


**MISSISSIPPI DEPARTMENT OF HUMAN SERVICES  
DIVISION OF YOUTH SERVICES  
JUVENILE INSTITUTIONS**

<b>Subject:</b> <b>Consent and Authorization to Treat</b>		<b>Policy Number: 11</b>
<b>Number of Pages: 3</b>		<b>Section: XI</b>
<b>Attachments</b>	<b>Related Standards &amp; References</b>	
Release of Medical Information Form XI.11.A Elective Procedure and Surgical Review Form XI.11.B	ACA Juvenile Health Care Performance Based Standards: 4-JCF-4C-11, 4-JCF-4C-43	
<b>Effective Date:</b> 06/09/06 <b>Revision Date:</b> 03/01/07, 07/01/07, 04/22/08, 05/01/11	<b>Approved:</b> 	

**I. POLICY**

It is the policy of the Mississippi Department of Human Services, Division of Youth Services, that all informed consent standards in the jurisdiction are observed and documented for medical care. The informed consent of parent, guardian, or legal custodian shall be obtained where required by law. The youth, guardian, or legal custodian shall be informed about medical care in a language that is easily understood. When health care is rendered against the youth the care shall be delivered in accordance with state and federal laws and regulations. (4-JCF-4C-43)

**II. DEFINITIONS**

As used in this policy and procedure, the following definitions apply:

Non-Emergent care/procedure – Necessary for the physical/psychological well being of an individual but does not have to be provided at a particular point in time.

Elective (Cosmetic) care/procedure- Not necessary for the physical/psychological well being of an individual. Procedure is desired by an individual for a perceived flaw that in actuality may not exist.

**III. PROCEDURE**

A. Health care personnel shall inform the youth in a language that is easily understood prior to initiation of medical care and treatment. (4-JCF-4C-43)

1. Documentation of the condition and proposed medical treatment shall be made in the youth's health record, Interdisciplinary Progress Notes XI.8.A by the facility physician.

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2. The health care personnel shall complete a Medication/Treatment Refusal Form, XI.30.C to document a youth's refusal of treatment.
  - a. The nurse shall immediately notify the Health Services Supervisor, the Facility Administrator and the facility Physician of the youth's refusal when there is clear danger to the health and well being of the youth or that of the general youth population.
  - b. The Health Services Supervisor shall consult with the Facility Administrator and the facility physician when the youth's refusal of treatment creates a potential danger to the health or well being of the youth or of the general youth population. The Administrator shall consult with the Office of the Attorney General for guidance on possible course(s) of action.

**B. Emergency Medical and Surgical Services**

If an immediate life-threatening situation exists, the medical staff, with authorization from the Facility Administrator/designee, shall ensure that necessary medical services are provided. (4-JCF-4C-43)

1. When a youth is in need of emergency treatment, the nurse shall call and notify the emergency department.
  - a. It is the responsibility of the Health Services Supervisor/designee to notify the Facility Administrator/designee.
  - b. The Facility Administrator/designee is responsible for authorization of treatment not approval for the emergency referral.
  - c. The Administrator, health care personnel or designee shall inform the youth's parent, guardian, or legal custodian in a language that is easily understood when emergency medical services are required. Refer to Policy XI.12, Medical Notification of Designated Individuals.

**C. Surgical Procedures (Non-Emergent or Elective {Cosmetic})**

The Health Services Supervisor or designee shall inform the youth's parent, guardian, or legal custodian in language that is easily understood for non-emergent or elective surgical intervention consent. Documentation of the conversation with the youth's parent, guardian or legal custodian shall be noted in the youth's health record, Interdisciplinary Progress Notes XI.8.A.

1. When a surgical procedure is recommended post evaluation by the contract physician and/or a specialist, refer to the Surgical Review Form XI.11.B. (4-JCF-4C-11)
2. If the parent/guardian has questions regarding permission to be present for the procedure refer phone call at this point to Facility Administrator or designee.

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3. The Facility Administrator or designee, by court order is the youth's designated legal guardian; the consent for treatment/surgery will be presented to the Facility Administrator for signature.

- a. The nurse present shall sign as the witness and fax the consent form to the surgeon/surgery center.
- b. The consent form shall be maintained in the youth's health record.

D. Medical Appointments/consults

The facility physician shall write an order when a youth needs to be scheduled for an off-campus Medical Appointment.(4-JCF-4C-43) The Facility Administrator/designee is responsible for authorization for treatment not approval of the appointment.

E. The Health Services Coordinator shall revise as necessary.