

MEDICAL CONSENT

- AUTHORITY:** Family Code (FC) Sections 1434, 6924, 6925, 6926, and 6928
 California Code of Regulations, Title 15 Minimum Standards for Juvenile Facilities, Article 8, Sections 1400 (Responsibility for Health Care Services), 1430 (Medical Clearance/Intake Health and Screening), 1431 (Intoxicated Youth and Youth with a Substance Use Disorder), 1432 (Health Assessment), 1433 (Requests for Health Care Services), 1434 (Consent and Refusal for Health Care), 1437 (Mental Health Services), and 1439 (Psychotropic Medications) Juvenile Court Miscellaneous Order 602.5 (Authorization and Order Permitting Emergency Medical Examinations and Emergency Medical Treatment for Minors Housed in Orange County Probation Department Facilities),
 Orange County Juvenile Court Miscellaneous Order 620.5 (Authorization and Order Permitting Emergency Medical Examinations and Emergency Medical Treatment for Minors Housed in Orange County Probation Department Facilities) and Miscellaneous Order M-2019-1 (Authorization and Order Permitting Nursing Assessments for Minors Taken Into Temporary Custody by the Orange County Probation Department and County of Orange Social Services Agency and Housed in Their Facilities)
 Orange County Local Rule of Court Rule 903.1 (Exchange of Confidential Information)
 Penal Code (PC) Section 4011
 Welfare and Institutions Code (WIC) Sections 210, 625, 635.1, 739, and 885
- RESCINDS:** Procedure Manual Item 2-1-210, dated 07/31/15 (Major Revision)
- FORMS:** Information for Court Officer (F057-9099.5AF)
 Orange County Probation Department Consent (Probnet-Forms)
 for Medical Care and Physical Examination
- PURPOSE:** To provide guidelines for obtaining consent for Juvenile Hall (JH) Intake Health Screening, health assessments, health care services, mental health services, and psychotropic medication for youth under the care and control of the Probation Department.

I. BACKGROUND

The Fourteenth Amendment to United States Constitution provides a liberty interest in family association and the right to due process. This liberty interest includes a parent's right to make decisions about their child's medical care and treatment, and to be present for medical appointments.

Generally, a parent or guardian must provide medical consent for their child unless these rights have been restricted by the Court. In the absence of parental consent, the Court may:

- Authorize the youth to undergo a JH Intake Health Screening, health assessment, and/or medical or dental care
- Authorize the department or individual to make medical decisions on behalf of the youth in place of the parents.

State law also provides that the youth has the right to make their own medical decisions for limited types of treatment.

II. GENERAL INFORMATION

- A. As outlined in the California Code of Regulations, Title 15 Minimum Standards for Juvenile Facilities, the Probation Department facility administrator will work with the Health Care Agency (HCA) behavioral/mental health director(s) to ensure that health care services are provided to all youth in the facility, as well as make sure that services are at a level to address emergency, acute symptoms and/or conditions, and avoid preventable deterioration of health while in confinement.

Health care services shall include treatment for non-emergent/ordinary medical, dental, and/or other remedial care, including mental health screening and treatment, provided by or under the supervision of a licensed practitioner, to protect or enhance a youth's health. This may include, but is not limited to, immunizations, medical/physical examinations, and x-rays.

- B. There shall be established policies and procedures for a documented Intake Health Screening procedure to be conducted immediately upon entry to the facility, as well as when a health evaluation and/or treatment shall be obtained prior to acceptance for booking into Juvenile Hall (JH).
- C. For adjudicated youth who are confined in any juvenile facility for successive stays, each of which totals less than ninety-six (96) hours, the responsible physician shall establish a policy for a medical evaluation and clearance. This evaluation and clearance shall include screening for communicable diseases.
- D. HCA has established criteria that define the types of apparent health conditions that would preclude acceptance of a youth into the facility without a documented medical clearance, as well as written documentation of the circumstances and reasons for requiring a medical clearance whenever a youth is not accepted for booking is required.

- E. Consent and Refusal for Health Care

As outlined in California Code of Regulations, Title 15 Minimum Standards for Juvenile Facilities, Article 8, Section 1434 (Consent and Refusal for Health Care), all immunizations, examinations, treatments, and procedures requiring verbal or written informed consent in the community, also require that consent for confined youth. This includes the Intake Health Screening, health assessments, health care services, mental health services, and the administration of psychotropic medications.

1. Parental Consent

- a. Pursuant to WIC 739 (a), if a youth is taken into custody, probation shall make a reasonable effort to notify and obtain the consent for the youth to receive medical treatment or care from the youth's parent, guardian, or person standing in loco parentis, unless the Court has restricted their rights. Additionally, they shall be notified of their right to be present for such medical treatment or care. This shall be done prior to the youth receiving medical or dental treatment or care based on the written recommendation of the examining physician and considered necessary for the health of the youth. This includes the JH Intake Health Screening, health assessments, health care services, mental health services, and psychotropic medication. Parents also have a constitutionality guaranteed right to make medical decisions on behalf of their children. If there is no capable or willing parent available, or if the parent objects, the Court has jurisdiction to authorize the youth's medical consent.
- b. It is only necessary to obtain the consent of one parent for basic medical care and/or a JH Intake Health Screening; however, if the other parent objects, Court authorization is required.
- c. If the parent, guardian, or person standing in loco parentis refuses to give consent, the treatment or care shall be given only upon order of the court in the exercise of its discretion. The assigned JH-Intake Release Center (IRC) Deputy Juvenile Correctional Officer (DJCO) shall document the efforts made to notify and obtain parental consent and shall enter this information into the youth's case file (automated [REDACTED] and paper file).

2. Youth Consent

- a. Pursuant to WIC 739 (h), a youth has right to authorize or refuse medical, surgical, dental, or other care when the youth's consent for care is sufficient or specifically required pursuant to existing law. Additionally, a youth may refuse, verbally or in writing, non-emergency medical, dental, and mental health care.
- b. As outlined in FC 1434, 6924, 6925, 6926, and 6928, in limited circumstances, youth have the right to consent to their own medical examinations and treatment, unless restricted by the court. They also have the right to refuse non-emergency health care and medication in most circumstances unless it is an emergency.
- c. Youth may consent to treatment without parental consent in the following cases:
 - Pregnancy-related care
 - Family planning
 - Reportable communicable diseases, including sexually transmitted diseases

- Mental health treatment, except psychotropic medications

3. Court Consent

Per WIC 739(b), the juvenile court may authorize, upon written recommendation, necessary medical, surgical, dental, or other remedial care for a youth within its jurisdiction when there is no parent, guardian, or other person standing in loco parentis capable of or willing to authorize such care after being provided due notice and will all documented efforts to obtain parental consent have failed.

4. Documentation

Based on standards of the Board of State and Community Corrections (BSCC), a signed medical consent must be obtained on each youth entering JH or other probation facility prior to any medical care. Only when attempts to locate the parents to obtain signed consent have failed will a request for medical consent on behalf of the youth be submitted to the court. Additionally, medical care may be provided for emergency and/or life-threatening situations in absence of a signed parental consent; however, reasonable efforts to notify and obtain the consent of the parents shall be made prior to the administration of emergency care.

Documentation of such efforts shall be entered into [REDACTED] by the staff requesting authorization, as well as documented on the *Consent for Medical Care and Physical Examination* form.

A copy of the form will be provided to the youth's parent(s)/guardian(s), as well as routed to the JH-Medical Unit, the youth's assigned unit supervising juvenile correctional officer (SJCO) and the youth's assigned deputy probation officer (DPO).

III. TYPES OF MEDICAL SERVICES

A. Intake Health Screening Procedure

1. Procedures for a JH Intake Health Screening shall consist of a defined, systemic inquiry and observation of every youth booked into JH. The screening shall be conducted by HCA medical personnel immediately upon the youth's entry to the facility.
2. Screening procedures shall include, but not be limited to:
 - a. Medical, dental, and behavioral/mental health concerns that may pose a hazard to the youth or others in the facility
 - b. Health conditions that require treatment while the youth is in the facility
 - c. Identification of the need for accommodations (e.g. physical or developmental disabilities, gender identity, or medical holds)

B. Health Assessments

1. The health assessment shall be completed within ninety-six (96) hours of a youth's admission, excluding holidays, to the facility and result in a compilation of identified problems to be considered for classification, treatment, and the multi-disciplinary management of the youth while in custody and in pre-release planning.
2. At a minimum, the health assessment shall include, but is not limited to, health history, physical examination, laboratory and diagnostic testing, and review and update of the youth's immunization records within two (2) weeks in accordance with current public health guidelines.
3. For adjudicated youth who are confined to any juvenile facility for successive stays, each of which totals less than ninety-six (96) hours, the responsible physician shall establish a policy for a medical assessment. If this assessment cannot be completed prior to acceptance at the facility, it shall be completed prior to acceptance at the facility.

C. Mental Health Services

Mental health services provided at Probation Department facilities include, but are not limited to, screening for behavioral/mental health problems at intake; assessment by a behavioral/mental health provider when indicated by the screening process; therapeutic services and preventive services where resources permit; crisis intervention and management of acute psychiatric episodes; stabilization of youth with mental disorders and the prevention of psychiatric deterioration in the facility setting; initial and periodic medication support services; assurance that any youth who displays significant symptoms of severe depression, suicidal ideation, irrational, violent, or self-destructive behaviors, shall be provided a mental status assessment; and transition planning for youth undergoing behavioral/mental health treatment, including arrangements for continuation of medication and therapeutic services from behavioral/mental health providers, including providers in the community where appropriate.

D. Psychotropic Medications

Psychotropic medications shall not be administered to a youth absent an emergency unless informed consent has been given by the legally authorized person or entity.

1. Youth shall be informed of the expected benefits, potential side effects, and alternatives to psychotropic medications.
2. Absent an emergency, youth may refuse psychotropic medication without disciplinary consequences.
3. Youth found by a health care provider to be an imminent danger to themselves or others by reason of a mental disorder may be involuntarily given psychotropic medication immediately necessary for the preservation of life or the prevention of serious bodily harm, and when there is insufficient time to obtain consent from the parent, guardian, or court before the threatened harm would occur. It is not necessary for harm to take place or become unavoidable prior to initiating treatment. All involuntary administrations of psychotropic medications shall be documented.

E. Emergency Medical Care

1. Pursuant to WIC 739 (d), whenever it appears that a youth otherwise within subdivision (a), (b), or (c), requires immediate emergency medical, surgical, or other remedial care in an emergency situation, that care may be provided by a licensed physician and surgeon or, if the youth needs dental care in an emergency situation, by a licensed dentist, without a court order and upon authorization of a probation officer. However, probation staff must make reasonable attempts to obtain the consent of, or to notify, the parent, guardian, or person standing in loco parentis prior to authorizing the emergency care. This includes working collaboratively with HCA staff to obtain parental consent and answer their questions. These efforts shall be documented in [REDACTED].
2. Emergency situation refers to a youth requiring immediate treatment for the alleviation of severe pain or an immediate diagnosis and treatment of an unforeseeable medical, surgical, dental, or other remedial condition or contagious disease that, if not immediately diagnosed and treated, would lead to serious disability or death. An emergency situation also includes known conditions or illnesses that, during any period of secure detention of the youth by the probation officer, require immediate laboratory testing, medication, or treatment to prevent an imminent and severe or life-threatening risk to the health of the youth.
3. In the event of hospitalization of hospitalization or other emergency medical care of a youth, the unit SJCO or JH Duty Officer will work collaboratively with the JH-Medical Unit to notify the youth's parents and answer their questions. All information will be documented in [REDACTED].

IV. PROCESS

To ensure that medical consent for the youth is obtained in a timely manner, staff involved at the youth's initial point of contact with the Orange County Probation Department are responsible for attempting to obtain parental consent for the youth's medical care. This includes deputy juvenile correctional officers (DJCOs) working in the JH-Intake Release Center, Custody Intake DPOs, DPOs assigned to the Juvenile Court Officers Unit, and the youth's assigned field DPO.

A. JH-IRC DJCOs and Unit DJCOs

When a youth is brought to JH for potential booking, IRC will shall check [REDACTED] to see if the youth has a current (less than one year from date of signature) *Consent for Medical Care and Physical Examination* form that has been signed and approved by the youth's parent. If so, the Intake Health Screening shall proceed. If there is not a consent form on file, if a signed *Consent for Medical Care and Physical Examination* form is one year or older, or if the youth's [REDACTED] record indicates parental consent was denied, the following steps need to take place prior to the Intake Health Screening.

1. Contact the youth's parent(s)/guardian(s) via telephone and advise them of their right to consent to the youth's medical care unless otherwise restricted by the Court. Due to the time sensitive nature of the Intake Health

Screening, verbal consent is sufficient for the screening to proceed, with follow up for a parent signature on the form. (DJCOs assigned to the JH intake units where the youth is housed after booking will contact the youth's parent(s)/guardian(s) at the initial visit to obtain medical consent and signature). For parents who:

- a. Provide consent – Inform the parent(s) the authorization remains in effect until any of the following occur:
 - (1) The parent revokes consent in writing
 - (2) The petition is dismissed
 - (3) Dependency is terminated
 - b. Decline to provide consent – Inform the parent(s) that Court authorization may be sought.
2. Make reasonable efforts to obtain parental consent before seeking Court authorization for medical or dental care, treatment, or procedure. This includes working collaboratively with HCA staff to obtain parental consent and answer their questions.
 3. Use the *Consent for Medical Care and Physical Examination* form to obtain parental consent for medical care, dental care, mental health treatment, and a JH Intake Health Screening. This form needs to be completed for both verbal and written consent, as well as when consent is denied.
 4. Document efforts to obtain consent from a parent in [REDACTED].
 5. After securing proper consent, distribute a copy, if not already provided, to the JH-Medical Unit, the youth's assigned unit SJCO, the JH-Business/Booking ADD, and the youth's assigned DPO.
 6. If reasonable efforts to contact and have the parent(s)/guardian(s) sign the form are unsuccessful, if the parent(s) refuse to give consent, if the parent(s)/guardian(s) express disagreement with one another on providing consent, or if the parent(s)/guardian(s) revoke a previously signed authorization, treatment will not proceed without a court order. In these circumstances, the DJCO will:
 - a. Inform the parent(s) that Court authorization for basic medical care and/or an Intake Health Screening may be sought.
 - b. Document parent/guardian unwillingness, disagreement with one another, or revocation of prior consent on the *Consent for Medical Care and Physical Examination* form and in an [REDACTED] entry.
 - c. Immediately notify the duty officer or a JH administrator, who will prepare an Information for Court Officer (ICO) Report to notify the Court and request that the Court make a determination as to whether to authorize medical care for the youth.

Note: For time sensitive matters, the Duty Judge may need to be notified.

B. Custody Intake DPOs

While conducting the intake interview with the youth's parent(s)/guardian(s), the Custody Intake DPO shall check [REDACTED] to see if the youth has a current (less than one year old) *Consent for Medical Care and Physical Examination* form that has been signed and approved by the youth's parent. If so, a new form is not needed. If there is not a consent form on file, if a signed *Consent for Medical Care and Physical Examination* form is one year or older, or if the youth's [REDACTED] record indicates parental consent was denied, above steps IV.A. 1. through 4 need to be completed.

1. After securing proper consent, distribute a copy, if not already provided, to JH-Medical Unit, the youth's assigned unit SJCO, the JH-Business/Booking ADD. The Custody Intake unit clerk will then upload the document to the [REDACTED]. A copy will also be placed in the youth's file.
2. If reasonable efforts to contact and have the parent(s)/guardian(s) sign the form are unsuccessful, if the parent(s)/guardian(s) refuse to give consent, if the parent(s)/guardian(s) express disagreement with one another on providing consent, or if the parent(s)/guardian(s) revoke the previously signed authorization, treatment will not proceed without a court order. In these circumstances, the DPO will:
 - a. Inform the parent(s) that Court authorization for basic medical care and/or an Intake Health Screening may be sought.
 - b. Document parent/guardian unwillingness, disagreement with one another, or revocation of prior consent on the *Consent for Medical Care and Physical Examination* form and in an [REDACTED] entry.
 - c. Immediately prepare an ICO Report to notify the Court and request that the Court make a determination as to whether to authorize medical care for the youth. Once completed submit to assigned supervising probation officer for review and approval.

Note: For time sensitive matters, the Duty Judge may need to be notified.

C. Juvenile Court Officers

If a youth is ordered detained during a court hearing, the juvenile court officer shall check IDMS to see if the youth has a current (less than one year old) *Consent for Medical Care and Physical Examination* form that has been signed and approved by the youth's parent. If so, a new form is not needed. If there is not a consent form on file, if a signed *Consent for Medical Care and Physical Examination* form is one year or older, or if the youth's [REDACTED] record indicates parental consent was denied, above steps IV.A. 1. through 4 need to be completed by the court officer.

1. After securing proper consent, distribute a copy, if not already provided, to

JH-Medical Unit, the youth's assigned unit SJCO and the youth's assigned DPO.

2. If reasonable efforts to have the parent(s) sign the form are unsuccessful, if the parent(s) refuse to give consent, if the parent(s)/guardian(s) express disagreement with one another on providing consent, or if the parent(s)/guardian(s) revoke the previously signed authorization, treatment will not proceed without a court order. In these circumstances, the DPO will:
 - a. Inform the parent(s)/guardian(s) that Court authorization for basic medical care and/or an Intake Health Screening may be sought.
 - b. Document parent(s)/guardian(s) unwillingness, disagreement with one another, or revocation of prior consent on the *Consent for Medical Care and Physical Examination* form and in an [REDACTED] entry.
 - c. If the youth is in custody, immediately notify JH administration and/or the youth's assigned DPO via email and request that they prepare an ICO Report to notify the Court and request that the Court make a determination as to whether to authorize medical care for the youth.

D. Field DPOs

During the initial indoctrination with the youth and the youth's parent(s)/guardian(s), as well as one year after each consent, the youth's assigned DPO shall check ICMS to see if the youth has a current (less than one year old) *Consent for Medical Care and Physical Examination* form that has been signed and approved by the youth's parent. If so, a new form is not needed. If there is not a consent form on file, if the signed *Consent for Medical Care and Physical Examination* form is one year or older, or if the youth's [REDACTED] record indicates parental consent was denied, above steps IV.A. 1. through 4 need to be completed by the DPO.

1. After securing proper consent, upload the document to [REDACTED] and put a copy in the youth's file.
2. If reasonable efforts to have the parent(s) sign the form are unsuccessful, if the parent(s) refuse to give consent, if the parent(s)/guardian(s) express disagreement with one another on providing consent, or if the parent(s)/guardian(s) revoke the previously signed authorization, treatment will not proceed without a court order. In these circumstances, the DPO will:
 - a. Inform the parent(s)/guardian(s) that Court authorization for basic medical care and/or an Intake Health Screening may be sought.
 - b. Document parent(s)/guardian(s) unwillingness, disagreement with one another, or revocation of prior consent on the *Consent for Medical Care and Physical Examination* form, upload to [REDACTED], and in an [REDACTED] entry.

- c. If at any point the youth is booked into JH, immediately notify JH administration of the parent's unwillingness to complete the ICO Report to notify the Court and request that the Court make a determination as to whether to authorize medical care for the youth.

REFERENCES:

Procedures:	3-1-006	Handcuffs, Transportation Belts, Shackles, and Flex Cuffs
	3-1-022	Orientation
	3-1-030	Removing Youth to Juvenile Hall/Other Camp – Medical Holds, Courtesy Holds, Administrative Removals, Psych Holds
	3-1-049	Integrated Case Management System (ICMS) Automated Logbook and Manual Logbook
	3-1-105	Medical Temporary Release
	3-1-106	Death, Serious Suicide Attempts and Other Serious Incidents Related to Youths in Custody
	3-1-107	Management of Communicable Diseases
	3-1-401	Health Care Procedures
	3-1-404	Referral of Youth to Mental Health
	3-1-405	Mental Health Screening-Juvenile Hall
	3-1-406	Procedure for Referring Youth to Mental Health Facilities as a 5585 Hold
	3-2-011	Juvenile Hall Intake
	3-3-401	Youth Guidance Center Health Care Procedures for Probation Staff
	3-8-401	Health Care Procedures for Probation Staff Youth Leadership Academy
Policies:	F-10	Medical Examination and Treatment for Juveniles

C. Ronald

APPROVED BY: