

	JUVENILE JUSTICE SERVICES Facility Medical and Behavioral Health Services	Effective Date: 11/30/08
		Issue Date: 11/30/08
	Title: Personnel and Training	
	Procedure #:P.4.11	

1. **ISSUING AGENCY:** Children, Youth and Families Department (CYFD)
2. **SCOPE:** Juvenile Justice Services (JJS)
3. **STATUTORY AUTHORITY:** 8 NMAC 14.4..11
4. **FORMS:** Reserved
5. **APPLICABLE POLICY:** 8.14.4.11 Personnel and Training: all medical, dental and behavioral health staff are properly credentialed and there are processes in place to ensure that these requirements are met.
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7. **DEFINITIONS:** Reserved
8. Credentialing, licensure, and certification of health care professionals: All medical, dental, and behavioral health care personnel who provide services to clients are appropriately credentialed according to the licensure, certification, and registration requirements of the State of New Mexico.
 - 8.1 The duties, responsibilities, and professional qualifications of health and behavioral health staff are governed by written job descriptions approved by the Medical or Behavioral Health Authority.
 - 8.2 A credentialing process is followed to verify current licensure, certification, or registration for new hires.
 - 8.3 Verification includes an inquiry to the medical, nursing, or other appropriate board to ascertain the status of the license, including a query on whether the license is in good standing or if there are sanctions or limitations on the license.
 - 8.4 Medical and behavioral health providers do not perform tasks beyond those

- permitted by their credentials and practice standards.
- 8.5 Nursing services are performed in accordance with professionally recognized standards of nursing practice and the NM Nurse Practice Act.
 - 8.6 Behavioral health services are performed in accordance with professionally recognized standards of behavioral health practice, the New Mexico Board of Psychologists Examiners, New Mexico Board of Social Work Examiners, and the New Mexico Counseling and Therapy Practice Board.
 - 8.7 The Department Medical and Behavioral Health Authorities maintain verification of current credentials for all qualified health and behavioral health care professionals at a readily accessible location using primary verification methods.
 - 8.8 Authorized prescribers of controlled substances have current individual Drug Enforcement Agency (DEA) registration numbers.
 - 6.8.1 A restricted license specifically limiting practice to correctional institutions is not in compliance with this requirement.
 - 8.9 Treatment by medical and behavioral health care personnel is ordered by personnel authorized by law to give such orders. Nurse practitioners and physician's assistants may practice within the limits of applicable laws and regulations.
 - 8.10 Nursing assessment protocols are appropriate to the level of skill and preparation of the nursing personnel who will carry them out, and comply with the relevant state practice acts. Standing orders may be used only for preventative medicine practices at the facility.
 - 8.10.1 Nursing protocols are developed and reviewed annually by the Medical Health Authority.
 - 8.10.2 Documentation of nurses training in protocol use exists and includes:
 - 8.10.2.1 evidence that all new nursing staff are trained;
 - 8.10.2.2 demonstration of knowledge and skills;
 - 8.10.2.3 evidence of annual review of skills; and
 - 8.10.2.4 evidence of retraining when new protocols are introduced or revised.
 - 8.10.3 A Nursing assessment protocols do not include the use of prescription medications except for those covering emergency, life-threatening situations (e.g., nitroglycerin, epinephrine). Emergency administration of these medications requires a subsequent provider's order.
9. Physical examination: Applicants selected for security positions have a post-job offer pre-employment physical examination prior to final appointment to determine if staff is able to perform the essential functions of the position. Department medical staff will give PPD skin tests to all JJS employees. JJS will collect information on employee vaccinations for measles, mumps and rubella (MMR). JJS will offer hepatitis B vaccinations to employees.
- 9.1 An employee who is required to perform a physical intervention as part of the behavior management system, and is unable to perform any of the required maneuvers associated with this program, creates a direct threat to himself/herself and others and poses a risk to the security of the facility. No accommodation for the person is provided under these circumstances.
 - 9.2 Staff has a screening for tuberculosis (TB) prior to client contact in accordance with NM Department of Health Two-Step Tuberculin Skin Testing protocol and Centers for Disease Control and Prevention (CDC) recommendations.

- 9.2.1 Staff who test positive are placed on administrative leave until clearance documentation from the staff's private physician is received.
- 9.2.2 Staff with a history of positive TB tests must provide documentation or a negative chest x-ray within past two (2) years.
- 9.3 Medical screening results are kept on file, in confidential files, separate from the staff personnel record. The file includes information on employee vaccinations for Measles, Mumps and Rubella (MMR).
- 9.4 Staff is offered Hepatitis B vaccinations; staff may refuse vaccination but sign a declination form. Declination forms are maintained in the staff personnel record.
- 10. Professional (peer) practice review of health care professionals: A clinical performance enhancement process evaluates the appropriateness of all primary care providers' services.
 - 10.1 The clinical performance of the facility's health and behavioral health primary care providers is reviewed at least annually using pre-established criteria. Primary Care Providers are all licensed physicians, psychiatrists, dentists, mid-level practitioners and doctoral level psychologists.
 - 10.2 Clinical performance enhancement reviews are kept confidential by the Medical Health Authority and Behavioral Health Authority and incorporate at least the following elements:
 - 10.2.1 the name of the individual being reviewed;
 - 10.2.2 the date of the review;
 - 10.2.3 the name and credentials of the person doing the review;
 - 10.2.4 confirmation that the review was shared with the clinician; and
 - 10.2.5 a summary of the findings and corrective action, as indicated.
 - 10.3 A log or other written record providing the names of the primary care providers and the dates of their most recent reviews is available for auditing purposes.
 - 10.4 Clinical performance reviews are protected under the Review Organization Immunity Act, NMSA, 1976, Section 41-9-1 et seq. All documents and communications are confidential and are to be shared only with qualified professionals engaged in the peer review process.
- 11. Continuing education for medical and behavioral health care professionals: All health and behavioral health care professionals participate annually in continuing education appropriate for their positions.
 - 11.1 All qualified health care professionals participate in a continuing education program that, at a minimum, consists of 12 hours of continuing education annually, appropriate to their positions. Hours for part-time staff who are regular, ongoing providers of health or behavioral health care are prorated based on full-time equivalency.
 - 11.2 All qualified health care professionals who have client contact have current certification in cardiopulmonary resuscitation (CPR) techniques from an approved body such as the American Red Cross, American Heart Association or from an individual possessing a current instructor's certificate from an approved body.
 - 11.3 Continuing education is documented for each qualified health care professional through a list of completed courses, dates, and the number of hours per course.
- 12. Health related training for facility staff: A training program, established or approved by

- the Medical and Behavioral Health Authorities in cooperation with the superintendent, guides the health and behavioral health-related training of all facility staff who work with clients.
- 12.1 All health and behavioral health staff receive an immediate basic orientation and also complete a formal in-depth orientation to the health services program
 - 12.1.1 The Medical and Behavioral Health Authorities and the Superintendent or Program Manager approve the orientation program.
 - 12.1.2 All health and behavioral health staff receives a basic orientation on the first day of on-site service. At a minimum, this addresses relevant security and health and behavioral health services policies and procedures, response to facility emergency situations, the staff member's functional position description, and client-staff relationships.
 - 12.1.3 Within ninety (90) days of employment, all full-time health staff completes an in-depth orientation.
 - 12.2 All facility staff that work with clients receive health-related training.
 - 12.2.1 The Medical and Behavioral Health Authorities and the Superintendent approve the training program.
 - 12.2.2 A certificate or other evidence of attendance is kept on site for each employee.
 - 12.3 Facility staff is current in CPR and first-aid training.
13. Training in medication self-administration: Facility staff who supervise client self-administration of prescription medications are trained as needed in matters of security, accountability, common side effects, and documentation of self-administration of medicines.
- 13.1 The training is approved by the responsible Medical Health Authority and the Superintendent.
 - 13.2 Documentation of completed training and testing is kept on file for staff that supervises client self-administration of prescription medications.
 - 13.3 Facility staff who supervise client self-administration of prescription medication are accountable for recording the self-administration of medications in a manner and on a form approved by the responsible Medical Health Authority.
14. Role of clients working in health care program: Clients are prohibited from being used as health care workers.
- 14.1 Clients do not distribute or collect sick call slips, schedule appointments, or handle medical records, medications, or surgical instruments and sharps.
 - 14.2 Clients do not provide direct client care.
 - 14.3 If clients are employed in cleaning the health services unit they are appropriately trained and continuously supervised regarding their work assignments. Documentation of such training is maintained at the facility.
15. Facility staffing plans: A written staffing plan assures that a sufficient number of health and behavioral health staff is available to provide adequate and timely evaluation and treatment consistent with contemporary standards of care.
- 15.1 The responsible Medical and Behavioral Health Authorities approve the staffing

plan.

- 15.2 The adequacy and effectiveness of the staffing plan are assessed by the facility's ability to meet the health and behavioral health needs of the client populations.
- 15.3 A designated, trained health care liaison coordinates the health delivery services in the facility on those days when qualified health professionals are not on site.
 - 15.3.1 The health care liaison is trained by, and under the joint supervision of, the Medical and Behavioral Health Authorities and the Superintendent or Program Manager/designee. Duties assigned to the health care liaison post are appropriately carried out.
 - 15.3.2 When a facility does not have full-time, qualified health and behavioral health personnel, a health trained staff member coordinates the health and behavioral health delivery services in the facility under the joint supervision of the Medical and Behavioral Health Authorities and the Superintendent of Program Manager.
- 15.4 The facility staffing plan provides for physician coverage when a nurse conducts sick call. The Health Services Administrator is available once each week to respond to client complaints regarding services that they did or did not receive from health staff.

16. Acknowledgment of Receipt and Understanding

Each Superintendent is responsible for ensuring that staff who have contact with clients sign a copy of the Department approved form called "acknowledgement of receipt and understanding" and that these signed forms are part of the of the employee's personnel file.

17. AUTHORIZED SIGNATURE.



APPROVED: _____
Dorian Dodson, Cabinet Secretary
Children Youth and Families Department

