

Chapter: Health Care and Treatment	<b>Effective Date: 2/1/14</b>
<b>Title: Sick Call/Daily Triage of Healthcare Requests</b>	Page: 1 of 2
ACA: 4-JCF-4C-06	Replaces: HSP.04.05, 6/1/09

(a) **Standard.**

- (1) There is a process in place for all youth to initiate requests for health services on a daily basis. The process includes unimpeded youth access to Sick Call Request forms,  [HLS-910](#). A nurse triages all health care requests. A priority system is used to schedule health care services and must address routine, urgent, and emergent youth health care requests and conditions.
- (2) Sick call is available at least five days a week and provided by a qualified health care professional. A health care practitioner is available at least once a week to respond to youth health concerns.

(b) **Procedures.**

(1) **Nursing Sick Call.**

- (A) Youth may submit a sick call request seven days per week.
- (B) The **health services administrator (HSA)** ensures the HLS-910 forms are collected from the secured sick call drop boxes daily.
- (C) A **nurse** triages nursing, medical, dental, and mental health sick call requests daily.
- (D) The **HSA** schedules sick call times and posts the schedule in public and common locations.
- (E) A **nurse**:

- (i) conducts sick call at least once per day, five days per week, to evaluate and treat non-emergency illnesses or injuries;
- (ii) triages sick call requests on weekends or on days without scheduled sick call to determine the appropriate plan of care;
- (iii) triages youth health concerns reported by youth or staff and provides appropriate care and/or refers the youth to a provider;
- (iv) sees youth with non-emergency health concerns at the next scheduled nursing sick call;

Note: Youth with urgent health concerns are seen as soon as possible and referred to the appropriate health care professional as indicated. "Code Blue" procedures, as outlined in [INS.45.05](#), are followed for youth with emergency conditions.

- (v) reviews the youth's problem list and prompts/alerts in electronic medical record (EMR) before treatment is implemented;
- (vi) reviews the medical record to determine whether the health concern is recurrent (three or more times over a 14-day period) and if the youth has not seen a provider, the youth will be scheduled for an appointment with a provider;

Note: If referred to a provider, the youth is evaluated within seven days after referral.

- (vii) documents disposition of the sick call on the  [HLS-910](#) form;

- (viii) documents the nursing assessment and intervention in the EMR via a nursing assessment protocol or nurse's clinic note; and
- (ix) scans the HLS-910 into the EMR after sick call is completed.

(2) **Nursing Sick Call in the Security Unit.**

- (A) The **HSA** designates the time for nursing sick call in the security unit. The scheduled time must be approximately the same time each day.
- (B) **A nurse:**
  - (i) signs the security unit visitors' log upon entry into the security unit;
  - (ii) performs daily face-to-face rounds (seven days per week) on each youth in the security unit to receive any medical complaints;
  - (iii) completes a HLS-910 form on behalf of each youth with a reported health concern and provides the form to the infirmary staff for review and response;
  - (iv) completes the Security Unit Nurses' Log,  [INS-217](#), for each youth;
  - (v) notifies TJJD staff of any special needs of a youth; and
  - (vi) documents assessments and any treatment/care given in the EMR.

(3) **Disposition of Sick Call Request.**

The **HSA** ensures that:

- (A) completed HLS-910 forms are scanned into the EMR and shredded;
  - (B) the disposition of sick call requests is documented in the EMR on the nursing assessment protocol or nurse's clinic note.
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