



**FLORIDA DEPARTMENT OF JUVENILE JUSTICE
DETENTION SERVICES
FACILITY MEDICAL POLICIES**

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| Superintendent Signature Designated Health Authority Signature | Effective Date: July 51, 2016 | Revised Date: July 5, 2018 | | Procedure Number: 8001 Medical Services |
| Subject: DESIGNATED HEALTH AUTHORITY | | | Reference: 63M-2.0031 F.A.C. Quality Assurance Standard 4.01 | |
| Purpose: | The purpose of this policy is to outline the role and responsibilities of the Designated Health Authority for the facility. | | | |

PROCEDURE:

A. Role and Responsibilities of the Designated Health Authority (DHA)

- a. The DHA is clinically responsible for the medical care of all youth at the facility, as outlined in the FOPs and the Health Services Rule.
- b. The DHA must be a medical doctor (MD) or osteopathic physician (DO) who holds an unrestricted license and meets all requirements for independent and unsupervised practice in Florida.
- c. Final clinical decision-making, with regard to the provision of health care, rests with the DHA. This person is responsible for the overall clinical services occurring within the confines of the facility.
- d. The DHA will be on-site at the facility once per week, at a minimum, with the exception of vacation time, when coverage must be arranged, to provide clinical services and administrative oversight as the clinical needs of the population may dictate.
- e. Clinical decisions that involve the facility operations, staff or administration should be made in conjunction with the facility Superintendent. However, the clinical autonomy and decision-making by the DHA and professional health care designees cannot be interfered with without demonstrated cause, and at no time can it be usurped if doing so jeopardizes the medical or mental health of the youth. This principle also applies to the job related activities and duties of on-site nurses contracted at insert facility name.
- f. The DHA is responsible for the development, review and approval of all health-related procedures and protocols used at the facility.
 - i. Annual review of all procedures and protocols is required
 - ii. The DHA and Superintendent shall sign and date a cover page that incorporates a list of all reviewed procedures and protocols.
 - iii. New procedures and protocols developed or an existing protocol or procedure changed shall bear the date and signature of the DHA review and approval, the facility superintendent date and signature, as well as the representative of any other affected disciplines.
- g. The DHA or Physician Designee shall perform all necessary Comprehensive Physical Assessments, periodic evaluations, chronic care services, medication management, sick

call referrals from the nurse, ARNP or PA and other services as described in 63M-2 F.A.C.

- h. When a PA is used, the DHA will have a supervisory relationship with the PA.
- i. Unless the DHA at a given facility or program is also the designated Psychiatrist, the DHA shall not be responsible for:
 - i. The development or review of facility operating procedures or other protocols related to psychiatric services
 - ii. The management of psychiatric conditions
 - iii. The prescribing of psychotropic medications.
- j. The above services shall be the responsibility of the facility Psychiatrist, duly licensed/certified in the State of Florida.
- k. The DHA shall be available by telephone, or in person, for consultation and advice.
- l. The DHA shall be responsible for the general oversight of the clinical care delivered by the medical personnel.
- m. Only the clinical responsibilities of the DHA may be delegated to a designee and only to the following type of practitioners:
 - i. Another Physician (MD or DO)
 - ii. A Physician Assistant
 - iii. An Advanced Registered Nurse Practitioner
- n. Policy and protocol development and administrative oversight may not be delegated.
- o. If a youth's clinical condition falls beyond the scope of training and expertise of the designee, then it is the DHA's responsibility to ensure that the youth receives appropriate care in a timely manner.
- p. Registered Nurses, Advanced Registered Nurse Practitioners nor Physician Assistants may serve as a facility's Designated Health Authority.
- q. Corporate Physician, who does not perform clinical/administrative duties on-site may not serve as the facility's Designated Health Authority.

B. Delegation of Clinical Responsibilities to an Advanced Registered Nurse Practitioner (ARNP)

- a. The DHA may name the facility Advanced Registered Nurse Practitioner (ARNP) as his/her designee for clinical responsibilities only. This ARNP must have education, experience and certification in Family Health or Pediatrics.
- b. This person shall not become the Designated Health Authority in title. The delegation must be articulated and specified in a current and valid Collaborative Practice Protocol (CPP) between these two individuals. The CPP must specifically state the name of the Regional Juvenile Detention Center at which the Physician is the DHA and that the ARNP is his/her designee. The Physician will remain the Designated Health Authority of record. The DHA shall have a supervisory relationship with the ARNP that shall be defined in the collaborative practice protocol.
- c. The DHA must come on site for administrative responsibilities and for clinical duties that are beyond the scope of expertise and training of the ARNP.
- d. Collaborative Practice Protocols: Pursuant to Chapter 64B8-35.002, FAC, the ARNP shall have a written protocol signed by all parties that is maintained at the site of services to be rendered, representing the mutual agreement of the Physician and the ARNP. Copies of these protocols shall be maintained at the RJDC, by the provider and the Regional Office.
 - i. The protocols shall include, at a minimum, the following components:
 - 1. General Data: ARNP name, address, ARNP certificate number;
 - 2. Physician name, address, license number, and DEA number
 - 3. Date developed, and dates amended, with signatures of all parties

4. Location of facility, stating that the Physician is the DHA and ARNP is the designee;
 5. Description of duties of the ARNP
 6. Description of duties of the Physician
 7. Management areas for which the ARNP is responsible
 8. Conditions for which therapies may be initiated
 9. Treatments that may be initiated by the ARNP
 10. Drug therapies that the ARNP may prescribe, initiate, monitor, alter, or order
 11. A provision for annual review by the parties
 12. Specific conditions and a procedure for identifying conditions that require direct evaluation or specific consultation by the Physician to insure acceptable standard of supervision and medical care
 13. A copy of the protocol or amendments shall be signed by the ARNP and Physician and a copy kept at the location of the practicing ARNP. A copy of all protocols shall be maintained for a period of four years.
- e. The DHA may not supervise an ARNP in more than four facilities in addition to the Physician's primary practice location.
 - f. A Physician that supervises an ARNP or PA must post his or her current schedule of the regular hours that the Physician plans to be present in the facility, and the hours that the medical clinic is open when the DHA is not present.