2279 NURSING SERVICES AT ADMISSION

Chapter: **Sununu Youth Services Center** Section: **Healthcare**

New Hampshire Division for Children, Youth and Families Policy Manual

Policy Directive: 17-24

Effective Date: August 2017

Scheduled Review Date:

Christine Tappan, Interim DCYF Director

Related Statute(s): RSA 621, and RSA 621-A

Related Admin Rule(s):

Related Federal Regulation(s): P.L. 108-79
PREA Standards 115.315 (e), 341 (e)

Related Form(s): **FORM 2054, FORM 2250, FORM 2251, FORM 2255, FORM 2259, FORM**

2261, FORM 2265, FORM 2267, FORM 2269, FORM 2271, FORM 2275, FORM 2279, FORM

2283, and FORM 2285

Bridges' Screen(s) and Attachment(s):

Approved:

Everyone needs and deserves a life of well-being. All youth undergo a health history screening and assessment upon admission to the SYSC, to obtain information pertaining to the youth's medical needs. This information is used to form a youth-specific database to guide individualized care. Data will be obtained through a formal youth interview and parent/guardian interviews, which shall also serve the purpose of initiating communication with the youth and family to orient them to the services provided by the SYSC Medical Department.

Purpose

This policy establishes the Medical Department procedures when a youth is admitted for detention or commitment at the SYSC, including a Nursing Screening and Nursing Assessment.

Definitions

- "Assessment" means an examination, more comprehensive than a screening, performed on each newly admitted youth within seven (7) days of admission to SYSC, inclusive of a review of the medical screening, behavior observations, an inquiry into mental health history, and an assessment of suicide potential.
- **"DCYF"** or the **"Division"** means the Department of Health and Human Services' Division for Children, Youth and Families.
- **"Intersex"** means a person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.
- "PREA" means the standards enacted on August 20th, 2012 and enforced by the U.S. Department of Justice to eliminate prison rape pursuant to the Prison Rape Elimination Act of 2003.
- "Screening" means the administration of a tool to youth within one (1) hour of admission to SYSC, to identify immediate risks-suicide, health, mental health and substance abuse. At minimum a screening includes an interview, questions, or test of a youth and review of available records.
- "SYSC," or the "John H. Sununu Youth Services Center," or the "Youth Detention Services

 Unit" means the architecturally secure juvenile treatment facility administered by the Division for

Children, Youth and Families for committed juveniles and detained youth, and for NH youth involved with the NH court system prior to their adjudication.

Policy

- I. The Admissions Officer in charge shall notify the nurse of all pending admissions and immediately upon any youth's arrival.
- II. Upon arrival/admission to SYSC, each youth's health status will be reviewed in order to identify medical issues.
 - A. Preliminary screenings and the nursing assessments will be performed by licensed nurses.
 - B. In the absence of medical concerns, the information gathered upon admission will be filed as baseline data on the Nursing Screening Form 2250 and Nursing Assessment Form 2279.
 - C. The collection and recording of health appraisal data will be completed in a uniform manner.
- III. Nursing Screening: A licensed nurse shall initiate and complete a Nursing Screening Form 2250 for every youth within one (1) hour after the youth's arrival to the SYSC.
 - A. The nurse shall conduct the Nursing Screening of the youth in the Admissions area.
 - B. The youth's date of birth and the correct spelling of the youth's name shall be obtained.
 - C. The Nursing Screening shall include a determination of a youth's gender; however, the nurse shall not search or physically examine any youth, including transgendered or intersex youth, for the sole purpose of determining the youth's genital status. If the youth's genital status is unknown, it may be determined during conversations with the youth, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner (115.315 (e)).
 - D. This screening shall include checking for injuries and asking about allergies.
 - E. The nurse will check and record the youth's vital signs.
 - F. The nurse will speak with the transporting officer to help determine if there are any self-harm indicators.
 - G. The nurse will inquire into the following:
 - 1. Whether the youth is being treated for a medical, dental, or mental health problem.
 - 2. Whether the youth has a current medical, dental or mental health complaint.
 - H. If the youth has a medical condition, including illness, injury, intoxication, or mental health crisis that requires immediate care that cannot be provided within SYSC, then arrangements shall be made to transport the youth to the Catholic Medical Center Emergency Room for evaluation and treatment.
 - I. The nurse shall assess any indications of abuse and/or neglect and report any indications pursuant to policy 2475 Abuse or Neglect of Committed or Detained Youth.

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- IV. The nurse shall collect any medications brought in by the transporting officer (see XIII below for further handling instructions).
- V. Youth who have been discharged from detention and committed to the SYSC must have a Change-in-Status Form 2251 completed.
- VI. Upon completion of the Nursing Screening and the granting of medical clearance, the youth will begin the admission process.
 - A. Nurses shall ensure the admission packets are complete by interviewing the youth and gathering the necessary information.
 - 1. The nurse shall obtain verbal medical authorization for treatment from the parent/legal guardian via phone.
 - (a) Telephone consent will suffice until written consent is received through the Parent/Guardian Authorization for Medical, Dental, and Psychiatric Treatment, Form 2259.
 - (b) A previous Form 2259 remains legally valid if less than one (1) year old.
 - (c) The nurse shall note the need for Form 2259 on the appropriate whiteboard.
 - 2. Following receipt of medical authorization, the nurse shall obtain the youth's consent on the Purified Protein Derivative (PPD) Consent Form 2275 if the youth has not had a PPD during a previous admission in the past year.
 - B. The nurse shall notify the admissions staff and residential staff of any special conditions of which they need to be aware.
 - C. The nurse will inform the residential staff of any physical problems that may require medical attention.
- VII. The nurse shall assess the youth's watch level.
 - A. New admissions are automatically placed on an admission B watch for a minimum of the first 24 hours.
 - B. If deemed necessary by the nurse, the newly admitted youth may be placed on a higher level of watch. The staff who puts a youth on a watch shall enter the data in the Clinical/Medical Watch Report Form 2054 as soon as possible, but before the end of their shift.
- VIII. The nurse shall log the youth's admission by an admission note on the Nursing Progress Note Form 2267, which shall indicate the following:
 - A. Time and date of admission;
 - B. Watch status;

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- C. Status of authorization for medical treatment (written Parent/Guardian Authorization for Medical, Dental, and Psychiatric Treatment Form 2259 or telephone consent);
- D. Important information from history (i.e., medical conditions);
- E. Special Needs; and
- F. Medical Disposition of youth, as follows:
 - 1. Hospital:
 - 2. Detained youth;
 - 3. Committed youth; or
 - 4. Infirmary.
- IX. Admitted youth shall undergo a Nursing Assessment in the Medical Department.
 - A. A licensed nurse shall complete the Nursing Assessment, Form 2279 in full, within seven (7) calendar days of the youth's admission to the SYSC, unless a Nursing Assessment, Form 2279 has been completed by SYSC within the prior six (6) months and there is no reason to believe information has changed.
 - B. Nurses will inquire into the following:
 - 1. Current illness and health problems, including venereal diseases and other infectious diseases;
 - 2. Dental problems;
 - 3. Mental health problems, including treatment history, hospitalizations, and suicidality;
 - 4. Use of alcohol and other drugs, which includes types of drugs used, mode of use, amounts used, frequency used, date or time of last use of, and a history of problems that may have occurred after ceasing use (e.g. convulsions); and
 - 5. Other health problems.
 - C. Nurses will make observations of the following:
 - 1. Appearance, behavior, and attitude;
 - 2. Level of consciousness, orientation, speech, language, and developmental age/intellectual functioning;
 - 3. Mood, affect, general thought process and content;
 - 4. Attention span, memory deficits, and judgment;
 - 5. Physical impairments affecting sensory or motor functioning; and

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- 6. Evidence of trauma, drug use, abuse/neglect, and self-harm.
- X. The nurse shall administer a Purified Protein Derivative (PPD) test and/or Vision and Hearing Acuity Screening Record Form 2285 if the youth has not had one in the past year during a previous admission.
- XI. The nurse shall note the need for a physical assessment and orders to be signed on the Physician Call Sheet.
 - A. The youth will be seen by the physician for a Physician's Health Assessment Form 2265 within three (3) business days of admission.
- XII. If the youth reports neglect, or sexual or physical abuse to the nurse (which has not been previously reported), the nurse shall follow section III of policy <u>2475 Abuse or Neglect of Committed or Detained Youth.</u>
- XIII. Medications shall be handled in the following manner upon admission:
 - A. Medications brought in with the youth shall be noted on the Nursing Kardex top Form 2255. They shall be stored in the med room in an envelope or bag with the youth's name on it.
 - B. The nurse shall complete a Prescription Medication Verification Checklist Form 2271 to verify medications with the dispensing pharmacy, prescribing physician or a nurse from the most recent placement.
 - C. The nurse shall contact the SYSC physician for medication orders and note them on the Physician's Order Sheet Form 2261.
 - D. Medications shall be obtained from either the contract pharmacy or the emergency supply. The youth's own medications can be used until the pharmacy can supply the medications. (See <u>Medication Administration Policy</u>).
 - E. Under most circumstances, medication should be continued even if the parent/legal guardian cannot be reached for authorization. If in doubt, the nurse should contact the Nurse Manager.
 - F. The nurse shall transcribe med orders on the MAR sheets received from the pharmacy. The MAR sheets, and the youth's photo, shall be placed in alphabetical order in the Medex.

XIV. Youth Allergies:

- A. A youth's allergies shall be noted on the front of the permanent chart, on all med sheet(s) including the MAR sheets and Nursing Kardex Form 2255, and on the Food/Bee Sting Allergy/Asthma list.
- B. A Medical Memo Form 2269 shall be filled out for youth with special dietary needs (allergies or special diets) and given to the kitchen staff along with a copy of the youth's photo.
- C. A copy of the Medical Memo Form 2269 shall be made for the nursing chart.

XV. Medical records:

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- A. Information collected for inclusion in the Nursing Screening Form 2250 and Nursing Assessment Form 2279 shall be obtained through conversations with the youth, the youth's parent(s)/guardian(s), and a review of the youth's medical records.
 - 1. Nurses shall obtain additional information from community health care providers as indicated.
- B. The SYSC Medical Department shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to the Nursing Screening Form 2250 and the Nursing Assessment Form 2279 in order to ensure that sensitive information is not exploited to the youth's detriment by staff or other youth (115.341 (e)).
- C. Each youth will have one medical file that will contain all medical documentation for detention and/or commitment.
- XVI. The Education department must send the Immunizations Request Letter Form 2283 to the youth's parent/guardian if the SYSC does not have the youth's immunization records on file.

Re-admission or Change in Status

- I. A Nursing Screening must be completed for each admission.
- II. If a youth is admitted to detention and is subsequently committed, staff may utilize the Change-in-Status Form 2251 within one (1) hour of the youth being committed if the youth has not left the custody of the state, noting the completion of the Nursing Screening informally without completing a new form.
- III. If a youth is admitted to detention and is subsequently committed following the completion of a Nursing Assessment during the detention, a nurse may review the Nursing Assessment Form 2279 within seven (7) calendar days of the commitment, noting any changes to the initial assessment responses, and signing and dating the Nursing Assessment Form 2279 with the reviewed date.
- IV. The nurse shall complete an entire new Nursing Assessment Form 2279 when a youth is readmitted, if:
 - A. It has been more than six (6) months since the last completed Nursing Assessment Form 2279; or
 - B. It has been less than six (6) months since the last completed Nursing Assessment Form 2279 AND there is reason to believe information has changed.
- V. At each admission, youth must have a Physician's Health Assessment Form 2265, a self-harm/suicide assessment by nursing staff, and verification of current medications on the Prescribed Medication Verification Check Form 2271.
- VI. Purified Protein Derivative (PPD) Consent Form 2275 and Vision and Hearing Acuity Screening Record Form 2285 do not need to be completed if they have been completed during a previous admission within the past year.
- VII. Immunizations must be monitored and completed based on youth history and Public Health standards.

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Resident's Name:

1.	☐ Initial Screening completed (Form 2250)
2.	Head lice check, vitals done, initial questions asked
3.	Contact with Transporting Officer
4.	☐ Phone Contact with Parent/Guardian
4a.	Verbal med and OTC authorization obtained
4b.	Written authorization reviewed (Form 2259)
5.	☐ Verification of Medication completed (Form 2271)
6.	Resident given "How to contact the nurse" and explained
7.	☐ Nursing Assessment completed (all lines and boxes) (Form 2279)
8.	☐ Vision and Hearing completed (Form 2285)
8a.	Letter sent to parent for failed test/referrals to Nurse Manager
9.	PPD authorization completed (Form 2275)
10.	☐ PPD done
11.	Resident Medication Procedure read and signed (Form 2272)
12.	☐ Allergies/asthma, (i,e,) noted on:
12a.	Chart Cover
12b.	Allergy List
12c.	MAR/Nursing Kardex (Form 2255)
12d.	Special Diet-Medical Memo with picture to kitchen and units
13.	☐ Medical Memo sent out as indicated (Form 2269)
14.	☐ Name added to STD clinic list as requested
	Note: all requests must be cleared by SYSC Medical Director
15.	Name added to dental list
1.0	Note: SYSC currently has no Dentist or Hygienist
16.	Name added to Doctors call list
17.	Name added to "Authorization Needed" List
18.	Name added to White board as indicated by medical need
19.	Health Education Form initiated (Form 2244)
20.	Nursing Progress note written (Form 2267)
21.	Lab work ordered as indicated and scheduled
	*Put in Nurse Manager's mail box upon completion of the checklist
Nurse's	s Signature Date

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