Revised Standards Reflect Contemporary Best Practices in Juvenile Health Care

“To help correctional facilities provide optimal care to juvenile populations, NCCHC has revised its Standards for Health Services in Juvenile Detention and Confinement Facilities to reflect contemporary practices in juvenile health care.

The 2015 edition of the Juvenile Standards was developed by leaders in the fields of health, law and corrections, led by Robert Morris, MD, CCHP-P. “This revision closely mirrors the 2014 Standards for Health Services for jails and prisons in language and definitions while retaining essential elements relating to youth in the correctional environment,” Dr. Morris said. “We hope the revised standards will help all juvenile facilities prepare for accreditation or, at minimum, support their efforts in providing excellent health care to patients.”

Along with manuals for jails, prisons, mental health services and opioid treatment programs, the NCCHC juvenile standards are a vital resource, providing the framework to ensure that systems, policies and procedures are in place to produce the best outcomes in the most cost-efficient and effective manner. Compliance with these nationally recognized standards helps ensure that facilities provide constitutionally acceptable care and provides a pathway for continuous improvement.

The implementation date for the 2015 Juvenile Standards is May 1, 2016. NCCHC accreditation surveys that take place after that date, will assess compliance with the new standards. Likewise, as of May 1 the Certified Correctional Health Professional (CCHP) exam will reference the 2015 standards.

The Standards for Health Services in Juvenile Detention and Confinement Facilities, along with all NCCHC Standards, will be available at the Spring Conference, April 9-12 in Nashville, and are also available from the NCCHC online store at www.ncchc.org.

COMING SOON: Revised Standards for Opioid Treatment Programs in Correctional Facilities
Professional Development: What Does It Mean to You?

No matter what field you’re in, you are undoubtedly encouraged to participate in “professional development.” For some people, professional development means attending educational conferences, like those offered by NCCHC. For others, it simply means staying current on the latest trends within the field. While both of those activities are important, I propose that professional development also means something much more: it means being committed and willing to completely submerge yourself within your vocation to ensure optimal outcomes.

Having worked in health care associations for nearly 30 years, I’ve come to realize the importance of that commitment and the role professional development plays every day. Realizing that I need to “practice what I preach,” I made the commitment early in my career to become a Certified Association Executive through the American Society of Association Executives. Then, within a year of joining NCCHC, I did the necessary preparation and was successful in achieving my CCHP certification in May 2015.

NCCHC’s Certified Correctional Health Professional program recognizes health care professionals from a variety of disciplines and settings, and the credential has been awarded to thousands of individuals nationwide. CCHPs also may opt to pursue Advanced certification (CCHP-A) as well as specialty certification for mental health professionals (CCHP-MH), physicians (CCHP-P) and registered nurses (CCHP-RN). Participation in the CCHP program signifies your leadership, commitment and expertise. Certification recognizes the mastery of national standards and the knowledge expected of leaders in this complex, specialized field. The CCHP credential is a symbol of achievement and leadership, and is highly valued not only by participants but also by employers.

This marks CCHP’s 25th year, and the program is stronger than ever. Is 2016 the year you will commit to completely submerging yourself within your vocation by becoming a CCHP? For more information, visit the “Health Professional Certification” section of www.ncchc.org.

Best regards,
Thomas L. Joseph, MPS, CAE, CCHP
President & CEO, NCCHC
773-880-1460 • thomasjoseph@ncchc.org

NCCHC Awardees Recognized for Excellence

NCCHC’s annual awards pay tribute to leaders and innovators that have enriched the correctional health care field. We applaud this year’s recipients of the most prestigious awards in the field.

Facility of the Year: The Maricopa County Jail System in Phoenix, AZ, was named the R. Scott Chavez Facility of the Year in recognition of the coordinated care its 300+ health staff members give each inmate, beginning with a comprehensive health screening at intake. Efficiency, coordination, information-sharing and quality care are evident throughout the system, which encompasses six jails with an average daily population of more than 8,000 inmates.

Program of the Year: The South Texas Detention Complex in Pearsall, TX, was named NCCHC Program of the Year for its continuous quality improvement program, which uses specific measurable indicators to ensure timely treatment, continuity of care and compliance with NCCHC standards. The program encompasses the entire care delivery system, addressing the quality and safety of both clinical care and the nonclinical aspects of services identified by NCCHC.

More information on the awards and the 2015 honorees can be found at www.ncchc.org/award-winners.
Ask the Experts: NCCHC Answers Your Questions

Nurse Staffing on Nights and Weekends

Q Can a medical department be staffed by all LPNs at night and on weekends, or do the standards require an RN on-site at those times?

A In standard C-07 Staffing, the discussion states that number and types of qualified health care professionals required depend on the size of the facility, the types (e.g., medical, nursing, dental, mental health) and scope (e.g., outpatient, inpatient, specialty care) of health services delivered, the needs of the inmate population and the organizational structure (e.g., hours of service, use of assistants, scheduling). The staffing plan should take into account labor-intensive activities such as medication distribution, sick call and cell checks in segregated housing. Because the sufficiency of the staffing plan can be assessed by a number of factors, NCCHC does not have a prescribed nursing (RN or LPN) ratio. The adequacy and effectiveness of a staffing plan should be assessed by the facility’s ability to meet the health needs of the inmate population. The standards also require that qualified health care professionals do not perform tasks beyond those permitted by their credentials.

Clinical Performance Review for Part-Time Staff

Q Is a clinical performance enhancement review required for part-time and per-diem nurses and subcontracted nurses?

A The Clinical Performance Enhancement standard (C-02) requires that the clinical performance of the facility’s direct patient care clinicians and RNs and LPNs is reviewed at least annually. The intent of the standard is to enhance patient care through peer review of the individuals’ practice, and therefore it applies to all nurses regardless of the number of hours worked per week.

New and Updated Position Statements From NCCHC

Along with the respected Standards for Health Services, NCCHC position statements can help you design policies and procedures that benefit your facility, inmate-patients and the community at large.

New! Medical Autonomy and Incident Reporting. Health staff should not be involved with the determination of the outcome for an inmate’s or juvenile’s infraction.

New! Naloxone in Correctional Facilities for the Prevention of Opioid Overdose Deaths. NCCHC supports increased access to and use of naloxone to treat opioid overdose in correctional facilities.

New! Transgender, Transsexual and Gender Nonconforming Health Care in Correctional Settings. Correctional health staff should manage transgender patients in a manner that respects their biomedical and psychological needs. The statement includes many specific recommendations.

Updated! Health Services Research in Correctional Settings. A coordinated national health services research agenda is needed to build correctional health care research capacity in the United States. NCCHC endorses several specific national research priorities.

Updated! Restraint of Pregnant Inmates. Restraint of pregnant inmates during labor and delivery should not be used. The application of restraints during all other pre- and postpartum periods should be restricted as much as possible.

Download these statements and more at www.ncchc.org under the “Standards and Resources” tab.
NCCHC Supporting Organizations represent the fields of health, law and corrections.

Academy of Correctional Health Professionals
Academy of Nutrition and Dietetics
American Academy of Child and Adolescent Psychiatry
American Academy of Pediatrics
American Academy of Physician Assistants
American Academy of Psychiatry and the Law
American Association of Public Health Physicians
American Bar Association
American College of Correctional Physicians
American College of Emergency Physicians
American College of Healthcare Executives
American College of Neuropsychiatrists
American College of Obstetricians and Gynecologists
American College of Physicians
American College of Preventive Medicine
American Correctional Health Services Association
American Counseling Association
American Dental Association
American Health Information Management Association
American Jail Association
American Medical Association
American Nurses Association
American Osteopathic Association
American Pharmacists Association
American Psychiatric Association
American Psychological Association
American Public Health Association
American Society of Addiction Medicine
Association of State and Territorial Health Officials
International Association for Correctional and Forensic Psychology
National Association of Counties
National Association of County and City Health Officials
National Association of Social Workers
National Medical Association
National Partnership for Juvenile Services
National Sheriffs’ Association
Society for Adolescent Health and Medicine

NCCHC will be speaking or exhibiting at:

Preventive Medicine 2016, Washington, DC (Feb. 24-27)
Northern California Corrections Association Keys Conference, Concord, CA (March 14-17)
9th Academic & Health Policy Conference on Correctional Health, Baltimore, MD (March 17-18)
NCCHC Spring Conference on Correctional Health Care, Nashville, TN (April 9-12)
American Jail Association Annual Conference, Austin, TX (May 22-25)
National Sheriffs’ Association Annual Conference, Minneapolis, MN (June 24-29)
American Correctional Association Congress of Correction, Boston, MA (August 5-10)

Interested in bringing NCCHC’s nationally recognized health care expertise to your event or meeting? Contact Brent Gibson, MD, MPH, FACPM, CCHP-P, Vice President of Operations, at brentgibson@ncchc.org.