

Code Blue and First Aid (Title 15, Sections 1341; 1412)

638.1 PURPOSE:

To ensure staff are prepared to implement first aid and emergency medical services. Establish guidelines for the announcement/response to a Code Blue in Juvenile Detention & Assessment Centers (JDACs) and Treatment Facilities (TFs).

638.2 DEFINITIONS:

Automated External Defibrillators (AED): A portable device that automatically diagnoses the life-threatening cardiac arrhythmias (irregular heartbeat) of ventricular fibrillation (when the heart rate becomes chaotic) and pulseless ventricular tachycardia (when the heart beats too fast), and is able to treat them through defibrillation, the applications of electricity which stops the arrhythmia, allowing the heart to reestablish an effective rhythm.

Code Blue: Radio code used to announce a medical emergency for any individual within a JDAC or TF.

CCTSS: Closed Circuit Television Security System.

Incident Commander (IC): A responding supervisor responsible for managing the response to an incident, unless otherwise designated by the Watch Commander (WC).

Medical Emergency: An acute injury or illness that poses an immediate risk to a person's life or long-term health.

638.3 GUIDELINES:

- A. Youth-down drills shall be conducted annually, on each shift and on a rotating basis over a 3-year period. The drill must be critiqued and shared with health staff and ensure recommendations for health staff are addressed.
- B. First Aid and Emergency Response procedure training shall occur prior to staff assignment to a living unit.
- C. Staff and health care staff shall be trained to respond appropriately to emergencies requiring first aid and AED.
- D. First Aid Kits, 911 Tool, and Resuscitator Bags shall be available on every living unit, Intake/Booking, Holding, Bridge, and Watch Commander Office.
- E. AEDs are available at designated locations in the facility.
- F. Submit request via First Aid Supply Refill Form (attachment A) to Medical Services for First Aid Kit replacement supplies as needed.
- G. Emergency response bag shall be maintained in each medical clinic with advanced medical supplies.

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- H. Clerical, dietary, and mental health staff shall receive training upon request (provided by the Probation Training Unit).
- I. All staff directly involved in the situation or at the request of the IC/WC, will participate in debriefing after the situation has been resolved.
- J. A Code Blue shall be called in the event of a medical emergency of any individual within the facility.
- K. When a Code Blue is called, only emergency related communication to the Code Blue will be allowed. After the IC arrives on scene, they will announce that they or designee will assume command of all radio traffic until they call off the Code Blue, with the exception of a separate code status being announced.
- L. Staff is expected to assess the situation and provide immediate First Aid; and/or CPR; and/or AED if needed and continue doing so until otherwise directed by medical staff or until the scene is no longer safe.
- M. In the event of a youth's death, staff shall follow the Death of a Youth While Detained in a Juvenile Detention and Assessment Center and/or Treatment Facility procedure.
- N. Code Blue/First Aid incidents shall be recorded using the handheld video camera but not uploaded into the JDAC video tracking log.

638.4 RESPONSIBILITIES:

- I. Probation Corrections Officer (PCO):
 - A. Shall use the Handie Talkie (HT) to broadcast the Code Blue and location (i.e. "Code Blue Unit 2A"). Announce pertinent information to alert responding staff of the situation such as blood present or other possible situations like:
 - 1. Code Blue Multiple Bodies: This should be used when multiple staff/youth are injured. This will alert medical staff to bring additional supplies and manpower sufficient to attend to multiple patients.
 - B. Staff who identified the need for the Code Blue are to remain on scene to provide information to the first responding medical staff.
 - C. Staff not in direct supervision of youth shall respond immediately to the location.
 - D. Staff will secure all youth in their rooms, then respond to the incident. One staff shall stay on the unit for supervision.
 - E. Assess the situation and provide immediate First Aid and/or Cardiopulmonary Resuscitation (CPR) and/or AED if needed and continue doing so until directed otherwise by medical staff or until the scene is no longer safe.
 - F. Responding staff will secure all youth not involved in their rooms or other designated area.
 - G. An available staff shall record the incident using the handheld video camera.
 - H. Provide pertinent information to responding staff and supervisors.
 - I. Once on-scene, shall not leave the area until dismissed by the IC.

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- J. Notify Forensic Adolescent Service Team (FAST) of the incident.
 - K. Complete an Incident Report (IR) if directly involved. Others present will complete an IR at the request of the IC.
 - L. Participate in a debriefing as directed by the IC.
 - M. Document the Code Blue in CE.
- II. Central Control (PCO):
- A. Re-broadcast the call, "Code Blue and location" twice (i.e. "Code Blue Unit 2A").
 - B. Direct all staff to cease movement and suspend all non-emergency radio and telephone traffic.
 - C. Monitor the situation and re-broadcast pertinent information, as well as follow up on any requests as communicated by the IC.
 - D. When the Code Blue is cancelled by the IC, announce twice, "10-4, BREAK, Attention all staff, Code Blue Over and location."
- III. Probation Corrections Supervisor I (PCSI)/Incident Commander (IC):
- A. Respond immediately to the area.
 - B. First responding PCSI on scene is the IC, and will provide continuous updates of information to the Watch Commander (WC) unless otherwise directed.
 - C. Provide guidance and clear directives as IC of the scene.
 - D. Determine the progress of the medical situation and gather information on the incident from the staff for pertinent case history and events leading up to the Code Blue.
 - E. Ensure staff have started to record the incident using the handheld video camera.
 - F. When a sufficient number of officers arrive to control the situation, dismiss and/or position staff accordingly for safety and security.
 - G. Ensure documentation is properly noted in CE.
 - H. Collect and review the CCTSS recording.
 - I. Ensure a copy of the handheld videotape is attached to the IR.
 - J. Review Incident Reports.
 - K. Conduct a debriefing with involved staff and offer Peer Support.
- IV. Health Service Manager (HSM):
- A. Evaluate training needs for emergency response.
 - B. Approve the contents, location, and frequency of inspections of the first aid and emergency supplies and equipment in collaboration with the Chief Medical Officer.

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- C. Ensure recommendations for health staff from critiqued youth-down drills are addressed.
- V. Chief Medical Officer:
 - A. Determine and approve the contents, quantity, and location of first aid kits and emergency equipment.
 - B. Review and approve the procedure for periodic inspections of the first aid kits and emergency equipment.
- VI. Supervising Correctional Nurse I/II:
 - A. Designate nursing staff to perform quality assurance checks on first aid and emergency response equipment as outlined in the Medical Quality Assurance Plan.
 - B. Ensure critiqued youth-down drills are shared with nursing staff. Submit critique along with verification it was shared with nursing staff to the HSM for record keeping.
- VII. Correctional Nurse I/II:
 - A. Immediately respond to all medical emergencies with first aid/emergency equipment when scene is safe to do so.
 - B. The first responding Correctional Nurse shall:
 - 1. Coordinate, delegate and dictate on-going health care treatment needs required.
 - 2. Collaborate with the IC/WC to assess the situation and determine the need for Emergency Medical Services (911).
 - 3. Complete the Urgent Medical Referral Form in the event the youth(s) are transported to the hospital via Probation Transportation.
 - 4. Complete a Medical Services Incident Report Addendum.
 - 5. Document on the Code Blue Nursing Protocol in the health record.
 - C. Notify the IC to discontinue the emergency response when the emergency is resolved.
 - D. Remain on scene as needed for additional support.
 - E. Perform quality assurance checks on first aid and emergency equipment and supplies as assigned by the Supervising Correctional Nurse.
- VIII. Licensed Vocational Nurse (LVN):
 - A. Respond to all medical emergencies with first aid/emergency equipment when scene is safe to do so.
 - B. Perform quality assurance checks on first aid and emergency equipment and supplies as assigned by the Supervising Correctional Nurse.
- IX. Forensic Adolescent Services Team (FAST) Clinic Supervisors:

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- A. Ensure critiqued youth-down drills are shared with FAST staff. Submit critique and verification it was shared with FAST staff to the Juvenile Justice Program Manager (JJPM II) for record keeping.
- X. FAST:
 - A. Respond to Code Blues as directed by the IC/WC.
 - B. Notify the JJPM II and the FAST Clinic Medical Director of codes involving attempted suicides and/or mental health hospitalizations.
- XI. Watch Commander (WC)/Treatment Facility Supervisor (TFS):
 - A. Shall respond to the area.
 - B. Consult with the IC.
 - C. In consultation with Medical Services, call 911, or delegate this responsibility when outside personnel are needed and notify the Chief Probation Officer.
 - D. Contact Facility Director, or if after hours contact the on-call Director, and make appropriate notification.
 - E. Ensure the Code Blue is documented in the WC's log.
 - F. In the event outside Emergency Medical Services is needed, assign staff to help escort the emergency personnel to the incident area.
 - G. Call and advise the Chief Probation Officer and Assistant Chief Probation Officer when a youth is transported by ambulance.
 - H. Delegate which staff will accompany the youth in the ambulance and which staff will follow behind in a county vehicle for emergency room transport and/or Hospital Watch.
 - I. Review the CCTSS recording.
 - J. Ensure a copy of the handheld videotape is attached to the IR.
 - K. Evaluate the circumstances of the Code Blue, review all Incident Reports, and make evaluation of written reports with recommendations to Administration of the JDAC/TF.
 - L. Consult with the IC on corrective actions and/or training needs.
 - M. Participate in debriefing and offer Peer Support when necessary.
- XII. Facility Division Director I/II or On-call Division Director I/II (DDI/II):
 - A. Collect and review report packets.
 - B. Keep the Detention Corrections Bureau Deputy Chief Probation Officer apprised of the situation.
- XIII. Facility Safety and Security Officer/Designee:
 - A. Ensure AEDs are maintained properly per manufacturer's standards, making sure the battery is functioning properly and checking expiration of the pads.

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B. Inspect contents of first aid kits located in the WC's office monthly.

XIV. Food Service Supervisor:

A. Inspect first aid kits in the kitchen monthly.

638.5 ATTACHMENTS:

See attachment: [Code Blue and First Aid Attachment A \(Lexipol 3-23-21\).pdf](#)

Attachments

**Code Blue and First Aid
Attachment A (Lexipol 3-23-21).pdf**



TRACY REECE
Chief Probation Officer

JULIE FRANCIS
Assistant Chief Probation Officer

First Aid Supply List/Refill Request

Date: _____ Unit: _____ Printed Name/Signature: _____

Prescription Lock #: _____

DESCRIPTION **QUANTITY** **COMMENTS**

Items from Safety and Security

| | | | |
|------------------------------------|--|-------|--|
| 911 Tool | | 1 | |
| First Aid Handbook/Guide | | 1 | |
| Gloves, Large/ Med/ Small | | 1 box | |
| Protective Suits | | 3 | |
| Spill Clean-Up Kit | | 3 | |
| Wire Cutter | | 1 | |
| Tourniquet | | 1 | |
| Items from Medical Services | | | |
| Band-Aid, 1" x 3" | | 1 box | |
| Band-Aid, 2" X 4" | | 1 box | |
| Cotton Swabs, Non-Sterile | | 10 | |
| First Aid Supply Refill List | | 1 | |
| Gauze 4x4 | | 4 | |
| Medical Tape | | 2 | |
| Shoe Covers | | 5 | |
| Microshield, CPR | | 2 | |
| Surgical Masks | | 3 | |