

## Health Assessments (Title 15, Sections 1410, 1416, 1417, and 1432; NCCHC)

### 709.1 PURPOSE:

To ensure accurate and timely physical and medical examinations for early identification of conditions necessary to safeguard the health of youth in the Juvenile Detention and Assessment Centers (JDACs) and Treatment Facilities (TFs).

### 709.2 RESPONSIBILITIES:

- I. Health Service Manager:
  - A. Approve the Physical Examination and the Receiving Health Assessment.
  - B. Monitor adherence to this procedure by periodic review of logs, incident reports, safety reviews, and other safeguards conducted in the normal course of business on a weekly, monthly, and yearly basis.
- II. Supervising Correctional Nurse I/II:
  - A. Ensure all responsibilities and guidelines are carried out by the nursing staff.
- III. Correctional Nurse I/II:
  - A. Initiate the Receiving Health Assessment as soon as possible, not to exceed four (4) hours of initial intake:
    1. Schedule the youth with the on-site physician/provider for a physical exam within ninety-six (96) hours of admission, excluding holidays except for youth who have received a physical exam by the on-site provider within the previous twelve (12) months unless medically indicated.
  - B. Include the following in the Receiving Health Assessment:
    1. A current and/or past history of:
      - (a) Illness and/or previous hospitalizations
      - (b) Injuries
      - (c) Allergies (confirm with parent/legal guardian)
      - (d) Communicable Disease (current symptoms)
      - (e) Surgeries
      - (f) Body deformities and use of prosthetic devices (provide accommodation recommendations)
      - (g) Disabilities (provide accommodation recommendations)
      - (h) Alcohol/drug use and withdrawal symptoms
      - (i) Tobacco use
      - (j) Sexually transmitted diseases

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- (k) Psychiatric history/current status (suicidal ideations, self-injury)
  - (l) Medications
  - (m) Dental screening/assessment
  - (n) Dietary needs
  - (o) Special health requirements
  - (p) Eating disorders
  - (q) Skin integrity
  - (r) Physical or sexual abuse
  - (s) Family history of chronic illnesses
- C. Perform a urine pregnancy test on all females upon intake and repeat the test within fourteen (14) days if the youth states recent intercourse (within the last ten (10) calendar days).
  - D. Inquire about the youth's most recent sexual encounter regarding the use of contraception and condoms, screening for emergency contraception eligibility, and the need for prophylaxis for sexually transmitted infections.
  - E. Refer to the Standardized Procedures for Registered Nurses - Pregnancy, Postpartum, Emergency Contraception Pill, or Abortion, for applicable youth.
  - F. Provide assistance and counseling in accordance with the youth's expressed desires regarding her pregnancy whether she elects to keep the child, use adoptive services, or have an abortion.
    - 1. Refer the youth to the Forensic Adolescent Services Team (FAST) in accordance with their expressed desires regarding her pregnancy.
  - G. Follow the Standardized Procedure for Registered Nurses - Diagnostic Screening during the Intake Process.
  - H. Refer to the Intoxicated Youth and Youth with Substance Use Disorder department procedure and the Standardized Procedure for Registered Nurses – Intoxication or Withdrawal in the event the youth is identified as being intoxicated or having a substance use disorder.
  - I. Evaluate immunization status and update within seven (7) days of detention.
  - J. Perform a tuberculin skin test as outlined in the Standardized Procedures for Registered Nurses-Tuberculin Skin Test.
  - K. Identify and address immediate health needs and place potentially infectious youth or youth refusing intake screening on medical isolation until the health need is resolved or the screening is complete.
  - L. Obtain vital signs, height, and weight.
  - M. Perform audiometer screening and vision assessment annually or more frequently if the youth reports visual or hearing changes.

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- N. Make all possible efforts to obtain current prescriptions and/or prescribed medication(s) for youth currently taking medication.
  - O. Schedule youth with a history of acute/chronic medical conditions with the physician/provider the next business day or as directed by the Standardized Procedures for Registered Nurses.
  - P. Send youth with emergency health needs to an emergency room as indicated.
  - Q. Screen for lice and provide treatment to infested youth before their transfer to the living units.
  - R. Refer youth currently taking psychotropic medications and/or reported psychiatric history to FAST.
  - S. Provide instruction in oral hygiene and preventative oral education. Refer youth to the on-site dentist as outlined in the Dental Services: Routine and Emergency procedure.
  - T. Offer reproductive health services and testing for sexually transmitted diseases and document the response to offered services.
  - U. Document the disposition of medically cleared or not medically cleared youth referred to the emergency room, behavioral health, etc.
  - V. Review all records and implement orders for youth that are received from an outside agency/facility. Schedule with the on-site provider within ninety-six (96) hours if medically indicated.
- IV. Licensed Vocational Nurse (LVN)/Clinic Assistant:
- A. Assist the Correctional Nurse I/II with the collection of data within the scope of practice.
  - B. Assist with the evaluation of the youth's immunization status.
- V. Physician/Provider:
- A. Perform a physical examination with a full systems review within ninety-six (96) hours of intake, excluding holidays if one has not been completed in the last twelve (12) months. The exam shall be performed in an exam room in the medical clinic to protect the privacy of the youth and include, but is not limited to:
    - 1. A review and evaluation of all health information and documentation received by the nurse upon intake.
    - 2. Head, ears, eyes, throat, skin, lungs, heart, abdomen, genitalia, extremities, scalp, and basic neurological assessment with the consent of the youth.
    - 3. Obtain verbal permission and consideration of a gender-appropriate chaperone when a breast, rectal, pelvic, or external genitalia examination is indicated.
    - 4. Review sexual history and offer sexual health services.

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5. Determine if there are no substantial changes in the youth's health within the previous (12) twelve months.
  6. Clarify more specific information as needed (type and amount of drug use, etc.).
  7. Review the youth's social development (school, home, peer relationships, etc.).
  8. Order additional laboratory or diagnostic screenings if indicated.
- B. Complete a physical clearance on the Placement History and Physical Examination Forms if required from placements or for work and program assignments.
- C. Provide a medical examination to all pregnant youth which shall include:
1. Laboratory tests when indicated.
  2. Referral to Obstetrics (OB) Specialty Clinic.
- D. Determine the frequency and content of periodic health assessments based on protocols that are nationally recognized.
- E. Review and sign the Parent Verification form for all intakes.

#### **709.3 GUIDELINES:**

- A. The hands-on portion of the health assessment may be performed by a physician, physician assistant (PA), or nurse practitioner (NP). When significant findings are present, the responsible physician shall document his/her review of the health assessment done by the PA or NP.
- B. All suspected incidents of abuse shall be reported to Children and Family Services (CFS) pursuant to the Reporting of Suspected Child Abuse procedure.
- C. A sign shall be posted in the intake area identifying how to access health services.
- D. A copy of Welfare and Institutions Code Sections 220, 221, and 222 shall be posted in the JDAC intake area, to which all females have access for review.
- E. This procedure does not apply to the inter-facility transfer of youth.