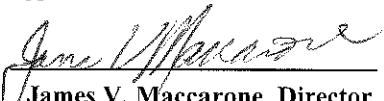


**MISSISSIPPI DEPARTMENT OF HUMAN SERVICES  
DIVISION OF YOUTH SERVICES  
OAKLEY YOUTH DEVELOPMENT CENTER**

<b>Subject:</b> <b>Emergency Medical Response and Services</b>		<b>Policy Number: 26</b>
<b>Number of Pages: 5</b>		<b>Section: XI</b>
<b>Attachments</b> Youth Injury and Assessment Form XL26.A	<b>Related Standards &amp; References</b> ACA Juvenile Health Care Performance Based Standards 2009: 4-JCF-4C-12, 4-JCF-4C-54	
<b>Effective Date:</b> 06/09/06 <b>Revision Date:</b> 03/01/07,02/04/08, 04/25/08, 05/01/11, 11/01/5/13 <b>Review Date:</b> 11/1/14, 11/12/15	<b>Approved:</b>  <b>James V. Maccarone, Director</b>	

**I. POLICY**

It is the policy of the Mississippi Department of Human Services, Division of Youth Services, to provide for the availability of 24-hour emergency medical, dental and psychiatric services that include arrangements for the following: (4-JCF-4C-12)

- On-site emergency first aid and crisis intervention
- Emergency on-call 24-hours per day, Physician, Dentist, and Psychiatrist if an emergency facility is not located in a nearby community
- Emergency evacuation and/or transportation of youth from the facility
- Use of one or more designated hospital emergency rooms or other appropriate health care facilities

Direct care staff and other personnel shall be trained to respond to health-related situations within a four-minute response time. The training program established by the facility's training director in cooperation with the Facility Administrator and Health Authority and shall be conducted on an annual basis and shall include instruction on the following: (4-JCF-4C-54)

- Recognition of signs and symptoms, and knowledge of action required in potential emergency situations
- Administration of first aid
- Certification in cardiopulmonary resuscitation (CPR) and operation of the Automated External Defibrillator (AED) in accordance with the recommendations of the certifying health organization
- Methods of obtaining assistance
- Procedures for transporting youth or staff to appropriate medical facilities or health care providers

A Nurse or other health care personnel shall question, outside the hearing of other staff or youth if appropriate, each youth who reports to the medical clinic with an injury,

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regarding the cause of the injury. If, in the course of the youth’s clinic visit, a health care provider suspects staff-on-youth abuse that health care provider will immediately take all appropriate steps.

## II. DEFINITIONS

As used in this policy and procedure, the following definitions apply:

Medical Disaster- A scenario in which a significant portion of the student population or staff is either afflicted with an illness or are injured and require care over what the facility medical department can reasonably provide.

Facility Emergency- Any situation that causes the facility to enter into a period in which the facility control in question and the youth have to be contained or evacuated. Examples would be attempted or successful escape, riot or hostage situation.

Disaster- can be man made such as bomb threat or explosion or natural such as severe weather, or a fire that causes the youth to have to be contained or evacuated.

Serious Illness or Serious Injury – Any illness or injury to youth or staff which requires specialized or non-routine treatment by a physician, or which requires hospitalization.

## III. PROCEDURE

The facility shall provide all staff and other personnel with emergency first aid and cardiopulmonary resuscitation (CPR) training so that medical and non-medical staff may respond to a potential medical emergency within a four-minute response time.

- A. All facility staff shall be certified in CPR and first aid training in accordance with the requirements of the certifying health organization. The training director shall maintain all training records and a copy of first aid and CPR certification. Refer to the Division’s training policies.
- B. In the Event a youth sustains an injury, is ill, or is involved in any type accident, the facility medical department staff shall be notified immediately. If the youth’s condition warrants further assessment or treatment, the youth shall then be referred to the facility Physician, Dentist or Psychiatrist, if requiring immediate medical attention, transported to an emergency room for assessment and treatment.
  1. Non-medical staff shall administer first aid as appropriate to the situation and their training until medical staff is available. Refer to policy XI.4, Medical Facility Equipment and Environmental Monitoring and policy XI.5, First Aid Kits, Spill Kits and External Defibrillator.
  2. If the youth is unable to move, or to be safely moved to the medical department, the health care professional shall be notified by radio and phone.

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- a. Nursing staff shall respond to the youth's location and assess the need for on-site treatment or emergency medical referral.
- b. Refer to policy XI.25, Medical Consultation and Hospitalization and policy XI.27, Emergency Medical Referral, should a youth require off-site medical care as a result of an injury, illness, accident or experiencing severe, life-threatening intoxication (an overdose) or withdrawal.
3. If a youth or staff requires emergency transport, the facility staff shall utilize "911". The Director of Medical Services/designee shall be notified of all emergency transports as soon as reasonably possible.
4. The Nurse shall document completely, accurately, and timely any assessment and observations, the care provided by the nurse, and the youth's response to that care.
  - a. The Nurse shall document in the youth's health record, Interdisciplinary Progress notes XI.8.A. Policy XI.8, Health Record: Structure, Documentation and Confidentiality.
  - b. When documenting youth injuries the Registered Nurse shall use the Youth Injury and Assessment Form XI.26.A and the Interdisciplinary Progress Notes XI.8.A.
  - c. The Youth Injury and Assessment Form (YIAF) shall be maintained in the youth's health record under the tab Youth Injury and assessments. This form is completed by a Registered Nurse.
    - i. Any YIAF that has documentation of allegations or suspicions of child abuse shall be forwarded to the Facility Administrator.
    - ii. A copy of the YIAF shall be given to the Shift Supervisor
5. The Nurse shall timely consult and report to, as necessary other nurses and/or practitioners for any follow-up care and treatment. Any significant care and follow-up treatment shall be documented on the Medical Department Shift Report XI.10.A.
6. If a death occurs, the Director of Medical Services, Facility Administrator and Division Director, shall be notified. The Division Director shall request a post-mortem. The results of the post-mortem along with the youth's health record shall be forwarded to the Division Director as necessary.
7. If the youth sustains an injury the Nurse shall interview the youth, outside the hearing of other staff or youth. If during the course of the interview, the youth alleges and/or the Nurse suspects staff-on-youth abuse the nurse shall immediately:
  - a. Take all appropriate steps to preserve evidence. Photograph the injury. Print a copy of the photo/s for the youth's health record, a copy for the incident report and preserve the photo/s on the camera/computer hard drive for at least six months.
  - b. Report the suspected abuse to the appropriate officials including the Child

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Abuse Hotline as stated in the Duty to Report state statute (section 43-21-353).

- i. The Mississippi Department of Human Services operates a statewide Child/Adult Abuse/Neglect 24 hour hotline to receive reports.
  - ii. The Hotline phone number is 1-800-222-8000 or 601-359-4991.
  - c. Failure to comply with above requirements may result in disciplinary actions up to and including dismissal.
  - d. Complete a Youth Injury and Assessment Form XI.26.A.
  - e. Complete an incident report, if the Nurse observed incident.
  - f. Copy the Facility Administrator on all information.
  - g. Notify Director of Medical Services/designee as soon as reasonable possible.
8. If the student alleges by words or actions, abuse of a sexual nature the Nurse shall immediately: Refer to policy XV.7 PREA.
- a. Notify the Director of Medical Services/designee.
  - b. Take all necessary steps to preserve/document evidence.
  - c. In the event that the alleged sexual assault occurred within the last 72 hours the procedure shall be to send student to the appropriate emergency room for a sexual assault evaluation (exam).
  - d. If the act in question occurred outside of the 72 hour window contact the physician for further orders.
  - e. Report the suspected abuse to the appropriate officials including the Child Abuse Hotline as stated in the Duty to Report state statute (section 43-21-353). For staff reporting responsibilities refer to policy XV.7 PREA.
    - i. The Mississippi Department of Human Services operates a statewide Child/Adult Abuse/Neglect 24 hour hotline to receive reports.
    - ii. The Hotline phone number is 1-800-222-8000 or 601-359-4991.
  - f. Failure to comply with above requirements may result in disciplinary actions up to and including dismissal.
  - g. Complete a Youth Injury and Assessment Form XI.26.A.
  - h. Document all findings in the Interdisciplinary Progress Notes Form XI.8.A.
  - i. Copy the Facility Administrator on all information.

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- D. In the event of a facility emergency or disaster reference Policy XI.30 Pharmaceutical Prescribing, Procurement, Administration and Documentation Procedures- Procedures F, H, I.
  
- E. Medical Disaster: In the event of a medical disaster, the Director of Medical Services/ designee shall coordinate medical services with the local emergency room, local Fire Department, local County Medical Emergency Services, and the facility. Refer to Policy XI.30 Pharmaceutical Prescribing, Procurement, Administration and Documentation Procedures
  - 1. The Director of Medical Services/designee shall immediately notify the Facility Administrator.
  - 2. The Facility Administrator/designee shall notify the Division Director.
  - 3. The Facility Administrator/ designee shall make available to the Director of Medical Services any staff, as necessary.
  
- F. Medical emergency drills shall be performed at a minimum, annually and shall encompass at least one medical injury (not self inflicted) and one suicide or self harming incident
  - 1. The drills shall not be announced to medical staff before the beginning of said drill.
  - 2. Documentation of the drill results shall be given to the Director of Medical Services so that any changes in procedure or training regarding handling of the emergency procedure may be addressed.
  - 3. Drills shall be administered by personnel as outlined in Policy VIII.2- Emergency and Disaster Drills and Planning
  
- G. The Director of Medical Services shall revise this policy as necessary.