

<p align="center">GEORGIA DEPARTMENT OF JUVENILE JUSTICE</p>	<p align="center">Transmittal # 16-08</p>	<p align="center">Policy # 11.14</p>
<p>Applicability: { } All DJJ Staff { } Administration {x} Community Services {x} Secure Facilities</p>	<p>Related Standards & References: O.C.G.A. § 15-11-8, 49-4A-7, 49-4A-8 ACA Standards: 3-JDF-4C-04, 3-JDF-4C-33, 4-JCF-4C-14, 20 NCCHC 2011 Juvenile Standards: Y-D-04</p>	
<p>Chapter 11: HEALTH AND MEDICAL SERVICES</p>	<p>Effective Date: 6/10/16 Scheduled Review Date: 6/10/17 Replaces: 3/15/13</p>	
<p>Subject: DIAGNOSTIC SERVICES AND SPECIALIZED CARE</p>	<p>Division of Support Services, Office of Health Services APPROVED:</p>	
<p>Attachments: A – Off-Site Referral Log B – Consultation Request Form</p>	<p align="center"></p> <hr/> <p align="center">Avery D. Niles, Commissioner</p>	

I. POLICY:

Youth in secure facilities shall be provided routine diagnostic services as deemed clinically necessary by the responsible physician. Based upon a youth's commitment status, the Department of Juvenile Justice shall be financially responsible for and provide for diagnostic services, specialized ambulatory care and hospital services.

II. DEFINITIONS:

Designated Health Authority (DHA): The Registered Nurse responsible for the facility's health care services including arrangements for all levels of health care and the ensuring of quality and accessibility of all health services provided to juveniles. The Designated Health Authority will be a Registered Nurse identified by the job title of Nurse Manager.

Diagnostic Service: A technique used to determine the nature or cause of a disease.

Emergency: A serious situation that happens unexpectedly and demands immediate action.

Health Care Staff: Registered Nurse, Licensed Practical Nurse, Nurse Practitioner, Dentist, Dental Assistant, Dental Hygienist, Medical Records Clerk, Pharmacist, Physician's Assistant, or Physician.

Hospital Service: Admission to a hospital that requires at least 24 hours stay.

Medically Necessary: The care that is determined by the responsible physician to be required to prevent possible significant deterioration of the youth's health or permanent functional impairment if not rendered during the period of incarceration. The care must not be experimental or administered solely for the convenience of the youth or the health care provider.

Mid-Level Provider: Nurse Practitioner (NP) or Physician Assistant (PA).

Specialized Ambulatory Care: Care at a hospital or other specialized clinic that does not require 24 hours stay.

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III. PROCEDURES:

- A. Care and services that can be provided on-site will be provided to all youth without restriction and regardless of their commitment status.
- B. When a physical exam or laboratory testing is required for a youth in a secure facility to be alternately placed, the community case manager will notify the Health Care Staff as soon as possible and provide any specific forms required by the placement. Only testing outlined in DJJ 11.2, Nurse Health Appraisal and Physical exam, will be completed. The Authorization for Release of Protected Health Information will be required to release health information outside the Department. Further, the youth's signature will be required to release HIV or sexually transmitted infection information. (See DJJ 5.5, Health Records)
- C. The physician or mid-level provider will provide orders for all diagnostic testing.
- D. The following diagnostic services will be provided, as clinically necessary, for all youth without restriction and regardless of their commitment status:
 - 1. Hearing and vision tests;
 - 2. Radiological testing;
 - 3. EKG's;
 - 4. Laboratory testing, including testing required for the monitoring of psychotropic medication(s);
 - 5. Multiple test urinalysis;
 - 6. Finger stick hemoglobin;
 - 7. Finger stick blood glucose;
 - 8. Hand-held peak flow meter or equivalent;
 - 9. Urine pregnancy test, for female youth;
 - 10. Testing for sexually transmitted infections (STI), including, at a minimum, Chlamydia; and
 - 11. HIV testing and Hepatitis C as requested.
- E. If the diagnostic service or specialized care is considered a medical necessity, the youth will be provided the service regardless of the youth's commitment status.

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- F. Committed youth will receive necessary off-site diagnostic services, laboratory testing for placement purposes, specialized ambulatory care, and hospital services without restriction. The Department will provide these services.
- G. Non-committed youth will be provided off-site diagnostic services, specialized ambulatory care, and hospital services in emergency situations. Non-emergency services will be referred to the originating court, which will be responsible for approval of these services to ensure reimbursement. (See DJJ 2.10, Youth Medical Expenses)
- H. Off-site diagnostic services will be provided by a registered, accredited agency (e.g., CLIA, National Radiology Association, etc.) that meets all federal and state laws. A contracted reference laboratory will provide laboratory services.
- I. Off-site diagnostic testing and specialized care and/or consultations will be recorded on the Off-Site Referral Log (Attachment A) to permit tracking of the test and care/treatment.
1. The Health Care Staff will send a Consultation Request Form (Attachment B) with the youth when he/she is transported for off-site medical specialized care/consultations. The off-site provider will be asked to complete the form and return it to the DJJ facility. If the form is not returned by the off-site provider, Health Care Staff will follow up with the provider. The Health Care Staff will fax the initial Consultation Request Form to the DJJ Medical Director and/or designee and then file the completed form in the youth's health record.
 2. The community case manager will notify the Health Care Staff of all off-site medical appointments for youth in the facility, including those arranged by parents/guardians or the community case manager. When at all possible, the Consultation Request Form will be sent with the youth.
- J. Emergency (STAT) diagnostic services will be available through a local hospital or any other authorized medical provider.
- K. Health Care Staff will ensure that test results are received and communicated to physicians and mid-level providers in a timely manner. The physician/mid-level provider will document the review of the report by initialing and dating the report. After review, all reports will be filed in the youth's health record.
- L. Hospital Services:
1. The local community hospital near the DJJ facility will be the preferred provider for inpatient hospital admissions, with the exception of psychiatric hospitalizations.
 2. Transportation for routine hospital admissions will be provided by the facility in accordance with DJJ 8.23, Transportation of Youth.

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3. When a youth is in need of hospitalization, a security staff member will escort and monitor the youth until the youth is discharged or until relieved by appropriate law enforcement personnel.
 4. Copies of facility health records (as applicable), including consent forms, and the youth's committing/sentencing order will be brought to the hospital with the youth. The original health record will remain at the DJJ facility.
 5. All medical related hospitalizations, including routine admissions and emergency room visits, will be reported on a Special Incident Report in accordance with DJJ 8.5, Special Incident Reporting.
- M. Health Care Staff members are strictly prohibited from performing forensic examinations or testing, or any examinations or testing that may be used as evidence against the youth (i.e., Sexual Assault Nurse Examiners (SANE) examinations).
- N. Programs that do not provide on-site health care services will develop procedures for diagnostic services specialized ambulatory care and hospital services to be provided off-site.

IV. LOCAL OPERATING PROCEDURES REQUIRED: NO