



NH Department of Health & Human Services
Division for Children, Youth & Families

DCYF Standard Operating Procedure

2252.1 MEDICAL EMERGENCIES PROCEDURE

Policy Directive: **20-16**

Effective Date: **May 2020**

Implements Policy: **2252**

Approved:

Joseph E. Ribsam, Jr., DCYF Director

This SOP defines the procedures around medical emergencies at SYSC.

Procedure

The following information is to support the implementation of the above referenced policy. This document shall not preclude staff from using their professional judgement based on individual circumstances, consistent with the requirements of the policy.

- I. A Registered Nurse (RN) will be available on-site 24 hours per day, every day of the year, including holidays to provide for the medical needs of youth at SYSC.
- II. Outside regular business hours, dental emergencies will be addressed through an urgent care/emergency room visit.
- III. Clinicians will be available on-site during regular business hours, and on-call otherwise, to assist as needed relative to the mental health needs of youth.
- IV. In the event of a youth experiencing a medical emergency within the facility, the first staff member on the scene (first responder) will:
 - A. Call Central Control to request assistance; and
 - B. Initiate first aid/life support within their competency (as necessary).
 1. If it becomes clear that no one is responding to the calls for help (i.e., if the first responder is alone), and the injured person can be left without putting their life in further peril, the first (sole) responder shall summon help in the most expeditious way possible and then immediately return to the youth.
- V. Upon notification of a medical emergency, Central Control will contact the Supervisor On-Duty and the Medical Department.
- VI. The Supervisor On-Duty will call 911 in-route to the scene and in coordination with the Nurse, convey information to the 911 operator as requested.
- VII. Upon arrival, the nurse will assess the youth experiencing the medical emergency and perform nursing intervention within their competency and appropriate standards of care.

- VIII. As additional staff arrive on the scene, they should be utilized as follows (as determined by the nurse, or the first responder if the nurse has not yet arrived):
 - A. To assist with CPR or other emergency interventions, as indicated;
 - B. To relocate the youth/visitor population away from the emergency area, and provide emotional support to youth as necessary; and
 - C. To act as the "recorder" and document the sequence of events and the times when interventions are initiated.
- IX. Central Control will coordinate entry into the facility for EMS and direct them to the person experiencing the emergency.
- X. Responsibility and authority regarding the handling of the emergency is turned over to EMS upon their arrival and staff present will assist as requested.
 - A. EMS will make the determination as to if the youth/staff/visitor needs to be transported to the hospital or not.
 - B. The Supervisor On-Duty will designate a staff member to accompany any youth transported to the hospital (either in the ambulance or by State vehicle as determined by EMS).
- XI. Any time a youth is transported for more intensive or further medical intervention, the nursing staff will contact the facility the youth is taken to and convey requested medical information to the best of their ability.
 - A. Information regarding private health insurance for the youth may also be provided, along with the medical authorization.
- XII. The nurse will notify the youth's parents/guardians as soon as possible and keep them informed of the youth's condition.
 - A. If the parents/guardians cannot be reached by phone, the nurse will attempt to reach a contact person or relative, if one is listed in the youth's medical record.
 - B. Efforts to contact the parents/guardians should continue until they have been reached; and
 - C. This notification procedure shall be documented in the youth's medical record.
- XIII. The staff person acting as the "recorder" will initiate documentation in YouthCenter specific to any youth involved by:

- A. Completing either the Moderate Incident Report (Form 2085) or Major Incident Report (Form 2086) for any injury or illness of a youth resulting from a rules violation; or
 - B. Completing the SYSC Accident/Illness Report (Form 2252) when there has not been a rules violation (for example: the youth falls and receives an injury or has a medical episode).
- XIV. Other staff present during the incident will add their observations to the report as appropriate.
- XV. Medical staff will document the incident and any interventions in the youth's progress note within the youth's medical record.
- XVI. The Supervisor On-Duty will contact the SYSC Administrator as soon as possible in the following circumstances:
- A. Any instance of severe or life-threatening injuries;
 - B. Suicide attempts (also contact the Clinician on-call);
 - C. Any instance of a youth experiencing a life threatening illness; or
 - D. Death.
- XVII. The SYSC Administrator shall report any serious injury or death of a youth to the Division for Children, Youth and Families Director to receive instruction as to the notification of:
- A. The parents/guardians;
 - B. The Commissioner of the Department of Health and Human Services;
 - C. The Attorney General's Office;
 - D. The Office of the Child Advocate;
 - E. The Disabilities Rights Center; and
 - F. The Commissioner of the Department of Education, if the serious injury or death occurred while the youth was attending the SYSC Educational Program.

| Applicable Forms | |
|-------------------------|------------------------------|
| Form | Title |
| 2085 | Moderate Incident Report |
| 2086 | Major Incident Report |
| 2252 | SYSC Accident/Illness Report |

Glossary and Document Specific Definitions

A - B C - D E - F G - I J - L M - N O - Q R - S T - V W - Z

Document Change Log

| PD | Modification Made | Approved | Date |
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