

POLICY

SUBJECT: Infirmery Care
NUMBER: HC-319-18
APPLICABLE TO: Somatic Health Services Staff

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

- I. POLICY**
All youth in the physical custody of DJS shall be provided access to infirmery care within a DJS facility or shall be referred off-site to a hospital for assessment and care.
- II. AUTHORITY**
 - A. Md. Code Ann., Human Services, §9-203 and §9-204.
 - B. American Correctional Association (ACA) Standard 4-JCF-4C-21
- 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 DIRECTIVES/POLICIES RESCINDED**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.	4/4/18

PROCEDURES

SUBJECT: Infirmery Care
NUMBER: HC-319-18
APPLICABLE TO: Somatic Health Services Staff

APPROVED: _____ /s/ signature on original
Linda McWilliams, Deputy Secretary
DATE: _____ 2/28/18

I. PURPOSE:

To provide guidelines for the provision of infirmery care to youth in DJS facilities.

II. DEFINITIONS:

Infirmery is the location where youth are housed separate from other housing units and provided health care services to meet their needs.

Qualified Behavioral Health Professional (QBHP) means the individuals employed by or contracted with DJS who provide evaluation, treatment, care, or rehabilitation to DJS youth for mental health and substance abuse services which may include their families. These include all staff licensed, or doctoral level psychologist under the supervision of a licensed psychologist; and alcohol and drug counselors that are licensed and certified to provide mental health and substance abuse treatment to the youth.

III. PROCEDURES:

A. SCOPE OF INFIRMARY CARE SERVICES

1. Youth shall be admitted to the infirmery when they require more closely monitored supervision, medical or behavioral health care, or nursing intervention than can be safely or easily managed on a unit.
2. Examples for which a youth may be admitted to a DJS infirmery include but are not limited to: post-operative recuperation; poorly controlled asthma or diabetes; sickle cell crisis or other health condition requiring frequent monitoring and/or pain control; moderate to severe drug or alcohol withdrawal; infectious disease requiring medical isolation and/or frequent nursing intervention for fever, cough, vomiting, or diarrhea; mental health condition that jeopardizes the safety of the youth or others; or a condition requiring wheel chair use, an orthopedic device/cast, electronic medical devices, frequent dressing changes, bedrest, or special bowel or urinary tract hygiene procedures.

3. While in the infirmary, youth shall be observed, receive treatment, and/or be separated from the general population as ordered by the DJS physician, nurse practitioner, or dentist.
4. A DJS physician and/or nurse practitioner shall be on-call 24 hours per day to manage youth in the infirmary.
5. A nurse shall be on duty at the facility 24 hours per day when youth are admitted to the infirmary.
6. Direct Care staff shall provide direct supervision 24 hours per day within sight or sound of youth admitted to the infirmary.
7. Youth rising to the level of needing hospital or emergency care shall be referred off-site to an emergency room for assessment for hospital admission.

B. INFIRMARY ADMISSION

1. A DJS physician, nurse practitioner, psychiatrist or dentist may admit a youth to the infirmary.
2. A nurse may place a youth in the infirmary while waiting for verbal or written admission orders from the physician, nurse practitioner, or dentist. If a verbal admission order is obtained, the physician, nurse practitioner, or dentist responsible for the youth's care shall sign the infirmary admission order and assess the youth on the next clinic session scheduled.
3. Admission orders shall include the youth's activity level, diet, medications, other treatment as necessary, and required nursing observation and medical follow-up.
4. A youth transferred to another facility for infirmary admission requires the approval from the DJS Medical Director or designee as well as the receiving facility Superintendent or designee.

C. CARE

1. Upon the youth's admission to the infirmary, the nurse shall:
 - a. Write an admission note in the Youth Health Record documenting the admission of the youth into the infirmary.
 - b. Include in the admission note the current health status of the youth, vital signs, observations, and plan of care.
 - c. Unless otherwise indicated by the orders, document the health status, activity, and observations of the youth in a progress note in the Youth Health Record a minimum of every two hours.
 - d. Note the health status when placing the youth in the infirmary on the Master Problem List and record a resolution date for the infirmary discharge on the Master Problem List when appropriate.
 - e. Complete the special needs treatment plans that delineate health-care guidelines for plan of care.
 - f. Complete all Health Status Alerts as needed and distribute, as indicated on the form, to facility staff who need to know.

2. Youth admitted to the infirmary must be seen by the health care provider responsible for the admission at each scheduled clinic held at that facility, unless otherwise ordered. The health care provider must document each clinical encounter on a progress note in the Youth Health Record.
3. If a psychiatrist admits a youth to the infirmary, then a qualified Behavioral Health professional shall access the youth daily when on-site or as ordered by the psychiatrist.

D. DISCHARGE

1. To be discharged from the infirmary, the youth must have a verbal or written order from the physician, nurse practitioner, psychiatrist or dentist. The order must include the date of discharge, the youth's activity level, diet, any changes in the medication, treatment, or nursing observation required, and the next time the youth is to be seen for follow-up, if indicated.
2. The nurse shall write an infirmary discharge note in a progress note in the Youth Health Record indicating any physician's orders and Health Status Alerts issued at the time of discharge from the infirmary.

E. EXCEPTIONS TO THE INFIRMARY CARE ADMISSION AND DISCHARGE PROCESS

1. In special circumstances, the Superintendent may place youth in the infirmary for sheltered housing or a more protected environment. If infirmary space is limited and an infirmary bed is needed for a youth with a health condition, then the infirmary admission for the health condition shall take precedence over the administrative admission. The Superintendent must inform the nursing supervisor of the placement and removal of a youth from the infirmary for administrative reasons.
2. If the court orders a youth to the infirmary, DJS shall seek clarification from the court as to the reason(s) for the infirmary admission so that DJS may better serve the youth. When appropriate, DJS will ask the court to allow the DJS Medical Director and facility Superintendent to determine need for continued infirmary placement after all admission assessments have been completed.

IV. RESPONSIBILITY

The Medical Director, Director of Behavioral Health, Health Administrator and the Superintendent are responsible for implementation and compliance with this procedure.

V. INTERPRETATION

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

VI. LOCAL OPERATING PROCEDURES REQUIRED

No

VII. DIRECTIVES/POLICIES REFERENCED
No policies referenced.

VIII. APPENDICES
None



DJS POLICY AND STANDARD OPERATING PROCEDURES

Statement of Receipt and Acknowledgment of Review and Understanding

SUBJECT: Infirmery Care
NUMBER: HC-319-18
APPLICABLE TO: Somatic Health Services Staff

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 ORIGINAL, SIGNED COPY TO THE DIRECTOR OF THE DJS OFFICE OF HUMAN RESOURCES FOR PLACEMENT IN YOUR PERSONNEL FILE.