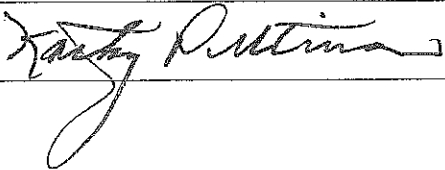


**MISSISSIPPI DEPARTMENT OF HUMAN SERVICES
DIVISION OF YOUTH SERVICES
JUVENILE INSTITUTIONS**

Subject: Access to Health/ Mental Health Care		Policy Number: 13
Number of Pages: 4		Section: XI
Attachments Health Call Form XI.13.A Health Call Log XI.13.B Physician Health Call Referral Log XI.13.C Welcome Letter Form XI.13.D		Related Standards & References ACA Juvenile Health Care Performance Based Standards: 4-JCF-4C-05, 4-JCF-4C-06, 4-JCF-4C-35, 4-JCF-4C-45
Effective Date: 06/09/06 Revision Date: 03/01/07, 04/16/08, 07/2/09,05/01/11		Approved: 

I. POLICY

It is the policy of the Mississippi Department of Human Services, Division of Youth Services, to provide a mechanism for unimpeded access to health care and for a system for processing concerns and/or complaints regarding health care. These policies shall be communicated orally and in writing to youth on arrival at each facility, and conveyed in a language that is easily understood by each youth. When literacy, language problem, or physical handicap prevents a youth from understanding oral and written information, a staff member or translator shall assist the youth. (4-JCF-4C-05)

There shall be a process in place for all youth to initiate requests for health services on a daily basis. The Health Call Form XI.13.A shall be readily available to all youth. Requests shall be monitored and responded to daily by health care personnel. (4-JCF-4C-06)
Clinical decisions shall be the sole province of the responsible physician and not countermanded by non-health care personnel. (4-JCF-4C-35)

II. DEFINITIONS

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

Health Call: A system of structured inquiry and observation, by health care personnel, designed to assess and provide treatment for the youth

III. PROCEDURE

- A. The Health Services Coordinator shall develop a facility specific instruction sheet that educates youth to the process of accessing medical, mental health and dental services upon their arrival to the facility. (4-JCF-4C-05) This form shall be signed by the youth and is maintained in the health record Form Welcome Letter XI.13.D.

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1. These instructions shall be provided both orally and in written form conveyed in a language that is easily understood during the intake process XI.13.D. (See Policy XIII.1)
 - a. The written form shall be provided to all youth at their initial medical/dental screening.
 - b. Each youth shall sign and date this form acknowledging receipt of the instructions.
 - c. This form then shall be filed in the youth's health record.
 2. When literacy, language problem, or physical handicap prevents a youth from understanding oral and written information, a staff member or translator shall assist the youth.
- B. Youths' medical concerns and/or complaints are monitored and responded to daily by health care personnel. Facility staff shall not prevent a youth's access to health care. (4-JCF-4C-45)
1. Scheduled Health Call for non-emergency health care needs, conducted by a nurse and/or other qualified medical personnel in the medical clinic, shall be available to each youth at a minimum five days per week (4-JCF-4C-06). When a physician does not conduct Health Call, a physician shall be available once each week to respond to youth concerns and/or complaints regarding service that they did or did not receive from other health care personnel (4-JCF-4C-06)
 - a. Youth requesting to be seen by health care personnel for non-emergency medical services shall sign-up for Health Call with any health-related concern or complaint.
 - b. The Health Call Form XI.13.A shall be located on each living unit and readily accessible to the youth. Facility staff shall be responsible for maintaining blank Health Call Forms and ensuring the forms are available to youth daily.
 - c. Each youth shall sign his/her name and health concern or complaint to the Health Call Form XI.13.A to access scheduled Health Call.
 - d. Youth shall place the Health Call Form XI.13.A in an envelope marked "Medical" and place in the Medical/Grievance Drop Box, located on each living unit. If Medical Drop Boxes are not available on the living units, the Youth Care Worker (JCW) or shall submit the Health Call Form XI.13.A to a nurse.
 - e. The youth's name, who signed up for Health Call, is placed on the Health Call Log Form XI.13.B by the nurse. This log is used for tracking and statistical purposes.
 - f. Following nursing assessment and triage performed in the medical clinic,

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- g. Non-emergent or non-urgent youth requests shall be referred to scheduled health call. All health care requests of an urgent or emergent nature shall be addressed in a timely manner.
- h. The nurse assessing the youth's concern or complaint and subsequent treatment shall document in the youth's health record, Interdisciplinary Progress Notes XI.8.A.
- i. Any youth referred to be seen by the physician shall be placed on the Physician Health Call Referral Log XI.13.C
- j. Any youth who requests to see the psychiatrist via the health call form shall be referred to counseling and/or psychology staff for evaluation.
 - i. All other campus-based referrals to the psychiatrist must be approved by the appointed qualified mental health professionals.
 - ii. And a completed referral form must be provided before the appointment is made. Form XI.13.D.

- 2. Youths in seclusion shall have access to medical care and such placement shall not adversely effect their medical treatment. The youth in seclusion may complete a health call form and shall be transported to the medical clinic for triage and treatment. (4-JCF-4C-45)

The Health Service Supervisor shall ensure provision of, and access to, health call for youth in seclusion. This facility specific procedure shall address:

- a. Nursing notification when a youth is placed in seclusion.
- b. Timely assessments appropriate to the individual health care needs of each youth in seclusion.
- c. Health call forms shall be maintained on the unit which houses youth in seclusion
- d. If a physical assessment is warranted the youth shall be transported, securely to the medical clinic.
- e. Documentation of the nurse's assessment shall be noted in the Interdisciplinary Progress Notes and the shift report.

- C. Special Medical/Dental services ordered by the responsible physician or dentist shall not be countermanded by non-health care personnel.

- 1. All clinical decisions belong to the clinicians.
- 2. Any service deemed "necessary" by a clinician shall be provided by a community provider

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- a. If the consultation results in a recommendation of a necessary procedure or diagnostic test, no administrative approval is necessary. however the vendor must be on the approved vendor list. Or
 - i. The business manager must be notified so that the process of vendor approval can be undertaken; however, this process will not take more than two (2) business days.
 - ii. An estimate of the cost should be provided to the business office manager.
 3. If the community consultation results in the recommendation of an elective procedure or diagnostic test. The procedure shall be followed as outlined in policy XI.11 Consent and Authorization to treatment.
- D. The Health Services Coordinator shall revise this policy as necessary.