The purpose of this evaluation is to provide objective feedback based on a review of current Policies, ACA Health Care Standards and practice compliance.

**Health Authority** (MDYS Policy XI.2; ACA Standards 4-JCF-4C-33, 34, 36)

1. The facility employs a Registered Nurse (RN) as the on-site Health Services Coordinator. Yes ☐ No ☐
2. The facility contracts with a physician for on-site services. Yes ☐ No ☐
3. The Health Services Coordinator attends weekly Facility Department Head Meetings with the Facility Administrator. Date of last Meeting Attended:
4. The Health Services Supervisors complete the Statistical Reports Timely. Yes ☐ No ☐
5. The Health Services Supervisors meet with nursing staff at least monthly; agenda maintained. Yes ☐ No ☐
6. The Health Services Coordinator reviews the Health Care Policies Procedures annually. Yes ☐ No ☐

**Personnel Qualifications** (Policy XI.3; ACA Standards 4-JCF-4C-34, 50, 51, 52)

1. The Health Services Supervisors annually reviewed all professionals’ licenses and completes documentation on Form XI.3.A. Yes ☐ No ☐
2. The Health Services Supervisor maintains a listing of community specialty physicians. The resource listing is posted within the clinic setting and is updated annually. Date of Last Review: ____________ Yes ☐ No ☐
3. The Health Services Coordinator maintains a copy of the current physician’s contract. Yes ☐ No ☐

**COMMENTS**

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Revised: 11/19/09, 06/01/11
The staffing pattern is consistent with the various youth populations and adolescent health care needs. The Staffing plan is reviewed annually to determine the number and type of staff needed to provide adequate medical services provision for the identified need and mission. A letter of review signed by the Health Services Coordinator is forwarded to each Health Services Supervisor during the first quarter of the calendar year. The following report reflects the Approved Table of Organization and Nursing Vacancies:

### Approved Table of Organization:

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<thead>
<tr>
<th>Med. Dept. Staff (FTE)</th>
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<td>Health Service Supervisor</td>
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### Nursing Staff Vacancies: [Report Date: ____]

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<td>TOTALS</td>
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* Agency nurses are being utilized to supplement staffing requirements. The vacant positions are posted and have been advertised in local newspapers.

### Medical Facilities, Equipment, and Environment (Policy XI.4; ACA Standards 4-JCF-4C-59, 60M)

1. The Health Services Supervisor maintains necessary health publication as outlined in policy. Yes ☐ No ☐
2. The Health Services Supervisor maintains a medical equipment inventory list. Yes ☐ No ☐
3. Equipment is maintained in good working order. Yes ☐ No ☐
4. The Health Services Supervisor forwards requests to purchase major equipment to the Facility Administrator (who approves major equipment requests). Yes ☐ No ☐
5. The facility will provide adequate space for the Medical Department's needs. Yes ☐ No ☐
   - Space to allow for the private examination of youth.
   - Space to allow for private dental examination of youth.
6. Sufficient secured storage space is available for medical supplies and pharmaceuticals. Only health care professionals have keys to pharmaceutical storage areas. Yes ☐ No ☐
7. Medical Department keys are stored separate from facility keys. Yes ☐ No ☐
8. Clinic area is neat and clean. Yes ☐ No ☐
9. Laboratory areas are safe and are equipped with appropriate staff protection items. Yes ☐ No ☐
10. Medical instruments are routinely counted and inventoried. Inventory logs are maintained to verify count. Yes ☐ No ☐

### Health Screening, Appraisal, and Examination (Policy XI.15 and XI.16; ACA Standards 4-JCF-4C-01M, 02M, 03M, 04)

1. Youth are screened by a Nurse upon admission to the facility. Yes ☐ No ☐
2. Youth are examined by a Physician/designee within 14 day of admission. Yes ☐ No ☐
3. The facility's Physician/designee reviews and signs the youth's medical record on intake. Yes ☐ No ☐
4. The Admission Log (XI.15.B) is completed and available for review at the nursing station. Yes ☐ No ☐
5. Annual physical exams are completed on each youth. Yes ☐ No ☐
COMMENTS

Access to On-Site Health Care (Policy XI.13; ACA Standards 4-JCF-4C-05M, 06)

1. Accessing health care is explained to youth upon arrival to the facility. Yes □ No □
2. Nursing Health Call is conducted at least five (5) days per week. Youth who sign-up for Health Call are seen timely. Yes □ No □
3. Physician Health Call is scheduled at least one (1) day per week. Youth who are referred to Physician Health Call are seen timely. Yes □ No □

COMMENTS

Inpatient and Outpatient Hospital Services and Specialty Consultants (Policy XI.25; ACA Standards 4-JCF-4C-07, 08, 14)

1. A current “Letter of Hospital Agreement” is available for review. List below: Yes □ No □ N/A □
   The hospitals listed below are utilized as needed for in-patient services:

2. When health care is required beyond the resources available in the facility, as determined by a Physician, the youth is transported timely to a medical facility where such care is provided. Yes □ No □
3. Facility staff provide supervision and security when youth are admitted to a hospital or while receiving outpatient services. Yes □ No □

COMMENTS

Dental Screening and Examination (Policy XI.19; ACA Standards 4-JCF-4C-15)

1. The facility contracts with a Dentist for on-site services. Yes □ No □
2. A nurse on intake completes an admission dental screening. Yes □ No □
3. Dental exams are completed within fourteen (14) days of admission to the facility. Yes □ No □
4. Dental Cleaning is completed bi-annually. Yes □ No □
5. Youth who are referred to Dental Health Call are seen timely. Yes □ No □
6. Dental instruments are routinely counted and inventoried. Inventory logs are maintained to verify count. Yes □ No □
7. Dental X-ray equipment is licensed by the Mississippi Department of Radiological Safety Yes □ No □
Female Health Services (Policy XI.21; ACA Standards 4-JCF-4C-19)

1. Gynecological services are provided as needed. 
   Yes [ ] No [ ] N/A [ ]

2. Obstetrical Services are provided as needed. 
   Yes [ ] No [ ] N/A [ ]

COMMENTS

Administration of Treatment (Policy XI.14; ACA Standards 4-JCF-4C-10, 19)

1. Standing Orders are maintained and updated annually. Date of last update: 
   Yes [ ] No [ ]

2. Standing Orders are activated according to the prescribed treatment signed off by the Physician. 
   Yes [ ] No [ ]

3. Medication Formulary is maintained and available to nursing and physician. 
   Yes [ ] No [ ] N/A [ ]

COMMENTS

Informed Consent/Authorization to Treat (Policy XI.11; ACA Standards 4-JCF-4C-43)

1. Parents are informed by phone and/or written notification when a youth requires significant off-site medical care required in Department Policy. 
   Yes [ ] No [ ]

2. The Facility Administrator or designee signs all Consent/Authorization to Treat Forms. 
   Yes [ ] No [ ]

COMMENTS

Pharmaceutical & Medical Supplies (Policy XI.29, XI.30, XI.31 and XI.32; ACA 4-JCF-4C-27M, 28, 29)

1. Pharmaceuticals are prepared by the contracted pharmacy. 
   Yes [ ] No [ ]

2. Pharmacy Policy Manuals are current and up-to-date. 
   Yes [ ] No [ ]

3. Medications are only administered by licensed nurses or trained personnel. 
   Yes [ ] No [ ]

4. Medication Administration Records (MAR’s) are utilized for documentation. 
   Yes [ ] No [ ]

5. Medications are administered timely and in accordance with the physician order and Agency Policy. 
   Yes [ ] No [ ]

6. Medications are properly maintained in a clean and neat order. Medication and storage areas are locked when not in use. 
   Yes [ ] No [ ]

7. Continuous inventory control is maintained on all prescription and over-the-counter medications. Count is correct. 
   Yes [ ] No [ ]

8. Contingency medications are inventoried by nursing staff daily, Monday through Friday. 
   Yes [ ] No [ ]

9. Continuous inventory control is maintained on all medical sharps. Count is correct. 
   Yes [ ] No [ ]

10. Sharps inventory is completed on each shift; log records are maintained for count verification. 
    Yes [ ] No [ ]

11. Pharmaceutical disposal records are maintained. 
    Yes [ ] No [ ]

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12. All Pharmacy licenses are current and posted.

**First Aid and Emergency Care** (Policy XI.26; ACA Standards 4-JCF-4C-12, 14, 52, 58)

1. Emergency Medical Services are locally available for transporting youth.
2. First Aid Kits and AED are inspected monthly.
3. All required staff are trained in First Aid and CPR as outlined in MDYS Policy.

**Specialized Health Programs & Education** (Policy XI.20 and XI.22; ACA Standard 4-JCF-4C-16, 17, 18, 26)

1. The Physician completes Medical Treatment Plans on youth with special needs.
2. Youth with special needs are provided individual education/training by a nurse.
3. Health education is provided to the youth by nursing staff.
4. Special Diets are available when written by the physician.
5. The Health Services Supervisors and nurses are familiar with MDYS Policy XI.23, Therapeutic Diets and Dietary Referrals.
6. The Health Services Supervisors and nurses are familiar with MDYS Policy XI.24, Juvenile Participation in Medical Research.

**Contagious and Infectious Diseases, Management of** (Policy XI.33, XI.34, XI.35, XI.36, and XI.37; ACA Standards 4-JCF-4C-22, 23, 24, 25)

1. HIV testing of youth is completed after a doctor order has been written.
2. Youth pre-counseling is held prior to HIV testing as evidence by chart documentation.
3. Youth post-counseling is held only when positive results are received as evidence by chart documentation.
4. There are no youth in the facility requiring medical isolation. Yes □  No □
5. Youth receive PPD Skin Testing on admission. Yes □  No □  N/A □
6. Youth yearly PPD Skin Testing is completed, when applicable Yes □  No □
7. Staff yearly PPD Skin Testing is completed. Yes □  No □  N/A □
8. Youth immunizations are complete and update as required. Yes □  No □  N/A □
9. Staff Hepatitis B shots are offered and provided when requested. Yes □  No □  N/A □
10. MDH Disease Control Manual is available on line. Yes □  No □

**COMMENTS**

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**Exposure Control** (Policy XI.38; ACA Standards 4-JCF-4C-61)

1. Spill Kits are inspected monthly. Yes □  No □
2. Standard Precautions signs are posted throughout the facility. Yes □  No □
3. Management of Biohazardous Waste is maintained. Yes □  No □

**COMMENTS**

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**Health Records and Confidentiality** (Policy XI.8; ACA Standards 4-JCF-4C-31, 32)

1. Medical records are maintained confidentially in the Medical Department and separate from the commitment records. Yes □  No □
2. Medical Records are kept under a lock system and accessible only by health care professionals. Yes □  No □
3. Medical Records are maintained under hard cover and stamped “confidential”. Yes □  No □
4. Medical Records are transferred within the system as youth leaves the institution. Yes □  No □  N/A □
5. Medical Records are maintained in a neat and orderly manner. Yes □  No □

**COMMENTS**

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**Health Department Inspections and/or Visits from other out-side Local and/or State Agencies:**

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File Review:

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<th>Comments</th>
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**Medical Services Review, Monitoring, and Reporting (MDYS Policy XI.39):**

The following monitoring tools and reports are complete and/or reviewed timely by the Health Services Supervisor(s) as required by Department Policies and Procedures:

**At least annually, the following form is completed:**

- Health Care Personnel Licensure Verification Form (XI.3.A) Yes ☐ No ☐

**At least annually, the following form is reviewed:**

- Medical Services Review and Monitoring Tool (XI.40.C) Yes ☐ No ☐

**At least monthly, the following forms and logs are completed and/or reviewed:**

- Laboratory Logs reviewed and monitored for compliance of returned lab results (XI.17) Yes ☐ No ☐
- Health Care Services Monthly report (XI.40.A) Yes ☐ No ☐
- Health Care Services Statistical data Report (XI.40.C) Yes ☐ No ☐
- Medical Records Review Monitoring Tool Form (XI.40.C) Yes ☐ No ☐
- Autoclave Log (XI.4.B) Yes ☐ No ☐
- Medical Equipment Check List Form (XI.4.C.1 and 2) Yes ☐ No ☐
- First Aid/Spill Kit Inspection Record Form (XI.5.B) Yes ☐ No ☐
- AED Unit Inspection Form (XI.5.C) Yes ☐ No ☐
- Supply Control Form (XI.6.A) Yes ☐ No ☐
- Supply Control Monitoring Form (XI.6.B) Yes ☐ No ☐
- Sharps Inventory Control Form (25) Count (XI.7.A) Yes ☐ No ☐
- Sharps Inventory Control Form (50) Count (XI.7.B) Yes ☐ No ☐
- Medical Instrument/Sharps Inventory Daily Count Form (XI.7.C) Yes ☐ No ☐
- Dental Instrument/Sharps Inventory Count Form (XI.7.D) Yes ☐ No ☐
- Medical Instrument Sigh-Out Form (XI.7.E) Yes ☐ No ☐
- Dental Instrument Sigh-Out Form (XI.7.F) Yes ☐ No ☐
- Health Call Log (XI.13.B) Yes ☐ No ☐
- Physician Health Call Referral Log (XI.13.C) Yes ☐ No ☐
- Admission Log (XI.15.B) Yes ☐ No ☐
- Dental Visit Log (XI.19.B) Yes ☐ No ☐
- Medical Department Off-Campus Log (XI.25.A) Yes ☐ No ☐
- Medication Error Report Form (XI.30.C) Yes ☐ No ☐
- Non-Prescription Pharmaceuticals Control Form (XI.31.A) Yes ☐ No ☐
- Contingency Medication and Controlled Substance Daily Count Sheet (XI.31.B) Yes ☐ No ☐
- Non-Prescription Pharmaceuticals Supply Monitoring Form (XI.31.C) Yes ☐ No ☐

**Medical Contract Services Schedule:**

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<th>Wednesday</th>
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Form XI.40.C

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## Compliance Summary

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