

Chapter: Personnel	<b>Effective Date: 4/15/15</b>
<b>Title: Registered Nurse Responsibilities</b>	Page: 1 of 3
ACA: 3-JCRF-4C-03, 3-JCRF-4C-10	Replaces: HHS.15.20, 12/1/13

(a) **Standard.**

A registered nurse reviews halfway house health records and makes recommendations to the facility staff responsible for providing and coordinating youth health services. The nurse performs as a case manager and oversees the health care provided to ensure that youth receive timely and appropriate treatment as indicated. The nurse does not provide on-site physical assessments of youth and does not delegate nursing tasks to Texas Juvenile Justice Department (TJJD) non-medical staff.

(b) **Procedures.**

The **registered nurse:**

- (1) visits the halfway house regularly at the scheduled date/time and completes a Nurse Visit Report, [HLS-909](#);
- (2) meets with the human services specialist (HSS) at the beginning and end of each visit to review past and present concerns and events (e.g., new admissions, discharges, physician appointments, and medication error reports);
- (3) reviews the medical record and Halfway House Intake Health Screening form, [HLS-102](#), prepared by the HSS for each new admission, and completes the immunization/PPD section, and signs and dates the form;
- (4) reviews medication error reports prepared by the HSS or Juvenile Correctional Officer (JCO) since the last visit, records on the HLS-909, and attaches copies of the medication error reports to this report;
- (5) reviews the daily health record binder for youth health requests, action taken, youth response to treatment, and completion of recommendations made at the last nurse visit; records discrepancies, errors, or omissions on the HLS-909; and makes appropriate recommendations;
- (6) reviews Medication Administration Records (MARs) and the Pharmacy Replacement System (PRS) for:
  - (A) accurate transcription of the health care provider's order and consistency with the medication label;
  - (B) doses given as ordered;
  - (C) explanation of medications omitted or missed on the Treatment and Intervention Record, [HLS-505](#), and completion of Refusal Form, [HLS-520](#), if indicated;
  - (D) refusal form is completed and filed behind MAR for each medication refused by the youth; and
  - (E) accurately completed narcotic records;
- (7) records on the HLS-909 the youth's name and TJJD number with each medication discrepancy for that youth;
- (8) reviews sharps records for accuracy of sharps inventory;

- (9) ensures a copy of the Halfway House Medical, Dental, & Health History Report, [HLS-107](#), is filed with the HSS and maintains the HLS-107 in the daily health record binder behind the youth's picture;
- (10) monitors the chart audits until TJJD staff have completed all deficiencies and reports on the [HLS-909](#) form if deficiencies are not completed in a timely manner;
- (11) ensures the completed UTMB Correctional Managed Care Chart Audit Tool, [HLS-650](#), form received from the HSS:
  - (A) shows that all deficiencies have been corrected,
  - (B) is dated and signed, and
  - (C) has been filed by the HSS in the Chart Audit-Completed section of the health services management system binder and not filed in the medical file;
- (12) monitors the return of expired or discontinued medication and supplies to Correctional Managed Care (CMC) Central Pharmacy; records any needed returns on the HLS-909; notes and prescription number and name, strength, and amount of medication;
- (13) completes a Medication Error Report for each medication error that has not been reported by the HSS/JCO, notifies the provider for orders, and completes the following:
  - (A) assists the HSS or superintendent in preparing the action taken to prevent re-occurrence; (Note: The HSS/JCO and/or superintendent are responsible for signing as the TJJD representative.)
  - (B) files a copy in the medication error report section of the health services management system binder; and
  - (C) attaches a copy to the HLS-909 that is sent to the health services administrator (HSA);
- (14) inspects medication (prescription and over-the-counter), supplies, and storage areas; completes the Monthly Unit Pharmacy Audit form (Pharmacy Manual 75-15); and records completion of the pharmacy audit on the Nurse Visit Report for:
  - (A) cleanliness,
  - (B) expiration dates,
  - (C) proper storage in compliance with [HHS.30.05](#),
  - (D) compliance with Medical Supply List, [HHS.30.15](#), and
  - (E) adequate amount of stock;
- (15) monitors the ordering of the over-the-counter medication and supplies from UTMB CMC Central Pharmacy Warehouse for compliance with the medical supply list and assists as needed;
- (16) completes the HLS-909 form, files the form in the Nurse Visit Report section of the health services management system binder, and sends a copy to the HSA;
- (17) advises the HSA of any follow-up care that is required;
- (18) obtains approval and pre-certification numbers from Utilization Review Management and assists as needed with obtaining informed consent;
- (19) maintains the Off-Campus Medical Appointment Tracking Log, [HLS-908](#), for all appointments by:

- (A) ensuring two separate logs are maintained including:
    - (i) appointments requiring pre-authorization, and
    - (ii) appointments scheduled by RN for institutional appointments not requiring pre-authorization (i.e., medical/dental/nursing); and
  - (B) filing the log in the pre-cert number section of the health services management system binder;
  - (20) completes and faxes weekly time sheets to the HSA, if applicable;
  - (21) trains HSS/JCO staff in skills required for specific special needs youth and includes instructions for the individual youth;
  - (22) assists the HSA with medication administration training for TJJD halfway house staff at scheduled times;
  - (23) immediately informs the HSS, superintendent, and HSA if there is a serious risk to a youth's health and records the notification on the [HLS-909](#);
  - (24) as needed, attends the monthly Halfway House Health Services Administrative Meeting and contributes to the development of corrective action plans;
  - (25) reports concerns/problems with local providers to the HSA;
  - (26) reports any suspected or alleged abuse, neglect, or exploitation of youth in compliance with [GAP.07.03](#), which includes immediate notification by telephone to the Office of Inspector General's hotline and notification to the superintendent and HSA;
  - (27) scans all medical information and mental health records into the Electronic Medical Record; and
  - (28) maintains confidentiality.
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