



Maryland

DEPARTMENT OF
JUVENILE SERVICES

POLICY

SUBJECT: Youth Health Records
NUMBER: HC-328-18
APPLICABLE TO: Somatic Health Services Staff

APPROVED: _____ /s/ signature on original
Sam Abed, Secretary
DATE: _____ 4/4/18

- I. **POLICY**
Youth Health Records, paper and/or electronic, shall be systematically organized for the effective collection of health documents.

- II. **AUTHORITY**
 - A. Md. Code Ann., Human Services, §§9-203 to §9-204.
 - B. Md. Code Ann., Health General, §4-403
 - C. COMAR 10.01.16.04B
 - D. American Correctional Association (ACA) Standards, 4-JCF-4C-32 and 4-JCF-4C-33

- III. **DIRECTIVES/POLICIES RESCINDED**
None

- IV. **FAILURE TO COMPLY**
Failure to comply with the Department's Policy and Procedures shall be grounds for disciplinary action up to and including termination of employment.

- V. **STANDARD OPERATING PROCEDURES**
Standard operating procedures have been developed.

VI. REVISION HISTORY

DESCRIPTION OF REVISION	DATE OF REVISION
New policy issued.	April 4, 2018
Procedures revised – retention of youth medical records changed from 21 years old or until 5 years after the last medical record is made whichever period is longer, to 21 years old or until 7 years after the last medical record is made whichever period is longer	October 20, 2020

PROCEDURES

SUBJECT: Youth Health Records
NUMBER: HC-328-18
APPLICABLE TO: Somatic Health Services Staff

APPROVED: _____



Wallis Norman,
Deputy Secretary of Residential Operations

REVISION DATE: _____ 10/21/2020 _____

I. PURPOSE

To ensure that youth health records, paper and/or electronic, are systematically organized for the effective collection of health documents.

II. DEFINITIONS

SOAP format means the acronym for the documentation method employed to create a patient's chart using four components: Subjective, Objective, Assessment, and Plan.

III. PROCEDURES

A. Components of the Youth Health Record

1. A health record file shall be established for all youth admitted to a facility using a six-part folder to organize all of the documents. The front of the folder shall be marked as **CONFIDENTIAL**.
2. The health record file shall be made available to and shall be used for documentation by all the health care professionals (e.g., nurses, physicians, dentists, optometrists, dietitians, behavioral health staff, and medical support staff) providing care on-site at DJS facilities.
3. All medical, psychiatric, psychological, behavioral health, and dental documents shall be organized and maintained in the youth's health record. All signature and titles of providers who make entries in the Youth Health Record must be legible. All health care records are documented with the place, date and time of health encounters.
4. All documents shall be arranged in chronological order with the most current appearing first. Youth identification shall be on each sheet.
5. The Youth Health Records shall be organized as follows:

SECTION **TITLE**

I. Order, Admission and Consent Forms

- a. Immunization Tracking and Referral form
- b. Physician Order Forms
- c. Intake Form with demographic information
- d. Consent Forms
- e. Transfer Records when indicated
- f. Inter-Departmental Transfer Record
- g. Court Orders
- h. FIRRS form

II. Problem List and Progress Notes

- a. Master Problem List of Diagnoses, Treatments, and Disposition
- b. Individualized Treatment Plans
- c. Progress Notes
- d. DJS Discharge Summaries and Recommendations
- e. Sick Call Slips
- f. Nursing Report of Youth Injury

III. Screening, Assessment & Examination

- a. Admission Health Screening and Nursing Assessment
- b. History and Physical Examination
- c. Obstetrical and Gynecological Examination
- d. On-site and Off-Site Dental Records
- e. On-site and Off-site Optometry Records
- f. Immunization Records
- g. Nutritional Assessments

IV. Behavioral Health

- a. Psychological and Psychiatric Evaluation, Examination, Diagnosis, Treatment, Progress Notes, and Crisis Intervention Documentation. (Includes tele-psychiatry records.)
- b. Mental Health, Substance Abuse and Other Behavioral Health Documents
- c. Past psychiatric, mental health, or substance abuse records and discharge summaries from community behavioral health providers, placements, and in-patient psychiatric and substance abuse hospitalization.

V. Reports

- a. Laboratory Test Results
- b. X-ray and Diagnostic Reports
- c. Off-ground Referral and Consultation Reports from Specialists, Emergency Rooms, or Other Community Health Care Providers
- d. Discharge Summaries from Medical Hospitalizations
- e. Other Past Medical Records

VI Required and Miscellaneous Information

- a. Completed Medication Administration Records
- b. Health Status Alert Information
- d. Incident Reports
- e. Refusal forms
- f. Acknowledgement of Health Care Services form
- g. Release of Information forms

B. Record Sharing and Retention

1. Sharing

Upon request, the Health Administrator or designee may provide Youth Health Record information in accordance with federal law, Maryland law and regulation, and the *DJS Confidentiality Policy and Procedures*.

2. Retention

a. Active Files

- 1) A Youth Health Record shall be initiated for all youth admitted to a facility.
- 2) When a youth is readmitted, the Youth Health Record shall be removed from the Inactive Files and placed in the Active Files. All health information shall be updated as dictated by Department policy.

b. Inactive Files

The Youth Health Record shall be maintained in the Inactive File until the youth is 21 years old or until 7 years after the last medical record is made, whichever period is longer. After that time, the Youth Health Record may be destroyed.

C. Storage of Youth Health Records

1. All Youth Health Records, both active and inactive, shall be stored in a locked file cabinet in a secure area and marked **CONFIDENTIAL**.

- a. Active Youth Health Records shall be maintained in the Health Center.
- b. Inactive Youth Health Records shall be maintained in the Health Center or other appropriate secure area that can be accessed only by the nursing staff or the medical support staff.

2. The Youth Health Record shall be securely maintained separate from the youth's base file.

D. Destruction of Youth Health Records

All facilities shall destroy or forward youth health records for destruction in a manner that will preserve confidentiality and that is in accordance with Maryland law and the current applicable DJS records retention and destruction schedule.

IV. RESPONSIBILITY

The Health Administrator is responsible for implementation and compliance with this procedure.

V. INTERPRETATION

The Deputy Secretary for Operations shall be responsible for interpreting and granting any exceptions to these procedures.

VI. LOCAL OPERATING PROCEDURES REQUIRED

No

VII. DIRECTIVES/POLICIES REFERENCED

DJS Confidentiality Policy and Procedures

VIII. APPENDICES

None



DJS POLICY AND STANDARD OPERATING PROCEDURES

Statement of Receipt and Acknowledgment of Review and Understanding

SUBJECT: Youth Health Records
NUMBER: HC-328-18
APPLICABLE TO: Somatic Health Services Staff
REVISION DATE: October 20, 2020

I have received and reviewed a copy (electronic or paper) of the above titled policy and procedures. I understand the contents of the policy and procedures.

I understand that failure to sign this acknowledgment form within five working days of receipt of the policy shall be grounds for disciplinary action up to and including termination of employment.

I understand that I will be held accountable for implementing this policy even if I fail to sign this acknowledgment form.

SIGNATURE

PRINT FULL NAME

DATE

WORK LOCATION

SEND THE ELECTRONICALLY SIGNED COPY TO YOUR SUPERVISOR FOR PLACEMENT IN YOUR PERSONNEL FILE.