

Chapter: Continuity of Care	Effective Date: 2/1/14
Title: Health Screening for Intra-system Transfers	Page: 1 of 2
ACA: 4-JCF-4C-02(M)	Replaces: HSP.04.03, 6/10/10

(a) **Standard.**

A nurse conducts a health screening on all intra-system transfers upon arrival at the facility to ensure continuity of care. All findings are recorded on a health screening form approved by the Texas Juvenile Justice Department (TJJD) and the University of Texas Medical Branch (UTMB) medical directors.

Unless clinically indicated, psychotropic medication will not be discontinued or significantly changed prior to a psychiatric evaluation.

At a minimum, the health screening must include the following:

- (1) Inquiry into whether the youth:
 - (A) is being treated for a medical or dental problem;
 - (B) is presently on medication; and
 - (C) has a current medical, mental health, or dental complaint.
- (2) Observation of:
 - (A) general appearance and behavior;
 - (B) physical deformities; and
 - (C) evidence of abuse or trauma.
- (3) Medical/mental health disposition of youth:
 - (A) cleared for general population;
 - (B) cleared for general population with referral to appropriate medical and/or mental health service provider; or
 - (C) referred to appropriate health care service for emergency treatment. When a youth is referred for emergency treatment, his/her admission or return to the facility is predicated on written medical clearance.

(b) **Procedures.**

- (1) **A nurse:**
 - (A) receives youth into infirmary;
 - (B) collects all health screening data, including current medications and suicide risk information, and records on the Intrasystem Health Screening form,  [HLS-105](#);
 - (C) ensures that the youth signs and dates the Youth Orientation to Health Services form,  [HLS-101](#);
 - (D) reviews the Discharge Summary and all community records and documents findings on the HLS-105;
 - (E) if necessary, notifies the provider with concerns or to obtain orders;
 - (F) reviews immunization history to determine immunizations needed and updates as required per DSHS immunization guidelines;

- (G) creates appropriate EMR reminders;
 - (H) ensures community records are scanned into the EMR;
 - (I) if the youth was referred for emergency treatment before or during admission, the nurse contacts the facility provider for medical clearance and orders for placement in the infirmary or general population;
 - (J) ensures proper steps are taken if a youth has any special medical needs or problems when the initial screening is completed including:
 - (i) notifying program staff (i.e., case managers, dorm, recreation, and school) by telephone,
 - (ii) documenting verbal notification in the EMR,
 - (iii) sending written notification to the youth's program staff via email, and
 - (iv) scanning it into the EMR.
 - (K) determines disposition to general population, general population with follow up indicated, infirmary admission, or emergency room.
- (2) The **clinical case manager**:
- (A) reviews all medical records including the physical exam, initial health screening, intra-system, discharge summary, and community and supplemental records;
 - (B) completes the Admission Assessment/Medical File Review form,  [HLS-103](#), and the Special Services Committee-Medical/Dental/Mental Health History Report,  [HLS-104](#);
 - (C) creates an EMR reminder for the medical provider's review of community records; and
 - (D) sends the HLS-104 form to the TJJD manager of institutional clinical services via patient-related EMR email.
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