


<b>2063 HOSPITAL SECURITY</b>	
Chapter: <b>Sununu Youth Services Center</b>	Section: <b>Safety and Security</b>
	New Hampshire Division for Children, Youth and Families Policy Manual Policy Directive: _____ Approved: _____ Effective Date: <b>January 1, 2010</b> Scheduled Review Date: _____
	William W. Fenniman, DJJS Director
Related Statute(s): <a href="#">RSA 621</a> and <a href="#">RSA 621-A</a> Related Admin Rule(s): _____ Related Federal Regulation(s): _____	Related Form(s): <b>Medical Authorization and Release, and Hospital Security Checklist</b> Bridges' Screen(s) and Attachment(s): _____

When a resident from the SYSC needs to be hospitalized at Manchester's Elliot Hospital, or elsewhere, hospital security shall be fully informed prior to the resident's arrival, including the resident's medical condition and security status. SYSC shall also provide adequate security personnel to be responsible for the resident while at the hospital.

<b>Purpose</b>
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The purpose of this policy is to establish the procedures involved in a hospital visit for a resident.

<b>Policy</b>
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- I. Notification of Hospital Security: When an SYSC resident requires transportation to the Elliot Hospital, or another hospital, either by ambulance or by DJJS employees, Supervisors shall contact hospital security to provide proper notification.
- II. Resident Security Level: The Supervisors, along with the appropriate Unit Manager (or designee) and medical staff, shall determine the resident's security level. If there is uncertainty as to the resident's security level, the presumption is "close security with hand and leg restraints" (unless there are medical reasons why mechanical restraint(s) cannot be used). Hospital security shall be notified prior to the arrival of the resident and informed of the resident's security level and the method that shall be used to maintain the level.
- III. SYSC Medical Department Liaison with Hospital: The SYSC Medical Department shall contact the hospital admissions office with information about the resident's injury or illness, as well as information about the appropriate parent or medical consent document. A copy of the Medical Authorization and Release shall accompany the resident to the hospital if the document is available. If no document is available, the name, address, and phone number of the person who can give consent for treatment will be provided.
- IV. Information Packet to Accompany Resident: Supervisors shall issue a packet of information to the employee accompanying or taking the resident to the hospital. This packet shall include medical information (supplied by the Medical Department) and a Hospital Security Checklist of procedures for the employee to follow. The checklist, once completed by the employee, shall be turned in to a Supervisor at the end of their shift.
- V. Staff Accompanying Resident: An employee assigned to accompany and/or monitor a resident in the hospital shall be the same gender as the resident. In instances when it is not possible to send the same gender employee with the resident, prior approval shall be received from the Director, or designee.

- VI. Hospital Procedures: The level of security provided by DJJS at the hospital shall be determined based on the resident's established trust level. Unless otherwise ordered, a level of "close security" shall be assumed, and all the following shall apply:
1. The resident shall remain in constant sight of the DJJS employee(s) while being admitted to the hospital and while being treated, except when a medical procedure forbids immediate attendance (e.g., in the operating room). Hospital security shall be asked to assist in these cases when DJJS employees are excluded for medical reasons. The DJJS employee(s) shall not leave the resident at any time (e.g., to obtain meals, coffee, to use the restroom, etc.) unless relief is provided. The Supervisor, or the employee's supervisor, will provide relief at 3 and 1/2-hour intervals to ensure that employees can take their 15-minute breaks.
  2. Bathrooms and other spaces in the vicinity shall be examined as possible escape routes and supervised as needed whenever the resident is present. Bathrooms located in the resident's room shall not be used by visitors. The DJJS employee(s) shall always place themselves between the bathroom/bed and the exit of the hospital room.
  3. If admitted, the resident's clothing and personal belongings shall be inventoried, bagged, and returned to SYSC by the transporting staff. The resident may keep personal underclothing and toiletries.
  4. Visitations will be permitted at the discretion of the Bureau Chief of Residential Services, or designee. An approved list of visitors will be issued by a Supervisor to the DJJS employee monitoring the resident. The DJJS employee shall confirm each visitor's identity via a driver's license or photo ID. If a visitor is wearing outer clothing (coats and jackets), the DJJS employee shall have them remove the clothing immediately and keep it at nurses' station. Note: If deemed appropriate, the DJJS employee(s) shall be issued a metal detector wand in order to scan the resident and all visitors. All visitors shall be scanned and the resident shall be scanned and searched immediately after each visit.
  5. The DJJS employee monitoring the resident shall monitor the resident's telephone use.
  6. The Supervisor shall notify hospital security whenever a DJJS employee will be relieving the on-duty person. The relieving DJJS employee shall report to the hospital security prior to going to the resident's room, or wherever the resident is located.
    - (a) The resident's Unit Manager, Treatment Coordinator, and an Administrator may confer and decide that the resident requires less security than that described above for "close security." If so determined, the Unit Manager shall fill out the Hospital Security Checklist noting any exceptions to the above procedures.
    - (b) The checklist shall be submitted to the Supervisor as soon as possible.
    - (c) The staff accompanying the resident to the hospital shall be notified of any exceptions noted on the checklist as soon as possible. Until that time, a level of "close security" shall be assumed and all of the above procedures shall apply.