

## YOUTH SERVICES POLICY

<b>Title:</b> Notification to Courts and Parents/Guardians When Youth are Seriously Injured	<b>Type:</b> B. Classification, Sentencing and Service Functions <b>Sub Type:</b> 6. Medical/Mental Health <b>Number:</b> B.6.8
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<b>References:</b> ACA Standard 4-JCF-4C-58 (Performance-Based Standards for Juvenile Correctional Facilities); YS Policies A.1.4 "Investigative Services", B.2.2 "Youth Classification System and Treatment Procedures", B.3.1 "Secure Care Youth Records; Composition and Maintenance", B.6.4 "Accident and Injury (A & I) Evaluations", C.2.6 "Use of Interventions - Secure Care", C.5.1 "Required Database Entry and Reporting Requirements", and C.5.2 "Regional Office Duty Officers, and Facility Administrative Duty Officers (ADOs) Reporting of Serious Incidents"; and the Contracted Health Care Provider's Policy No. C-58 "Injury Prevention"	
<b>STATUS: Approved</b>	
<b>Approved By:</b> <i>William A. Sommers, Deputy Secretary</i>	<b>Date of Approval:</b> 04/15/2021

**I. AUTHORITY:**

Deputy Secretary of Youth Services (YS) as contained in La. R.S. 36:405. Deviation from this policy must be approved by the Deputy Secretary.

**II. PURPOSE:**

To establish a reporting process for YS secure care employees to follow when notifying judges of serious youth injuries and to establish responsibility for notifying parents/guardians of youth accidents and/or incidents of injury.

**III. APPLICABILITY:**

Deputy Secretary, Assistant Secretary, Chief of Operations, Regional Directors, Director of Investigative Services (IS), Facility Directors, Regional Managers, and the Contracted Health Care Provider (CHP). Facility Director's are responsible for ensuring that all necessary procedures are in place to comply with the provisions of this policy.

**IV. DEFINITIONS:**

***Accident and Injury (A&I) Form*** – Form used by contracted health care provider staff to record history, physical and clinical assessment/findings, as well as type of injury, as a result of an alleged incident involving any youth in the custody of YS assigned to a secure care facility. (See attached sample)

***Accident and Injury (A&I) Tracking Document*** - The electronic document that YS employees use to enter the information from a completed A&I Form into the CHP's database. The document is for tracking purposes only. (See attached sample)

***Category A Injury*** - An injury that threatens life or limb as noted on the A&I Form.

***Category B Injury*** - An injury that requires urgent treatment by a doctor or severely restricts usual activities as noted on the A&I Form.

***Category C Injury*** – An injury that requires follow up by a doctor as noted on the A&I Form.

***Central Registry Database*** – The database located in Lotus Notes used by Investigative Services (IS) staff to track investigative progress and trends, monthly reports, summary reports of allegations, etc.

***Juvenile Electronic Tracking System (JETS)*** - The centralized database utilized to track all youth under OJJ supervision custody and to record all case record activity.

**V. POLICY:**

It is the Deputy Secretary's policy that YS staff shall notify the adjudicating judge of youth accidents/ injuries when a Category A or B injury is noted by the CHP on the A & I Form.

Injuries reported as a Category C on the A&I Form shall only be reported to the adjudicating judge through the JETS "Quarterly Progress Report to the Court" pursuant to YS Policy B.2.2.

Parents/guardians shall be notified of all Category A and B injuries by the Facility Director/designee pursuant to Section VI.A.2 below.

**VI. PROCEDURES:**

**A. Secure Care Facility Staff Responsibilities**

**1. Notification to Courts**

- a. Designated facility staff shall ensure that a “Notification of Injury” letter to the adjudicating judge is generated immediately for all Category A and B reportable injuries as noted on the A&I Form.
- b. Designated facility staff shall fax or email the “Notification of Injury” letter to the adjudicating judge within 24 hours, (excluding weekends and holidays), and the appropriate Regional Manager.
- c. The “Notification of Injury” letter, along with the fax confirmations and/or confirmation if emailed, shall be filed in the youth’s Master Record under Clip VIII.

**2. Notification to Parents/Guardians**

- a. When an injury is reported as a Category A or B on an A&I Form, the Facility Director/designee is responsible for and shall notify the youth’s parent/guardian via telephone as follows:
  - 1) Within 24 hours if the injury is not serious, does not require a trip to the hospital or hospitalization or a medical procedure; or
  - 2) If the injury requires a trip to the hospital or hospitalization or a medical procedure, the parent/guardian shall be contacted within one (1) to three (3) hours of the incident – as soon as the facts of the associated incident and the extent of the injuries are verified.
- b. An injury reported as a Category C on an A&I Form shall be discussed with the youth’s parent/guardian during the youth’s quarterly staffing.
- c. Parent/guardian contacts shall be documented in JETS within three (3) working days of the contact.

3. Consultation with the CHP Prior to Parent/Guardian Contact

Prior to contacting the youth's parent/guardian, the Facility Director/designee shall consult with the CHP about the extent of an injury, new diagnosis, medications ordered, medication changes, prognosis, etc.

B. Investigative Services (IS) Responsibilities

1. Within 24 hours of receipt (excluding weekends and holidays) of an A&I Form from the CHP, IS staff shall determine if the injury should be treated as an allegation of abuse, requiring the opening of a new case in the "Central Registry on HQ" database and the assignment of a case number.
2. If an IS case number is assigned to an A&I Form, IS staff at the facility shall immediately generate the "Judges Letter Original – By Judge" from the "Central Registry on HQ" database. The original letter shall inform the judge that an investigation has been initiated in reference to the injury and that the outcome will be reported in a follow up letter following completion of the investigation.
3. The judge's letter shall be faxed or emailed within 24 hours, (excluding weekends and holidays), and the original letter along with the fax or email confirmation, shall be filed in the IS case file.
4. On the completion date of the IS investigation, IS staff at the facility shall generate the "Judges Letter Follow-Up – By Judge" from the "Central Registry on HQ" database, providing a short description of the investigation into the incident and, advising the judge of the outcome of the investigation.
5. The follow-up letter shall be forwarded to the Director of IS for review and approval prior to issuance. Upon approval, the "Judges Letter Follow-up – By Judge" shall be forwarded to the judge within 24 hours.

All letters must be signed by both the Lead Investigator and the Director of IS.

6. Should a problem arise when generating the "Judges Letter Follow-up – By Judge", an email shall be forwarded to the designated facility staff. The email shall be used to track the problems, with a copy placed in the IS case file.

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7. Copies of both judge's letters shall be forwarded simultaneously to the Facility Director, the youth's Case Manager and the appropriate Regional Manager when faxed to the judge.
8. The original judge's letters along with the fax or email confirmations and email receipts shall be filed in the IS case file.
9. The IS Director is ultimately responsible for ensuring that judges are notified of all Category A and B reportable injuries.

### **VII. Quality Assurance:**

- A. The Director of Treatment and Rehabilitation shall be responsible for the following:
  1. Conducting JETS quarterly quality assurance reviews to ensure that judges are being notified of all Category A and B reportable injuries as noted on the A&I Form;
  2. Conducting on-site visits to randomly review youth case records from the JETS quality assurance reviews for accuracy; and
  3. Reporting the findings of both the JETS and on-site quality assurance reviews to the Assistant Secretary/designee, Facility Director, appropriate Regional Director, and Continuous Quality Improvement Services.

**Previous Regulation/Policy Number:** B.6.8

**Previous Effective Date:** 04/02/2020

**Attachments/References:** Sample of Blank CHP AI Form.pdf



Patient Name	Patient Number	Booking Number	Birth Date	Birth Date
LARRY, L LEWIS	113187	563945	5/30/2000	9/25/1997

- Recreation Field
- Cafeteria
- School
- Recreation Room
- Cell Restriction
- Gym
- Bathroom/Shower
- Grounds
- Sleeping Area
- Other

**Youth reports the incident was (check all that apply):**

- Accident
  - Sport Injury
  - Hit by Object
  - Hit Stationary Object
  - Performing Work Detail
  - Slip or Fall
- Altercation
  - Youth on Youth
  - Youth on Staff
  - Staff on Youth
- Allegation of Abuse
- Intentional Self-Injury
- Horseplay
- Restraints Related
- Sex Related
  - Sexual Assault
  - Consensual Sex
- Use of Force
  - Mechanical
  - Physical
  - Chemical
- Other

Describe:

Name of other youth and/or staff involved:

Multiple youth involved

**MEDICAL NOTES**

**SUBJECTIVE (Youth complaint and description of incident)**

Youth states he was pushed by 5 youth



Patient Name LARRY, L LEWIS	Patient Number 113187	Booking Number 563945	Birth Date 5/30/2000	Birth Date 9/25/1997
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**SUBJECTIVE (Youth complaint and description of incident)**

Youth states he was pushed by 5 youth

**OBJECTIVE (Medical personnel's description of physical presentation)**

No Observable Injury

Youth stable, vitals stable, blood visible on skin but only small abrasion under right eye, slight swelling on right eye, nose actively bleeding, swelling and slight bruising but no obvious deformity. AAO x3, denies loss of consciousness, gait steady, youth walking around and talking; bruising above and behind left ear

**ASSESSMENT (Medical examination pertinent findings)**

No Pertinent Findings

Acute pain r/t facial injury

**PLAN (Medical treatment to be rendered, if any and Follow-up Planned)**

No Doctor Follow-Up Required

Ice pack given to apply to right eye and nose; ibuprofen already an active order, advised youth to apply pressure to nose and tilt head downward to cease the bleeding; bleeding resolved; will assess youth in AM before he departs from court to give ibuprofen and more ice; educated youth to come to infirmary if dizzy/HA/nausea

Fill out A & I Follow-Up Form when follow-up completed

**Mental Health Counselor Notified:**       Yes  No

**Physician Notified:**                               Yes  No

**Transported to Hospital:**                       Yes  No

(If yes, requires A&I Follow-up Form Completion)

**Check all current exam findings that apply based on above assessment**

- Injury that threatens life or limb (Category A)
- Requires urgent treatment by a doctor (Category B)
- Severely restricts usual activities (Category B)
- Requires follow-up by a doctor (Category C)

**Describe the location and position of injury**

slight swelling and bruising of right eye and nose; bruising above/behind left ear

**Photographs Taken by Medical Staff?**       Yes  No

**Does Examiner have cause to believe any of the following existed in this incident?**

- Neglect                                               Yes  No
- Abuse                                                  Yes  No
- Sexual Abuse                                       Yes  No
- Excessive use of force                          Yes  No

Louisiana OJJ  
Louisiana OJJ - Acadiana  
US Hwy 71 at Bordelon Road  
Bunkie, LA 71322

### Accident & Injury Form



Patient Name	Patient Number	Booking Number	Birth Date	Birth Date
LARRY, L LEWIS	113187	563945	5/30/2000	9/25/1997

- Sexual Abuse  Yes  No
- Excessive use of force  Yes  No
- Use of chemical restraint  Yes  No
- Sexual activity between at least two people, one of whom is a juvenile  Yes  No

(If yes to any of the above, PZT must be notified)

- PZT Hotline call offered to youth  Yes  No
- PZT Hotline used by the youth at exam  Yes  No
- PZT Hotline notified by healthcare staff  Yes  No

Date

Time

Does any of the above meet Mandatory Report (i.e. OCS) requirements of the Louisiana Children's Code, which states, "any mandatory reporter who has cause to believe that the child's physical or mental health or welfare is endangered as a result of abuse or neglect or that abuse or neglect was a contributing factor in a child's death shall report... (LA Children's Code Act 609.)"?

Yes  No

Verbal Report Date:

Verbal Report Time:

Youth Examined by: S. Lambert

Title: RN