I. AUTHORITY

The Commissioner of Corrections adopts this policy pursuant to the authority contained in 34-A M.R.S.A. Section 1403.

II. APPLICABILITY

All Departmental Juvenile Facilities

III. POLICY

It is the policy of the Department of Corrections to assure that all residents are moved on-site or transported off-site for health care services in a safe and timely manner and with appropriate security precautions. Reasonable accommodations to address any special needs or disabilities shall be made as part of the movement or transport arrangement.

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VI. PROCEDURES

Procedure A: Non-Emergency Health Care

1. The Health Services Administrator (HSA), or designee, is responsible to inform the facility security staff of all residents scheduled for appointments for on-site
health care services, e.g., sick call, dental care, eye care, mental health services, etc., or for appointments for off-site health care services. Health care staff shall arrange for reasonable accommodations to permit a resident with a special need or disability to attend the appointment.

2. Security staff shall be given notice of all on-site health care appointments scheduled for the next day, unless extenuating circumstances exist. If there are extenuating circumstances, notice shall be given as soon as possible.

3. Security staff shall instruct the resident to report to the health care appointment or shall arrange for the resident to be escorted to the appointment. If a resident refuses to report for the appointment, security staff shall escort the resident to report.

4. Security staff shall receive a minimum of a twenty-four (24) hour notice of all off-site health care appointments, unless extenuating circumstances exist. (See Attachment A, Health Care Transport Form)

5. Off-site health care appointments may only be cancelled by health care staff or the Chief Administrative Officer.

6. Health care staff shall evaluate the resident or the resident’s health care record to determine suitability for travel, with attention to communicable disease issues and any specific precautions to be taken by the transporting officers.

7. Health care staff shall determine any necessary special accommodations for the transport including the use of a medical transport service, medication, and behavior management procedures. Health care staff shall inform security staff if it has been determined that the resident is pregnant, so that the transport is conducted in accordance with Policy 9.17.

8. If a resident is to be transported by a medical transport service in a non-emergency situation, security staff must be in the vehicle during the entire transport. Other security precautions may be taken as necessary.

9. The Health Services Administrator, or designee, shall assure appropriate health care information is provided to the receiving facility or off-site health care provider.

10. The Health Services Administrator, or designee, shall be informed of any scheduled health care appointment that is not completed as scheduled. The Health Services Administrator, or designee, shall consult with the facility Chief Administrative Officer, or designee, regarding any missed appointment(s) that may create a health risk for the resident. The Health Services Administrator’s quarterly report shall include the number and type of any off-site medical
appointments that were not completed as scheduled as part of the quarterly report to the facility’s Chief Administrative Officer.

Procedure B: Emergency Health Care

1. In any case of on-site movement or off-site transport which is the result of a health care emergency, the procedures required in Procedure A shall be completed to the extent allowed as dictated by the health care needs of the resident.

2. In all cases in which a resident is to be transported from a facility to a hospital in an emergency vehicle, security staff must be in the emergency vehicle during the entire transport. Staff arranging for the emergency transport shall ensure that the responding emergency service is informed of the requirement that security staff be in the emergency vehicle during the entire transport. Other security precautions may be taken as necessary.

VII. PROFESSIONAL STANDARDS

ACA:

4-JCF-2A-16 There are guidelines to govern the transportation of juveniles outside the facility and from one jurisdiction to another. These guidelines emphasize safety and the proper use of restraints and are made available to all personnel involved in transporting juveniles.

4-JCF-4C-12 (MANDATORY) Twenty-four-hour emergency medical, dental, and mental health services are available to the juvenile population. These services include the following:

1. On-site emergency first aid and crisis intervention
2. Emergency transportation of the juvenile from the facility
3. Use of one or more designated hospital emergency rooms or other appropriate health facilities
4. Emergency on-call, or available 24 hours per day, physician, dentist, and mental health professional services when the emergency health facility is not located in a nearby community

4-JCF-4C-14 A transportation system that assures timely access to health services that are only available outside the correctional facility is required. Such a system shall address the following:

1. Security procedures providing for nonemergency (standard) and emergency (ambulance) transport of juveniles
2. Medically sensitive conditions and/or specific precautions to be taken by transportation officer(s) are addressed and documented prior to transport
3. Use of a medical escort to accompany security staff, if indicated
4. Transfer of medical information for continuity of care
Designated direct-care staff and all health-care staff are trained to respond to health-related situations within a four-minute response time. The training program, established by the responsible health authority in cooperation with the facility administrator, is conducted on an annual basis to assure staff readiness and shall include at a minimum the following:

1. Recognition of signs and symptoms, and knowledge of action that is required in potential emergency situations
2. Recognition of signs and symptoms of mental illness, violent behavior, and acute chemical intoxication and withdrawal
3. Methods of obtaining assistance
4. Administration of basic first aid and certification in performing cardiopulmonary resuscitation (CPR) in accordance with the recommendations of the certifying health organization
5. Suicide intervention
6. Procedures for patient transfers to appropriate medical facilities or community-health-service providers