

Health Assessment

999.1 PURPOSE AND SCOPE

Agency Content

The purpose is for the health administrator and responsible physician, in cooperation with the Chief Probation Officer, or authorized designee to establish and implement written policy and procedures for a health assessment of youth and for the timely identification of conditions necessary to safeguard the health of the youth. This policy applies to all juvenile facility staff.

999.2 AUTHORITY AND REFERENCES

Agency Content

- Board of State and Community Corrections Title 15 § 1432;
- Riverside County Correctional Healthcare Services Manual;
- Welfare and Institutions Code §§ 209, 210 & 885.

999.3 POLICY

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The health assessment shall be completed within 96 hours of admission, excluding holidays. The health appraisal/medical examination shall result in a compilation of identified problems to be considered in the classification, treatment, and multi-disciplinary management of youth while in custody and in pre-release planning.

999.4 REQUIREMENTS

Agency Content

As in the case of all non-emergency health care interventions, youth have the right to refuse a health assessment. Discipline measures shall not be imposed as a result of refusal of a health assessment.

- (a) The health assessment shall be completed within 96 hours of admission, excluding holidays, to the facility and results in a compilation of identified problems to be considered in classification, treatment, and the multi-disciplinary management of the youth while in custody and in pre-release planning. It shall be conducted in a location that protects the privacy of the youth and conducted by a responsible physician, or other licensed or certified health professional working within their scope of practice and under the direction of a responsible physician.
 1. At a minimum, the health assessment shall include a health history, examination, laboratory and diagnostic testing, and necessary immunizations as outlined below:
 - (a) The health history includes, but not limited to: review of the intake health screening, history of illnesses, operations, injuries, medications, allergies, immunizations, systems review, exposure to communicable diseases, family health history, habits (e.g., tobacco, alcohol and other substances),

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developmental history including strengths and supports available to the (e.g., school, home, and peer relations, activities, interests), history of recent trauma-exposure which may require immediate attention (including physical and sexual abuse, sexual assault, neglect, violence in the home, traumatic loss) and current traumatic stress symptoms, pregnancy needs, sexual activity, contraceptive methods, reproductive history, physical and sexual abuse, neglect, history of mental illness, self-injury, and suicidal ideation.

- (b) The physical examination includes, but not limited to: temperature, height, weight, pulse, blood pressure, appearance, gait, head and neck, a preliminary dental and visual acuity screening, hearing screening, lymph nodes, chest and cardiovascular, breasts, abdomen, genital (pelvic and rectal examination, with consent, if clinically indicated), musculoskeletal and neurologic.
 - (c) Laboratory and diagnostic testing includes, but not limited to: tuberculosis screening and testing for sexually transmitted diseases for sexually active youth. Additional testing should be available as clinically indicated, including pregnancy testing, urinalysis, hemoglobin or hematocrit.
 - (d) Review and update of the immunization records within two weeks in accordance with current public health guidelines.
2. The physical examination and laboratory and diagnostic testing components of the health assessment may be modified by the health care provider, for youth admitted with an adequate examination done within the last 12 months, provided there is reason to believe that no substantial change would be expected since the last full evaluation. When this occurs, health care staff shall review the intake health screening form and conduct a face-to-face interview with the youth. The health history and immunization review should be done within 96 hours of admission, excluding holidays.
3. Physical exams shall be updated annually for all youth.
- (b) For adjudicated youth who are confined in any juvenile facility for successive stays, each of which totals less than 96 hours, the responsible physician shall establish a policy for assessment. If this assessment cannot be completed at the facility during the initial stay, it shall be completed prior to subsequent acceptance at the facility. This evaluation and clearance shall include screening for communicable disease.

999.5 WHEN YOUTH ARE TRANSFERRED

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For youth who are transferred to and from juvenile facilities outside of Riverside County, policy and procedures shall be developed to ensure that a health assessment:

- (a) Is received from the sending facility at or prior to the time of transfer;
- (b) Is reviewed by designated health care staff at the receiving facility; and
- (c) Is identified and any missing required assessment are scheduled within 96 hours.

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The health administrator/responsible physician shall develop policy and procedures to ensure that youth, who are transferred among juvenile facilities within Riverside County, receive a written health care clearance. The health record shall be reviewed and updated prior to transfer and forwarded to facilities that have licensed on-site health care staff.

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