

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

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SUBJECT: HOSPITAL AND SPECIALIZED AMBULATORY CARE

CATEGORY: MEDICAL SERVICES

Policy

The Idaho Department of Juvenile Corrections (IDJC) utilizes the services of local hospitals for inpatient hospital care as well as outpatient procedures and emergency care of juveniles in its custody. Hospitalization and specialty care are available to juveniles in need of these services. Juveniles have appropriate and timely access to hospital and specialist care when necessary.

All juveniles needing hospital level of medical care will be sent to a local emergency room or hospital for care. This includes daily monitoring, including but not limited to, medication monitoring and/or therapy, and assistance with activities of daily living at a skilled nursing level.

Operating Procedures

- I. Hospital Admission and Specialty Care
 - A. Licensed medical staff, or designee, arranges and contacts the hospital for all juveniles with scheduled or emergent medical admissions. Paperwork is sent with the juvenile indicating:
 1. Who is financially responsible
 2. If the juvenile has insurance
 3. Information about the juvenile and the specific problem to be addressed. Consent to treat forms are included, as needed: Parental Release of Information and Consent (DJC-183) form or Release of Information and Consent, 18 Years of Age or Older (DJC-185) form.
 - B. Off-site facilities or health professionals provide a summary of the treatment given and any follow-up instructions; this information accompanies the juvenile on return to the facility. This information is kept in the electronic medical record (EMR).
 - C. For on-site specialty services used regularly for medical and mental health care, there are appropriate licenses and certifications.
 - D. If a juvenile requires hospitalization for mental health illness, appropriate placement is made through coordination by the Clinical Supervisor, [facility](#)

[health authority \(FHA\)](#), contract mental health provider, and the Juvenile Services Coordinator (JSC).. In-patient hospital care and decisions relating thereto are determined by the hospital medical or mental health physician and direct care team in conjunction with the IDJC, FHA, or designee.

- E. When a juvenile is admitted to the hospital, the licensed medical staff/ Rehabilitation Specialist, or designee, attempts to contact the juvenile's parents or guardians as soon as possible to inform them of the juvenile's hospitalization. Parents or guardians are notified of the IDJC's policies regarding hospital visitation and phone calls.
- F. Health information is shared on a need to know basis in accordance with Disclosure of Juvenile Health Information (840) policy/procedure and applicable state and federal laws including the Health Insurance Portability and Accountability Act (HIPAA).

II. Hospital Supervision and Visitation/Communication

- A. To ensure the safety and security of the juvenile and hospital staff, approved designated IDJC facility staff is required to stay with the juvenile during the entire medical hospitalization or scheduled procedure. The requirement of mandatory IDJC staff presence does not apply to the psychiatric hospitalization of juveniles in accordance to HIPAA.
- B. During a medical hospitalization, the Superintendent, or designee, will make a decision regarding family visitation.
- C. The IDJC is not responsible for any charges incurred by visitors, including but not limited to, meals, cots/beds, phone calls, drinks, medical care, etc.
- D. The designated IDJC facility staff ensures that the juvenile's use of the telephone is allowed as outlined below and in accordance with Correspondence and Communication: Telephone, Mail, and Visitation (674) policy/procedure.
 - 1. Juveniles are allowed to call only persons listed on their approved contacts list as approved by the supervising IDJC staff.
 - 2. Phone calls are monitored by the supervising IDJC staff.

Reference: [Glossary of Terms and Acronyms](#)
[NCCHC Standards for Health Services in Juvenile Detention Centers and Confinement Facilities Y-D-08](#)

Related Policies: [Access to Medical Care \(801\)](#)
[Case Management for Juveniles \(401\)](#)
[Confidentiality/Privacy \(328\)](#)
[Coordination of Health Care \(802\)](#)
[Correspondence and Communication: Telephone, Mail, and Visitation \(674\)](#)

[Disclosure of Juvenile Health Information \(840\)](#)
[Informed Consent and Right to Refuse Treatment \(837\)](#)
[Juvenile Supervision \(608\)](#)
[Parental Involvement and Notification \(651\)](#)
[Reporting of Critical Incidents \(601\)](#)
[Transport of Juveniles \(641\)](#)

Related Forms:

[Parental Release of Information and Consent \(DJC-183\)](#)
[Release of Information and Consent—18 yoa or older \(DJC-185\)](#)