**DEPARTMENT OF JUVENILE JUSTICE CERTIFICATION UNIT**

**JUVENILE DETENTION CENTER**

**Resident Medical File Review**

**FACILITY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ REVIEWER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Case Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Begin Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

| **Regulation** | **Compliant**  **(Y, N, NA, or ND)** | **Comments** | **Supervisor’s Initials/Date** |
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| **HEALTH CARE PROCEDURES** | | | |
| **6VAC35-101-820 (A). Mental health screening. CRITICAL**  Each resident shall undergo a mental health screening, as required by § 16.1-248.2 of the Code of Virginia, administered by trained staff, to ascertain the resident's suicide risk level and need for a mental health assessment. Such screening shall include the following: |  |  |  |
| 1. A preliminary mental health screening, at the time of admission, consisting of a structured interview and observation as provided in facility procedures; and |  |  |  |
| 1. The administration of an objective mental health screening instrument within 48 hours of admission. |  |  |  |
| **6VAC35-101-820 (B). Mental health screening.**  If the mental health screening indicates that a mental health assessment is needed, it shall take place within 24 hours of such determination as required in § 16.1-248.2 of the Code of Virginia. |  |  |  |
| **6VAC35-101-950 (A). Health care procedures. CRITICAL**  Written procedures shall be developed and implemented for:   1. Providing or arranging for the provision of medical and dental services for health problems identified at admission; 2. Providing or arranging for the provision of on-going and follow-up medical and dental services after admission; 3. Providing or arranging for the provision of dental services for residents who present with acute dental concerns; 4. Providing emergency services for each resident as provided by statute or by the agreement with the resident's legal guardian; 5. Providing emergency services for any resident experiencing or showing signs of suicidal or homicidal thoughts, symptoms of mood or thought disorders, or other mental health problems; and 6. Ensuring that the required information in subsection B of this section is accessible and up to date. |  |  |  |
| **6VAC35-101-950 (B). Health care procedures.**  The following written information concerning each resident shall be readily accessible to staff who may have to respond to a medical or dental emergency: |  |  |  |
| 1. Name, address, and telephone number of the physician and dentist to be notified; |  |  |  |
| 1. Name, address, and telephone number of a relative or other person to be notified; and |  |  |  |
| **3**. Information concerning:  a. Use of medication; |  |  |  |
| b. All allergies, including medication allergies; |  |  |  |
| c. Substance abuse and use; and |  |  |  |
| d. Significant past and present medical problems. |  |  |  |
| **6VAC35-101-970 (B). Consent to and refusal of health care services.**  The resident and parent or legal guardian, as appropriate and applicable, shall be advised by an appropriately trained medical professional of (i) the material facts regarding the nature, consequences, and risks of the proposed treatment, examination, or procedure and (ii) the alternatives to it. |  |  |  |
| **6VAC35-101-970 (D). Consent to and refusal of health care services.**  When health care is rendered against the resident's will, it shall be in accordance with applicable laws and regulations. |  |  |  |
| **6VAC35-101-980 (A). Health screening at admission. CRITICAL**  To prevent newly arrived residents who pose a health or safety threat to themselves or others from being admitted to the general population, all residents shall immediately upon admission undergo a preliminary health screening consisting of a structured interview and observation by health care personnel or health-trained personnel, as defined in 6VAC35-101-10 (definitions), as approved by the health authority. |  |  |  |
| **6VAC35-101-980 (B). Health screening at admission. CRITICAL**  Residents admitted who pose a health or safety threat to themselves or others shall be separated from the detention center's general population but provision shall be made for them to receive comparable services. |  |  |  |
| **6VAC35-101-980 (C). Health screening at admission. CRITICAL**  Immediate health care is provided to residents who need it. |  |  |  |
| **6VAC35-101-990 (A). Tuberculosis screening. CRITICAL**  Within five days of admission to the facility each resident shall have had a screening assessment for tuberculosis. The screening assessment can be no older than 30 days. |  |  |  |
| **6VAC35-101-990 (B). Tuberculosis screening. CRITICAL**  A screening assessment for tuberculosis shall be completed annually on each resident. |  |  |  |
| **6VAC35-101-1000 (A). Residents' medical examination; responsibility for preexisting conditions.**  Within five days of admission, all residents who are not directly transferred from another detention center shall be medically examined by a physician or a qualified health care practitioner operating under the supervision of a physician to determine if the resident requires medical attention or poses a threat to the health of staff or other residents. A full medical examination is not required if there is documented evidence of a complete health examination within the previous 90 days; in such cases, a physician or qualified health care practitioner shall review the resident's health record and update as necessary. |  |  |  |
| **6VAC35-101-1030 (A). Residents' health care records. CRITICAL**  Each resident's health record shall include written documentation of (i) the initial physical examination, (ii) an annual physical examination by or under the direction of a licensed physician including any recommendation for follow-up care, and (iii) documentation of the provision of follow-up medical care recommended by the physician or as indicated by the needs of the resident. |  |  |  |
| **6VAC35-101-1030 (B). Residents' health care records.**  Each physical examination report shall include:   1. Information necessary to determine the health and immunization needs of the resident, including:   a. Immunizations administered at the time of the exam; |  |  |  |
| b. Vision exam; |  |  |  |
| c. Hearing exam; |  |  |  |
| d. General physical condition, including documentation of apparent freedom from communicable disease, including tuberculosis; |  |  |  |
| e. Allergies, chronic conditions, and handicaps, if any; |  |  |  |
| f. Nutritional requirements, including special diets, if any; |  |  |  |
| g. Restrictions on physical activities, if any; and |  |  |  |
| h. Recommendations for further treatment, immunizations, and other examinations indicated. |  |  |  |
| 1. Date of the physical examination; and |  |  |  |
| 1. Signature of a licensed physician, the physician's designee, or an official of a local health department. |  |  |  |
| **6VAC35-101-1030 (C). Residents' health care records.**  Each resident's health record shall include:   1. Notations of health and dental complaints and injuries and a summary of the residents symptoms and the treatment given; and |  |  |  |
| 1. A copy of the information required in subsection B of 6VAC35-101-950 (health care procedures). |  |  |  |
| **6VAC35-101-1050 (B). Hospitalization and other outside medical treatment of residents.**  In accordance with applicable laws and regulations, the parent or legal guardian, as appropriate and applicable, shall be informed that the resident was taken outside the facility for medical attention as soon as is practicable. |  |  |  |
| **MEDICATION** | | | |
| **6VAC35-101-1060 (F).**  All medications shall be administered in accordance with the physician's or other prescriber's instructions and consistent with the requirements of § 54.2-2408 of the Code of Virginia and the Virginia Drug Control Act (§ 54.1-3400 et seq.). |  |  |  |
| **6VAC35-101-1060 (G).**  A medication administration record shall be maintained on all medicines received by each resident and shall include: |  |  |  |
| 1. Date the medication was prescribed or most recently refilled; |  |  |  |
| 2. Drug name; |  |  |  |
| 3. Schedule for administration; |  |  |  |
| 4. Strength; |  |  |  |
| 5. Route; |  |  |  |
| 6. Identity of the individual who administered the medication; and |  |  |  |
| 7. Dates the medication was discontinued or changed. |  |  |  |
| **6VAC35-101-1060 (H). CRITICAL**  In the event of a medication incident or an adverse drug reaction, first aid shall be administered if indicated. |  |  |  |
| Staff shall promptly contact a poison control center, pharmacist, nurse, or physician and shall take actions as directed. |  |  |  |
| If the situation is not addressed in standing orders, the attending physician shall be notified as soon as possible and the actions taken by staff shall be documented. |  |  |  |
| A medication incident shall mean an error made in administering a medication to a resident including the following: (i) a resident is given incorrect medication; (ii) medication is administered to the incorrect resident; (iii) an incorrect dosage is administered; (iv) medication is administered at a wrong time or not at all; and (v) the medication is administered through an improper method. A medication error does not include a resident's refusal of appropriately offered medication. |  |  |  |
| **6VAC35-101-1060 (J).**  Medication refusals shall be documented including action taken by staff. The facility shall follow procedures for managing such refusals which shall address:   1. Manner by which medication refusals are documented; and 2. Physician follow-up, as appropriate. |  |  |  |
| **RESIDENTS' HEALTH CARE RECORDS IN POST-DISPOSITIONAL DETENTION PROGRAMS.** | | | |
| **6VAC35-101-1230 (A). Residents' health care records in postdispositional detention programs.**  A. In addition to the requirements of 6VAC35-101-1030 (residents' health care records), each resident's health record shall include or document all efforts to obtain treatment summaries of ongoing psychiatric or other mental health treatment and reports, if applicable. |  |  |  |
| **6VAC35-101-1230 (B). Residents' health care records in postdispositional detention programs.**  B. In addition to the information required by 6VAC35-101-950 (health care procedures), the following information shall be readily accessible to staff who may have to respond to a medical or dental emergency:  1. Medical insurance company name and policy number or Medicaid number; and  2. Written permission for emergency medical care, dental care, and obtaining immunizations or a procedure and contacts for obtaining consent. |  |  |  |
| **DELIVERY OF MEDICATION IN POST-DISPOSITIONAL DETENTION PROGRAMS** | | | |
| **6VAC35-101-1250. Delivery of medication in post-dispositional detention programs.**  A detention center that accepts post-dispositional placements exceeding 30 consecutive days pursuant to § 16.1-284 of the Code of Virginia shall have and follow written procedures, approved by its health authority, that either permits or prohibits self-medication by post-dispositional residents. The procedures may distinguish between residents who receive post-dispositional services entirely within the confines of the detention center and those who receive any post-dispositional services outside the detention center. The procedures shall conform to the specific requirements of the Drug Control Act (§ 54.1-3400 et seq. of the Code of Virginia). |  |  |  |
| **RELEASE FROM A POST-DISPOSITIONAL DETENTION PROGRAM** | | | |
| **6VAC35-101-1270. Release from a post-dispositional detention program.**  In addition to the requirements in 6VAC35-101-840 (discharge), information concerning the resident's need for continuing therapeutic interventions, educational status, and other items important to the resident's continuing care shall be provided to the legal guardian or legally authorized representative, as appropriate, at the time of the resident's discharge from the facility. |  |  |  |