

**Idaho Department of
Juvenile Corrections
Institutional
Policy/Procedure**

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SUBJECT: ACCESS TO MEDICAL CARE

CATEGORY: MEDICAL SERVICES

Policy

The Idaho Department of Juvenile Corrections (IDJC) is committed to providing all juveniles under the care of the IDJC with timely access to licensed medical staff to meet their medical, dental, and mental health needs. Juveniles are not punished for requesting or discouraged from accessing medical, dental, or mental health care.

Operating Procedures

I. Access to Medical Care

A. Upon intake, juveniles read the Access to Health Care form in the electronic medical record and acknowledge understanding by signing the form. The form is maintained in the electronic medical record.

B. Special Health Needs

Juveniles who have special medical, dental, or psychiatric needs are identified prior to placement or referral to a treatment program and information regarding the special needs is included in the referral packet to the receiving program or facility.

1. Licensed medical staff assesses the juvenile's medical condition at the time of admission into the IDJC.
2. Immediate medical needs are addressed by licensed medical staff. Staff is advised of juvenile special needs that may affect housing, work, and program assignments.
3. Staff is provided the minimum necessary medical information required to ensure the safety and security of the juvenile and to ensure ongoing medical care is provided.
4. All information that is shared will be in accordance with established policies and Health Insurance Portability and Accountability Act (HIPAA) guidelines.

C. Juveniles identified as lesbian, gay, bisexual, transgender, intersex, or questioning (LGBTIQ) will receive fair, equal, and non-discriminatory treatment and medical care. Refer to Non-Discrimination of Lesbian, Gay, Bisexual, Transgender, Intersex and Questioning Juveniles (672) policy/procedure.

D. Health Evaluation of Juveniles in Segregation, Isolation, or Room Confinement.

When a juvenile is placed by staff in segregation, isolation, or room confinement, the Facility Health Authority, or their designee, is notified within two hours or by the end of the shift, whichever occurs first. Juveniles in this status are evaluated daily by licensed medical staff, or designee, and a record of these checks is documented in the juvenile's electronic medical record and the Special Management/Close Observation Activity Log (DJC-133) form.

II. Contacting Medical Staff or Services

- A. The licensed medical staff is contacted via radio or telephone transmission by staff supervising juveniles.
- B. If necessary, staff notifies licensed medical staff, the duty officer, or Emergency Medical Services (911).
- C. Emergency Situations
 - 1. During any life-threatening emergency, any staff should immediately call 911.
 - 2. For urgent medical needs during clinic hours, direct care staff made aware of a juvenile needing medical attention will contact the medical clinic. Licensed medical staff documents each contact with the juvenile in the electronic medical record.
 - 3. For urgent medical needs after clinic hours, staff made aware of a juvenile needing medical attention notifies Control, facility services or the duty officer for a decision regarding how to handle the medical situation.
- D. Non-Emergency Situations
 - 1. Juveniles who have a medical concern that is non-emergent fill out a Juvenile Request for Health Care (DJC-021) form and place it in the appropriate box. Licensed medical staff, or designee, picks up the DJC-021 forms daily. Licensed medical staff contacts the juvenile regarding the problem within 24 hours.
 - 2. The response or action taken by the licensed medical staff is documented on the DJC-021 form and the form is stored in the electronic medical record.
 - 3. The DJC-021 request forms are made available to the juveniles in the living unit or cottage.

III. Serious Health Needs

- A. Licensed medical staff treats medical problems using approved nursing guidelines and medical services protocols. Medical care that is out of the scope of practice of IDJC licensed medical staff or for which there is not an approved nursing guideline, is referred to a medical provider appropriate for the juvenile's medical condition.

- B. The contract medical provider evaluates juveniles at the medical clinic or advises regarding transferring them to the appropriate community medical provider for care. All encounters and findings are documented in the electronic medical record.
- C. Juveniles with chronic medical problems or who are on medication are followed on a regular basis by the contract medical provider according to appropriate time intervals, as identified by the medical provider.

IV. Health Care Appointments

Off-site health care appointments are scheduled by the licensed medical staff, or designee, and recorded in the electronic medical record. Transportation for these appointments is arranged or coordinated by the licensed medical staff, or designee, and all results of medical visits are documented in the electronic medical record.

V. Dental Care

Dental needs are addressed on a routine and emergency basis. Juveniles are seen by the contracted dental provider for evaluation and treatment. These encounters are documented in the electronic medical record. Refer to Basic Dental Care (828) policy/procedure.

VI. Mental Health Care

Each state facility has access to on-site clinicians and contract mental health providers who can aid in the evaluation, medication management, and counseling of juveniles. Mental health needs are monitored by the contract mental health providers at each facility on an as needed basis. All contract mental health provider encounters are documented in the electronic medical record by the mental health provider or the licensed medical staff.

VII. Juveniles Placed at Contract and Reintegration Providers

- A. Juveniles placed at a detention center or contract or reintegration provider will have the same access to medical, mental health, and dental care as a juvenile placed in an IDJC facility.
- B. The health care needs of juveniles placed at a detention center or contract or reintegration provider will be addressed pursuant to IDAPA Rules. The Regional RN Nurse Manager, or designee, will make notes in the electronic medical record when notified of all specified medical issues as per the IDAPA Rules.

VIII. Disclosure of Juvenile's Health Status

Disclosure of a juvenile's health status will be made following the IDJC's minimum necessary information-sharing guideline and in accordance with state and federal law including HIPAA. Refer to Health information/Privacy (843) policy/procedure.

IX. Releases and Transfers

- A. Prior to a juvenile completing program or transfer to another program, the Health Reintegration form in the electronic medical record is completed by licensed medical staff. Identified health problems, medical appointments, or medication issues are discussed with the juvenile and family and a copy of the Health Reintegration form is given to juvenile/family to ensure the appropriate appointments are made so that health services and medication can be continued at the next placement or in the community.
- B. A copy of the most recent physical exam, hearing test, vision screening, dental records, optical prescription (if applicable), and immunization records are sent with the juvenile when released from custody or when transferred to another placement.
- C. The original Health Reintegration form becomes part of the juvenile's electronic medical record. This information can be shared on a need-to-know basis in accordance with the Disclosure of Juvenile Health Information (840) policy/procedure.

X. Post-Custody Medical Services

Post-custody follow-up medical service may be paid by the IDJC for a medical need related to an injury that the juvenile sustained while in IDJC custody. This is an injury that will require short-term medical care that cannot be resolved before a juvenile is released from IDJC custody.

- A. The medical provider or facility health authority develops a written plan of care and anticipated medical services related to the injury sustained.
- B. The treatment team reviews the medical needs and placement plan to ensure the juvenile's medical needs can be met once released.
- C. The family or the independent or group living provider where the juvenile will reside post-custody is notified of the juvenile's potential medical needs. If the care taker is able to accommodate the juvenile's acute medical needs, the licensed medical staff, or designee, seeks direction and approval from the Superintendent, Deputy Director, and Director for funding short term medical care.
 - 1. The juvenile is encouraged to apply for Medicaid after release. If the juvenile does not apply for Medicaid within 30 days of release, they may lose IDJC funding for follow up medical care of the injury.
 - 2. The juvenile is encouraged to use private health insurance, if available. Private health insurance is utilized as the primary coverage and is billed first. The IDJC will review the need to pay for out of pocket expenses.
- D. The licensed medical staff collaborates with community providers to set up care coordination for the juvenile.

Reference: [Glossary of Terms and Acronyms](#)
[IDAPA Rules](#)
[Records Retention Schedules](#)

[Records Destruction Logs](#)

Desk Manual(s): *JCC–St. Anthony Nursing Guidelines*
 JCC–Nampa Nursing Guidelines
 JCC–Lewiston Nursing Guidelines

Related Policies: [Basic Dental Care \(828\)](#)
 [Health Information/Privacy \(843\)](#)
 [Disclosure of Juvenile Health Information \(840\)](#)
 [Non-Discrimination of Lesbian, Gay, Bisexual, Transgender, Intersex, and](#)
 [Questioning Juveniles \(672\)](#)
 [Request to Restrict the Disclosure of Juvenile Health Information \(842\)](#)
 [Records Management Program \(117\)](#)

Related Forms: [Juvenile Request for Health Care \(DJC-021\)](#)
 [Special Management/Close Observation Activity Log \(DJC-133\)](#)
 [Records Destruction Worksheet \(DJC-279\)](#)