

JUVENILE COURT HEALTH SERVICES POLICY – MEDICINE

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| Subject: CARE OF PREGNANT YOUTH | Original Issue Date: 1/28/14 | Policy #: MED-03 |
| | Supersedes: 5/14/18 | Effective Date: 6/12/2021 |
| Departments Consulted: Nursing | Approved By: (Signature on File) Health Services Administrator (Signature on File) Nursing Director | Approved by: (Signature on File) Medica Director |

PURPOSE

To define procedures for the care of pregnant females who are in Probation juvenile detention facilities.

POLICY

JCHS will provide primary care for any detained pregnant youth, and will coordinate all necessary obstetric care with LAC+USC High Risk OB Clinic/Midwife Clinic and Emergency Room.

PROCEDURE

1. All detained females will be tested for pregnancy upon admission with a urine qualitative beta-HCG point-of-care test.
2. All pregnant youth will be referred to LAC+USC High Risk OB Clinic for prenatal care.
3. In addition to the referral to OB Clinic, the following care needs for all pregnant youth shall be ordered:
 - a. Prenatal diet (Diabetic prenatal diet available, as needed)
 - b. Prenatal vitamins
 - c. Ferrous sulfate supplement as needed
 - d. Consult to Public Health (for supportive services after release from detention)
 - i. Nursing may have already completed the LA County Home Visiting Program form for the Public Health Nurse. If that is the case, another consult to Public Health is not necessary
 - ii. If Nursing had not completed this form, the physician will place the Consult to Public Health order
 - e. Mental Health referral
4. The physician will verify that a referral was made to the Juvenile Hall Transition Team (JHTT)
 - a. The HIM department will be the ones who will typically notify this Probation team who are following up that a youth has the services she needs upon discharge from the facility.
 - b. If the referral was not documented as having been made, a physician will email the JHTT via EDL-PROBJHTT@probation.lacounty.gov.
5. Pregnant youth will be identified as “Fragile Youth”, and accordingly have a Fragile Youth Care Plan (ad hoc form) completed in the medical record.
6. Any clinic visits where the reason for visit involves pregnancy management, the physician will include the Chronic Disease PowerForm in PEMRS as part of their documentation.

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7. Housing:
 - a. Youth may be cleared to any hall or camp until 28 weeks gestational age.
 - b. Between 28 and 32 weeks, pregnant youth must be housed at a juvenile hall.
 - c. After 32 weeks, pregnant youth must be housed at Central Juvenile Hall.
8. Youth who are pregnant and who request a termination of pregnancy will be referred to the Options Clinic at LAC+USC for further counseling and management.
9. Pregnant youth whose immunizations are not up-to-date will only receive vaccines that are deemed safe during pregnancy, according to CDC guidelines.

REFERENCE

JCHS Policy # C-203, "Care of Pregnant Youth"
Centers for Disease Control and Prevention, "Immunization and Pregnancy"

Revision Dates

May 14, 2018; June 12, 2021

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