DJJ Medical Director or designee. Each Procedures Manual shall be reviewed annually.
- D. Medical, dental, and psychiatry services shall be provided by DJJ or contracted staff pursuant to a written agreement, contract, or job description approved by the health authority. Verification of current job descriptions are on file in the facility. Day treatment programs shall enter into written agreement with one or more hospitals, clinics or other providers for the provision of emergency medical services. The DJJ Medical Director or designee shall approve contracts for health care services.
- E. Treatment by health-trained staff or nursing personnel shall be performed pursuant to direct orders written and signed by personnel authorized by law to give such orders. DJJ programs shall not use "standing orders". Nursing protocols shall be developed and signed by the responsible physician and Nurse Shift Program Supervisor (NSPS). This policy shall not preclude protocols for emergencies when immediate action is required.
- F. DJJ facilities shall not provide skilled nursing or infirmary care.
- G. Health concerns shall be communicated to staff through quarterly staff meetings, daily oral and written shift reports, and through written and oral communication.
- H. The type of space and equipment for the examination and treatment area shall depend upon the level of health care provided in the facility and the capabilities and desires of health care providers. Facilities of more than twenty-five (25) youth shall have a central medical room with medical examination facilities. In all facilities, space shall be provided where the youth may be examined and treated in private.
  1. Basic equipment generally includes the following: thermometers; blood pressure cuff; stethoscope; ophthalmoscope; otoscope; percussion hammer; scale; examining table; gooseneck light; sink with hot and cold water; transportation

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equipment[]; bathroom; sharps containers; refrigerator for supplies; current medical reference textbooks and drug information.

2. If females receive medical services at the facility, equipment appropriate for pelvic examinations and gynecological reference books shall be available. If psychiatric services are provided in the facility, a private interviewing space shall be available.
- I. Security regulations that are applicable to the facility personnel shall also apply to health personnel.
  - J. In DJJ programs without a full-time registered nurse, a health-trained staff shall be identified to coordinate the provision of health care. The facility primary health care provider, Superintendent, and the DJJ Nurse Administrator or designee shall supervise the health-related aspects of this employee's job duties.
  - K. Program health service staff shall meet quarterly to review procedural issues. Minutes shall include the date, who attended and an outline of the topics discussed.
  - L. DJJ youth development center administrative and health staff shall meet quarterly to discuss health care issues including: mental health; continuous quality improvement (CQI); infection control; youth grievances; and environmental inspection reports. The responsible health care professional, QMHP, superintendent, and the NSPS shall attend these meetings. Minutes shall be recorded and shall be maintained by the NSPS in the medical department.
  - M. A quarterly and annual statistical report shall be completed by the NSPS or designee and a copy forwarded to the Medical Director or designee and the facility superintendent. These reports shall be used to monitor trends in the delivery of health care, including service volume, types of services and incidence of certain illnesses, referral to specialists, medication usage, laboratory and x-ray test results, convalescent admissions, hospital admissions, suicide attempts, deaths, off-site transports, and diseases and injuries targeted for risk management. These reports shall also assist in administrative planning for staffing, space and equipment needs. [] Any condition that poses a danger to staff or juvenile health and safety is reported immediately to the facility superintendent.
  - N. Each DJJ operated program, except day treatment, shall have a comprehensive quality improvement program.
    1. The Nurse Administrator shall conduct a nursing audit at each DJJ program annually. The medical audit shall be documented and forwarded to the facility NSPS or designee and superintendent.
    2. Primary Health Care Providers[] at youth development centers shall audit five (5) percent of records quarterly.
    3. Incident reports involving health and safety issues shall be monitored by the NSPS to identify patterns of recurring medical problems, high risk and high volume areas.

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4. Continuous Quality Improvement issues shall be discussed in the quarterly medical/administrative meeting and may include: hospitalizations, medical emergencies and conditions requiring off-grounds medical services.
- O. DJJ youth are prohibited from providing any type of health care services.

**V. MONITORING MECHANISM**

The Department Medical Director or designee, and the Quality Assurance Branch shall review policies, procedures and practices of health administration, health maintenance delivery, health prevention training and education safety policies, relevant facility procedures and recommend any needed changes to the Commissioner annually.