Code Blue and First Aid (Title 15, Sections 1341; 1412)

Effective Date:	03/17/26
Revised Date:	03/17/26
Issuing Authority: Chief Probation Officer	

638.1 PURPOSE:

To establish guidelines for the announcement/response to a Code Blue in Juvenile Detention and Assessment Centers (JDACs) and Treatment Facilities (TFs).

638.2 DEFINITIONS:

Automated External Defibrillator (AED): A portable medical device used to diagnose and treat life-threatening cardiac arrhythmias.

Code Blue: Radio code used to announce a medical emergency within a JDAC or TF.

Closed-Circuit Television Security System (CCTSS): A system by which mounted video cameras and microphones monitor and record activities throughout the facility (internally and externally), 24 hours a day, seven days a week.

Incident Commander: The first supervisor to arrive on the scene of an incident or designated by the Watch Commander (WC)/Treatment Facility Supervisor (TFS).

Medical Emergency: An acute injury or illness that poses an immediate risk to a person's life or long-term health.

638.3 GUIDELINES:

A. AEDs are available at designated locations in the facility.

638.4 RESPONSIBILITIES:

I. Sworn Staff:

A. Shall use the Handie Talkie (HT) to broadcast "Code Blue" and the location (i.e., "Code Blue Unit 2A"). Announce pertinent information to alert responding staff of the situation, such as the presence of blood or other hazards, including the number of injured individuals. If multiple individuals are injured, consider calling "Code Blue – Multiple Bodies." This will alert medical staff to bring additional supplies and sufficient personnel to attend to multiple patients.

B. Staff who identified the need for the Code Blue are to remain on scene to provide information to the first responding medical staff.

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C. Staff not in direct supervision of youth shall respond immediately to the location.

D. Secure all youth in their rooms, then respond to the incident. One staff member shall stay on the unit for supervision.

E. Assess the situation and provide immediate First Aid and/or Cardiopulmonary Resuscitation (CPR) and/or AED if needed, and continue doing so until directed otherwise by medical staff or until the scene is no longer safe.

F. Responding staff will secure all youth not involved in their rooms or another designated area.

G. An available staff shall record the incident using the handheld video camera.

H. Provide pertinent information to responding staff and supervisors.

I. Once on scene, shall not leave the area until dismissed by the IC.

J. Notify the Forensic Adolescent Service Team (FAST) of the incident.

K. Complete an Incident Report (IR) if directly involved. Others present will complete an IR at the request of the IC.

L. Participate in a debriefing as directed by the IC.

M. Document the Code Blue in CE.

N. Ensure that First Aid Kits, 911 Tools, and Resuscitator Bags are readily available and adequately stocked in the assigned areas as applicable.

O. Submit a First Aid Supply Refill Form (located in ProbTools) to Medical Services to request replacement supplies for the First Aid Kit as needed.

P. In the event of a youth's death, follow the Death of a Youth While Detained in a Juvenile Detention and Assessment Center and/or Treatment Facility procedure.

II. Central Control (Sworn Officer):

A. Re-broadcast the call, "Code Blue (location)" twice (i.e., "Code Blue Unit 2A").

B. Direct all staff to cease movement and suspend all non-emergency radio and telephone traffic.

C. Monitor the situation, re-broadcast pertinent information, and follow up on any requests as communicated by the IC.

D. When the Code Blue is called off by the IC, acknowledge the Code Blue is over, "10-4," and announce twice, "Attention all staff, Code Blue over (location)."

III. Facility Safety and Security Officer/Designee:

A. Ensure AEDs are maintained properly per manufacturer's standards, making sure the battery is functioning properly and checking the expiration of the pads.

B. Inspect contents of first aid kits located throughout the facility monthly.

IV. Probation Corrections Supervisor I (PCSI)/Incident Commander (IC):

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A. Respond immediately to the area.

B. First responding PCSI on scene is the IC and will provide continuous updates of information to the Watch Commander (WC) unless otherwise directed.

C. Provide guidance and clear directives.

D. Determine the progress of the medical situation and gather information on the incident from the staff for pertinent case history and events leading up to the Code Blue.

E. Ensure staff have started to record the incident using the handheld video camera.

F. When enough officers arrive to control the situation, dismiss and/or position staff accordingly for safety and security.

G. Ensure documentation is properly noted in CE.

H. Retrieve, review, and download the passive and handheld video into the JDAC video tracking log for DCPO review only folder.

I. Review Incident Reports pursuant to the Incident Reports procedure.

J. Conduct a debriefing with involved staff as applicable and offer Peer Support and Counseling Team mental health services.

V. Watch Commander (WC)/Treatment Facility Supervisor (TFS):

A. Shall respond to the area.

B. Consult with the IC.

C. At the direction of Medical Services, call 911, or delegate this responsibility, and notify the Chief Probation Officer.

D. In the event outside Emergency Medical Services are needed, assign staff to help escort the emergency personnel to the incident area.

E. Delegate which staff will accompany the youth in the ambulance and which staff will follow behind in a county vehicle for emergency room transport and/ or Hospital Watch.

F. Contact the Facility Director, or if after hours, contact the on-call Director and Facility Director, and make appropriate notifications, including notifying the Chief Probation Officer when a youth/staff is transported by ambulance.

G. Review the handheld and CCTSS recordings, and ensure a copy of each recording is attached to the IR, and uploaded under the DCPO only folder.

H. Ensure the Code Blue is documented in the WC's log.

I. Evaluate the circumstances of the Code Blue, review Incident Reports, consult with the IC on corrective actions or training needs, and provide recommendations to the JDAC/TF Administration.

J. Ensure debriefing is conducted, as applicable, and ensure Peer Support and Counseling Team mental health services are offered.

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VI. Facility Division Director I/II or On-call Division Director I/II (DDI/II):

A. Collect and review incident report packets.

B. Keep the Detention Corrections Bureau Deputy Chief Probation Officer apprised of the situation.

C. Review and approve plans for the annual mass disaster and the youth-down drills in collaboration with the Health Service Manager.

VII. Chief Medical Officer:

A. Determine and approve the contents, quantity, and location of first aid and emergency response equipment.

B. Review and approve the procedure for periodic inspections of first aid and emergency response equipment.

VIII. Health Service Manager (HSM):

A. Evaluate training needs for emergency response.

B. Approve the contents, location, and frequency of inspections of the first aid and emergency response equipment in collaboration with the Chief Medical Officer.

C. Review and approve plans for the annual mass disaster and the youth-down drills in collaboration with Facility Administration.

D. Ensure recommendations for health staff from critiqued mass disaster and youth-down drills are addressed.

IX. Supervising Correctional Nurse I/II:

A. Designate nursing staff to perform quality assurance checks on first aid and emergency response equipment as outlined in the Medical Quality Assurance Plan.

B. Shall plan and conduct mass disaster and youth-down drills annually, following approvals by the Health Service Manager and Facility Administrator. Mass disaster drills must be executed during each shift and rotated over a three-year period. Youth down drills must be conducted annually and cover each shift.

C. After each drill, conduct a critique, share findings with health staff, and submit the critique along with verification of its distribution to nursing staff to the HSM.

X. Correctional Nurse I/II:

A. Immediately respond to all medical emergencies with first aid/emergency equipment when the scene is safe to do so.

B. The first responding Correctional Nurse shall:

1. Coordinate, delegate, and lead ongoing health care treatment needs required.

2. Collaborate with the IC/WC to assess the situation and determine the need for Emergency Medical Services (911).

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3. Complete the Urgent Medical Referral Form in the event the youth(s) are transported to the hospital via Probation Transportation.
4. Complete a Medical Services Incident Report Addendum.
5. Document the Code Blue in the health record per Nursing Protocol.

C. Notify the IC/WC to discontinue the emergency response when the emergency is resolved.

D. Remain on scene as needed for additional support.

E. Participate in debriefing.

F. Ensure an emergency response bag is maintained in each medical clinic with advanced medical supplies.

G. Perform quality assurance checks on first aid and emergency response equipment as assigned by the Supervising Correctional Nurse.

XI. Licensed Vocational Nurse (LVN):

A. Immediately respond to all medical emergencies with first aid and emergency response equipment when the scene is safe to do so.

B. Provide patient care in accordance with the scope of practice for Licensed Vocational Nurses.

C. Remain on scene as needed for additional support.

D. Participate in debriefing.

E. Perform quality assurance checks on first aid and emergency response equipment assigned by the Supervising Correctional Nurse.

XII. Forensic Adolescent Services Team (FAST) Clinic Supervisors:

A. Ensure critiqued youth-down drills are shared with FAST staff.

B. Submit the critique, along with verification that it was shared with FAST staff, to the Juvenile Justice Program Manager (JJPMII).

XIII. FAST:

A. Respond to Code Blues as directed by the IC/WC.

B. Notify the JJPMII and the FAST Clinic Medical Director of codes involving attempted suicides and/or mental health hospitalizations.

C. Participate in debriefing.

XIV. Food Service Supervisor:

A. Inspect first aid kits in the kitchen monthly.

XV. Training Unit:

A. Ensure First Aid and Emergency Response training is provided prior to staff assignment to a living unit.

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B. Train staff how to respond appropriately to emergencies requiring first aid and/or an AED.

C. Provide clerical, dietary, and mental health staff with training upon request.

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