

 <p style="text-align: center;">County of Sacramento Department of Health Services Division of Primary Health Policy and Procedure</p>	Policy Issuer (Unit/Program)	JCH
	Policy Number	B04-1321c
	Effective Date	04-18
	Revision Date	07-19
Title: Workplace Violence Prevention Plan		Functional Area: Safety/ Youth Detention Facility
Approved By: Pamela Gandy-Rosemond, MSN, RN, CCHP, YDF Health Administrator		

Policy:

All Sacramento County employees which include Juvenile Correctional Health (JCH) staff are to adhere to the Workplace Violence Prevention Policy and Program developed by Sacramento County Risk Management Department. The policy can be found online at the County intranet site:

<http://inside.personnelservices.saccounty.net/RiskManagement/CountySafety/Documents/Workplace%20Violence%20Final%20Policy%20032103.pdf>

JCH employees work location is Probation Youth Detention Facility (YDF). There are site specific policies that are applicable to medical staff that provides care to incarcerated youth (patients) at Sacramento County Youth Detention Facility (YDF) that provide direction to reduce, eliminate, or report workplace violence. The written plan will include all elements of Title 8 section 3342 for outpatient medical services to the incarcerated in a detention setting.

A. Policy and Procedure Development

1. JCH has developed a specific written policy that provides directions to staff with references to established JCH and Probation policies for employees who are assigned to the Youth Detention Facility that allows for compliance with CA Title 8, Section 3342.
2. JCH policies are written by the Lead physician, Clinic Manager, Pharmacist and/or Facility Health Administrator. The Facility Health Administrator is responsible for ensuring all staff have access to policies and procedures and have received the appropriate training to ensure compliance. Training is provided during staff meetings and annual skills fairs (JCH policy # 1400, 1404).
3. Included in this policy is the procedure for interdepartmental requests. Interdepartmental requests is a procedure for the departments within the facility; Probation, Juvenile Justice Institutional Mental Health Team (JJIMHT), Juvenile Correctional Health (JCH) and School (Sacramento County Office of Education) to share information of any incident witnessed by an employee that may include a workplace violence incident. All policies are reviewed annually by JMS and the multidisciplinary Quality Assurance Committee which encompasses employees who work at the Youth Detention Facility (JCH policy 1403c). When this policy is reviewed, all workplace violence incidents that occurred at YDF involving JCH personnel will also be reviewed.

B. Staff Training

1. JCH staff has access to all JCH program policies, Probation YDF policies as well as Sacramento County Personnel policies which are located on Sacramento County Intranet sites.
2. All staff and contracted employees who are assigned to work in YDF sign a Code of Conduct form. This form acknowledges the employee is to follow Probation's Code of Conduct, which includes misconduct comprised of workplace violence. This policy includes the process for reporting employee misconduct, preparing written incident reports, and administrative and criminal investigations involving non-sworn and non-county personnel.
3. Employee safety training is done for new employees as well as updated training is done yearly. Training is done by probation and medical staff. Training includes: how to use the Personal Safety Device (PSD). This device is attached to employee's waistband to notify main control when an employee is in a prone position, employee's body position has not moved in 15 minutes, location in the building, as well as an alarm to notify staff needs assistance in an emergency situation which may include an assault situation; Training also includes reference to Sacramento County Workplace Violence policy; Classification levels assigned to residents to inform of residents propensity to violence, and how to interact with residents while providing medical care.
4. All staff must be aware of their surroundings at all times and ensure there is a safe evacuation route in case of emergency. Infirmary doors are not to be opened for any S1 patient without Probation staff presence. JCH staff is not to leave a resident unattended at any times while in the clinic or exam room area unless another clinic staff or a Probation staff member is watching the patient. No patient should be allowed to open any cabinets in the Clinic to obtain assigned equipment or put away the equipment used for treatments. All mediwrap used for treatment will be stored in locked cabinets or in areas that are visually observed by medical staff at all times. Sharp items and sharp disposal containers are not to be left unobserved in an area where a resident is receiving care (JCHMS policy # 1433b).

C. Communication

1. A central control area intercom is used for communication with each living unit, receiving rooms and restrooms, courtyards, recreational areas, classrooms, corridors and other secure and non-secure areas in and about the institution. Medical staff uses this system to request patients come to the clinic. Central control communicates with medical staff before allowing patients to enter the clinic area. This is to ensure that medical staff is aware of patients entering the secure medical unit. Probation department ensures this intercom system is maintained and kept in good working order. (YDF Probation Communication System policy).
2. Employees are expected to address and/or report any employee misconduct witnessed while on duty. Employees should keep in mind misconduct of any kind, by staff members on or off duty, is unacceptable. Employees that witness behavior, as described in the policy guidelines, and do not address and/or report such misconduct, could be subject to discipline (YDF Report of Employee Misconduct).

3. Two-way radios are an important part of YDF communications. Medical Staff carry a 2-way radio when traveling throughout the facility. All communication via radio is monitored by central control. Also this radio enables medical staff to communicate with central control while ambulating throughout the facility. Staffed are trained how to use the radio as part of orientation. There are 6 radios available for staff use. They are kept at the nursing station which includes a charging station. All maintenance on radios shall be done by IT Security with the assistance of the Probation staff liaison. A detail inventory and radio check shall be done quarterly to inspect radio software, physical hardware and battery condition. Any out of spec or broken hardware shall be replaced with the coordination of IT Security (YDF Regulation & Maintenance of two Way Radios).
4. All living units manage and track residents' recreation and exercise on the Floor Plan Interactive Application (FPIA) which is located on monitor screens in each housing units. This enables staff to be aware of where a resident is at all times and eliminates "blind" areas (YDF Resident and Recreation Exercise policy).

D. Risk Assessment/Safety Measures

1. Employees may park in a secured gated parking lot which has video monitoring.
2. All staff must have an employee identification badge visible before entering secured areas. Secured areas are only accessible via Probation issued C-cure employee badge or by central control visual monitoring which electronically opens sally port doors. Non-employee does not have access to employee or patient care areas (YDF Employee Identification policy).
3. All employees who have contact with patient must wear a personal safety device. This device is to be worn at the waist level. Central control is able to track the movement of the employee throughout the facility. The device will alarm if employee's position is supine or prone or lack of movement for >15 minutes. It also has an emergency button which can be pushed for assistance. Once the button is pushed Central control is able to locate the staff member's location immediately and Probation staff will respond emergently.
4. All youth (patients) are searched prior to admission to facility. This is done to ensure nothing is brought into the facility that could be used as a weapon (YDF Booking Admittance Procedure).
5. A qualified Classification Officer shall evaluate each resident (patient) housed at Sacramento County YDF. The evaluation will assist Classification officers in determining the level of security required, special handling in appropriate program activities, and proper housing to ensure the safety of staff and residents. Medical staffs are provided this information to ensure the staff is aware of any resident that might pose a risk to their personal safety (YDF Searches of Residents and Classification System policies).
6. The Crisis Negotiation Process used by the Sacramento County Probation Department is one in which Probation and Mental Health come together as a Team to de-escalate non-compliant behavior. This is a preventive measure done to help keep all staff and residents (patients) safe. (YDF Crisis Negotiation Team Model policy).

7. Probation staff shall position themselves in a manner that enables visual supervision of residents (patients) and staff at all times. This ensures that medical staff interactions with resident (patient) are observed by probation staff. Any threat or perceived safety concern may be addressed immediately (YDF Supervision of Residents policy).
8. Staff shall not enter a resident's (patient) room in the housing unit without another staff present and aware (YDF Supervision of Residents policy).
9. Any resident who is spitting at staff will have a "TranZport Hood" applied by Probation staff (YDF TranZport Hood procedure).
10. All juveniles are searched prior to admission to facility (YDF Booking Admittance Procedure).
11. A pat-down search shall be performed upon all residents, regardless of offense, immediately upon their arrival in the booking/admission area by Probation staff (YDF Searches of Residents policy).
12. YDF has a "No Hostage" policy. Staff, visitors, residents or civilian personnel will not be recognized as hostages for bargaining purposes (YDF Hostage Situations policy).
13. All visitors will be subjected to a metal detector search prior to admittance to the Visitor Center. JCH staff may on occasion go to the visitor's center to meet with parent or guardian to discuss medical care. (YDF Visitors policy).
14. Searches of visitors can be performed to ensure the safety and security of the facility, and to provide for the safety and security of the public, visitors, residents and staff. A visitor's refusal to a pat-down search will result in denial of the visit, and cancellation of that person's visiting privileges (YDF Visiting policy).
15. No firearms will be unsecured inside the institution (YDF Firearms policy).
16. The safety rooms are only used to hold residents who present an immediate danger to themselves or to others or who exhibit behavior which results in the destruction of property, or who reveal the intent to cause self-inflicted physical harm. The medical and mental health assessment shall be completed when patient is calm. Probation staff is in the room monitoring the patient while medical or mental health staff is completing the assessment (YDF Safety Room procedures).
17. Nurses are trained to administer medications through a window in the Pill Call room. Only medical staff has access to the Pill Call room. No medications are left unattended in the room.
18. Youth (patients) line up in front of the Pill Call room window to receive medications. There must be a probation officer present during medication administration.

E. Reporting/Documentation

1. JCH has an electronic Incident Report form that is available to all staff located on the County Intranet site. Workplace violence threats/incidences are to be documented on this form. Instructions on how to complete the form are located in JCH policy #1403. Management reviews all Incident Reports and documents follow up which includes; completing violence incidence log when applicable.

2. Since YDF is a secure correctional facility and all acts of misconduct must be reported there is no retaliatory action against an employee for reporting threats and acts of misconduct to law enforcement. All reported threats or acts shall immediately be reported to a Supervising Probation Officer. Notifications of the allegation(s) and investigation against non-sworn or non-county employees shall be handled by the suspect's personnel department and if necessary the Probation Department and/or local law enforcement. Upon verbal or written of any allegations of misconduct, the Probation Department shall be notify the non-sworn or non- county employee's immediate supervisor within twenty-four (24) hours of any allegation. Upon the completion of the investigation process by personnel department, the employee and supervisor will be notified if a corrective plan was initiated or discipline occurred. (Code of conduct).
3. Each youth (patient) security classification is listed on the Day sheet that all medical staff have access to. During orientation, Medical staff is trained on how security classification is determined and how to interact with patients based upon their security classification.
4. Any youth (patient) that has unpredictable behavior due to a mental illness or developmental diagnosis that may pose a security issued is discussed at Special Needs meeting and that information is disseminated to all medical staff. This meeting occurs every Tuesday. If a resident (patient) demonstrates unpredictable behavior prior to the Special Needs scheduled meeting occurring, any staff member may request a Mental Health clinician propose an emergent meeting to propose a plan of care prior to the scheduled Special Needs meeting. (YDF Special Needs policy).
5. A standing committee which includes the following staff (Pharmacist, Lead Physician, Clinic Manger, a representative from Mental Health (JJMHIT) and clinic), will meet every month to identify and evaluate any risk factors or concerns that may affect the safety of staff. A representative from this committee will provide a written report at each Quality Improvement Committee (QIC) meeting. QIC will initiate a plan of correction, if applicable. The Health Administrator will be responsible to ensure that is completed.

Referenced Probation policies may be found online at the County Intranet site <http://inside.probation.saccounty.net/Home/Resources.aspx> under the tab heading Manuals – YDF Policies and Procedures.

Referenced JCH policies may be found online at the County Intranet Site W:\Primary-Health\JMS\JMS - EMPLOYEE\Policies-Procedures.:

References:

CA Title 8 Section 3342

CA Title 15 Section 1321

CA Senate Bill 1299

National Commission on Correctional Health Care (NCCHC)

Y-B-03, Y-B-04, Y-B-05 and Y-B-06

Attachments:

N/A

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