

Availability and Standards of Care

702.1 PURPOSE AND SCOPE

This policy will provide overall guidance for the continued care of youths who need health care.

702.2 POLICY

The Department is committed to providing humane and age-appropriate conditions of confinement by ensuring that youths receive adequate care to meet their serious health care needs.

702.3 YOUTH ACCESS TO HEALTH CARE

Youths may access health care in the following ways (15 CCR 1411; 15 CCR 1433):

- (a) Sick call will be conducted as follows:
 - 1. As directed by the Contracted Medical Service Provider.
 - 2. Scheduled so a youth's custody status (e.g., at court, work assignment, other release program) does not preclude access.
- (b) Youths may request health care at any time by completing and submitting the appropriate request form. All such written requests shall be forwarded to a care liaison as soon as practicable, but always before the end of the receiving member's shift. The care liaison shall forward all requests to a qualified health care professional as appropriate.
 - 1. The facility shall provide opportunities for a youth to submit a confidential request for health care.
- (c) Youths may request care for an emergency medical condition in any manner, to any member. All such requests should be addressed appropriately and immediately by the member, including prompt notification of a care liaison and/or the appropriate medical care provider (15 CCR 1412, 15 CCR 1433).
- (d) All health care requests shall be documented and retained in accordance with the Health Care Records and Confidentiality Policy (15 CCR 1433).
- (e) Youths may question or complain about their care or denial of care through the grievance system. Health care-related grievances are to receive priority attention and should be forwarded to a supervisor as soon as practicable. Grievances should be promptly forwarded by the supervisor to the qualified health care professional, unless the youth is complaining about the care provided by that person (15 CCR 1361).
 - 1. A supervisor shall be notified as soon as practicable when a youth makes a claim of being denied emergency care for an emergency medical condition.
 - 2. All youths' care-related complaints shall be reviewed daily by the Contracted Medical Service Provider (15 CCR 1433).
- (f) Youths may be treated by a personal licensed physician, dentist, or mental health care provider at their own expense, with the approval of the Quality Assurance Specialist and their parents/guardians (15 CCR 1402).

San Diego County Probation Department

Institutional Services Policy Manual

Availability and Standards of Care

- (g) Costs, including those related to security procedures, will not be used as justification for withholding necessary or emergency medical care.
- (h) Any staff member who becomes aware of or observes a youth who may be in need of medical care may access the sick call procedures on behalf of the youth. Any staff member who becomes aware of a youth in need of first aid or emergency care will immediately provide such care or arrange for the youth to receive care (15 CCR 1412).
- (i) Provisions shall be made to provide opportunities for both written and verbal communications for health care requests to those with disabilities, limited English proficiency, or limited literacy (15 CCR 1433).

702.4 YOUTH PRIVACY

Youth information, treatments, and discussions regarding treatment shall be held in private and in a manner that prevents such discussions from being observed or overheard by anyone not involved in the treatment or discussion (15 CCR 1407).

702.5 RESPONSIBILITIES

Clinical judgments involving health care are the responsibility of the health care professional qualified to make such a decision.

Members shall accept clinical judgments and not deny access to care by making, assuming, or ignoring a clinical decision.

Custody staff and qualified health care professionals should work together to coordinate security and health care needs. Qualified health care professionals and custody staff should communicate with each other about youth health care needs that may significantly impact the health, safety, or welfare of the youth or others. Information regarding ongoing treatment plans should be communicated to custody staff to the extent necessary to coordinate and cooperate in the ongoing care of the youth.

Communication between custody staff and qualified health care professionals regarding health care needs that may affect housing, program participation, or other conditions of confinement should be documented. Health care restrictions shall not limit a youth's participation in school, work assignments, exercise, or other programs, beyond that which is necessary to protect the health of the youth or others (15 CCR 1413).

702.5.1 STAFF OBSERVATIONS

Staff who observe a youth with obvious signs of medical or dental needs and/or mental/behavioral health issues, including the presence of trauma-related behaviors, injury, or illness, shall inquire about the possible health issue and communicate relevant information with qualified health care professionals (15 CCR 1433).

San Diego County Probation Department

Institutional Services Policy Manual

Availability and Standards of Care

702.6 MEDICAL

The Contracted Medical Service Provider and/or the treating physician or other qualified health care professional shall develop a written treatment plan for each youth requiring ongoing treatment, including any need for off-site treatment or a specialist.

The facility shall have first-aid kits and Automated External Defibrillators (AEDs) readily available to staff in the housing and admission areas and any other location approved by the Contracted Medical Service Provider and their Medical Director (15 CCR 1412). The Probation Department shall ensure that devices are maintained properly per manufacturer standard (15 CCR 1412).

702.6.1 ELECTIVE PROCEDURES

Elective procedures will generally not be provided to youths. A determination regarding whether a procedure is elective or a component of a current, medically necessary standard of treatment will be made only by the Provider. Procedures that are elective may be approved by the Division Chief or the authorized designee after verification that the youth or the youth's parent/guardian will pay all associated costs (15 CCR 1402). Parent/guardian consent is required if under the age of 18.

702.6.2 PREGNANT YOUTHS

Medical care, prenatal care, postpartum care, and counseling services (mental health, social, drug and alcohol use, and religious) will be available to pregnant youths (15 CCR 1417; 15 CCR 1431).

Pregnant youths should receive prompt prenatal care, including physical examinations, nutrition guidance, childbirth, lactation, and parenting education, counseling, and provisions for follow-up care. Qualified medical professionals should develop a plan for pregnant youths that includes direct communication of medical information and transfer of medical records regarding prenatal care to the obstetrician who will be providing prenatal care and delivery (15 CCR 1417).

The facility provides meals for youths with special dietary requirements (e.g., youths with allergies, pregnant youths, youths with dental problems, youths with religious beliefs that require adherence to religious dietary laws or special timing of meals).

No member shall interfere with or impede a youth's decision to have an abortion, not to have an abortion, or to place the child for adoption. In jurisdictions where youths need parental consent to obtain an abortion, medical staff should inform youths about the requirement and any alternative ways of satisfying the requirement (e.g., having the youth's attorney seek judicial permission to proceed without parental consent). If a youth chooses to have an abortion, the youth shall be requested to sign a statement acknowledging that the youth has been provided the opportunity for related counseling and chooses to have an abortion. Any financial obligations for elective abortions will be the responsibility of the youth. The facility shall provide necessary transportation and supervision for such services. Staff members who object to facilitating a youth's elective abortion (including arrangements, transportation, and security) should not be required to perform such duties.

San Diego County Probation Department

Institutional Services Policy Manual

Availability and Standards of Care

The Division Chief or the authorized designee should work with the pregnant youth, community agencies, or other relevant persons so the child is appropriately placed after the birth. Child welfare workers may interview and counsel the youth at the facility.

Pregnant youths shall receive information regarding options for continuing the pregnancy, terminating the pregnancy, and adoption (15 CCR 1417).

The Contracted Medical Service Provider in cooperation with the Probation Department shall develop written procedures consistent with the requirements in 15 CCR 1417, including the availability of a breast pump and procedures for storage, delivery, and disposal for lactating youths.

702.6.3 FOLLOW-UP CARE

The Contracted Medical Services Provider's Medical Director or their authorized designee should review all discharge and other orders issued for youths released from an emergency room visit or hospital stay, and should issue health care orders for any ongoing in-custody care.

The Contracted Medical Services Provider should ensure that youths receive education and instruction for any self-care that may be required to meet their individual health care needs.

702.6.4 HEALTH EDUCATION

Youths should be encouraged to maintain healthy lifestyles. The facility should provide health education and wellness information through classes, audio and video presentations, brochures, and pamphlets.

The Contracted Medical Service Provider in cooperation with the Probation Department shall develop a health education and disease prevention program that addresses the topics required by 15 CCR 1415, including medical, dental, and mental health. The program should be developed in conjunction with the Provider and should be updated as necessary to address current health and community priorities that meet the needs of the confined population (15 CCR 1415).

702.6.5 REPRODUCTIVE AND SEXUAL HEALTH SERVICES

The Division Chief shall develop procedures to assure that reproductive health services are available to both male and female youths. These procedures are to be made in conjunction with the Contracted Medical Service Provider and in accordance with current public health guidelines. Such services shall include but not be limited to those prescribed by Welfare and Institutions Code § 220 through Welfare and Institutions Code § 222, and Health and Safety Code § 123450 (15 CCR 1416; 15 CCR 1355).

702.7 MENTAL HEALTH CARE

Members should refer any youth showing signs of mental illness or a developmental disability to the BHS STAT Team, which will arrange for an appropriate referral.

The following mental health care will be provided to youths (15 CCR 1437):

- (a) Counseling and crisis intervention
- (b) Management of acute psychiatric episodes

Availability and Standards of Care

- (c) Stabilization and treatment of mental disorders
- (d) Medication support services
- (e) Appropriate care of youths with developmental disabilities
- (f) Behavioral health care for transgender and intersex youths by qualified health care providers (15 CCR 1352.5)

Any youth who is suspected or confirmed to have a developmental disability shall be referred to the local Regional Center for the Developmentally Disabled for the purposes of diagnosis and/or treatment within 24 hours of identification, excluding holidays and weekends (15 CCR 1418).

Members shall immediately refer youths to an on-site health care professional for evaluation if the youth reasonably appears to be gravely disabled or a danger to self or others (15 CCR 1437.5). If the on-site health care professional determines that a youth's psychiatric needs exceed the treatment capability of the facility, provision shall be made for timely referral, transportation, and admission to a licensed mental health facility (15 CCR 1437.5).

702.8 DENTAL CARE

Emergency dental care will be provided to youths. Emergency dental care will be available to all youths 24 hours a day. Severe dental pain qualifies as an emergency.

Dental care that is a necessary standard of treatment will be available to all youths. Decisions as to whether dental care is a necessary standard of treatment will be made by a qualified dental care professional. Treatment shall not be limited to extractions (15 CCR 1435).

Decisions to provide dental care that is not presently a necessary standard of treatment (i.e., elective) may include consideration of the youth's expected release date and available resources. Procedures that are elective may be approved by the Division Chief or the authorized designee. The youth's parent/guardian will bear the cost.

Annual dental exams shall be provided to any youth detained for longer than one year (15 CCR 1435).

702.9 EMERGENCY CARE

Emergency health care shall be available to all youths 24 hours a day. No youth shall be deprived of care for emergency medical, mental health, or dental service due to the time of day or night. An ambulance will be provided when necessary for proper care (15 CCR 1412; 15 CCR 1433).

Probation Officers and health care staff shall be trained, and written policies and procedures established to respond appropriately to emergencies requiring first aid and automated external defibrillators (AED) (15 CCR 1412).

At least one staff member who has received basic first-aid and CPR training shall be available 24 hours a day.

San Diego County Probation Department

Institutional Services Policy Manual

Availability and Standards of Care

702.10 FACILITY DIAGNOSTIC SERVICES

Diagnostic services provided at the facility shall be properly licensed or certified and comply with applicable state and federal requirements. Diagnostic services include X-ray or digital imaging as well as laboratory testing, such as blood or urine tests. The Quality Assurance Specialist should ensure the applicable licenses or certifications are maintained.

Procedures and instruction manuals should be available for each type of service.

702.11 OFF-SITE CARE PROVIDERS

The Quality Assurance Specialist should ensure written agreements are maintained with any community care providers who regularly provide health care services to youths. The agreements should require providers to deliver a summary of any treatment provided, follow-up care, and prescription medication recommendations, and should identify any health care needs that may affect housing, program participation, or other conditions of confinement.

702.12 TRANSPORTING YOUTHS FOR HEALTH CARE

Youths shall be safely transported to all health care appointments in accordance with the Transportation of Youths Outside the Facility Policy. When a youth is being transported outside the facility:

- (a) Transporting staff should have instructions regarding any medication or accommodation that may be necessary during transport.
- (b) Patient confidentiality shall be maintained during transport.
- (c) Any health care records transported by custody staff should be sealed.
- (d) The date and time of the appointment will not be told to the youth.

702.13 EVIDENCE COLLECTION

A youth's treating or regular care provider should not assist in evidence collection for purposes of prosecution, discipline, or any other adversarial proceeding. However, evidence may be collected from a victim of sexual assault with the consent of the victim (see the Prison Rape Elimination Act Policy). Forensic medical services conducted for the purpose of reporting and prosecution shall be in accordance with 15 CCR 1452 and 15 CCR 1453.

Any requirement for the collection of forensic evidence, including drawing blood, or body cavity searches, shall be performed by qualified and appropriately trained medical personnel who are not affiliated with the contracted medical provider (15 CCR 1452).

Qualified health care professionals from this facility are prohibited from being involved in psychological evaluations for use in adversarial proceedings.