



## TEAP Specialist Regional Training

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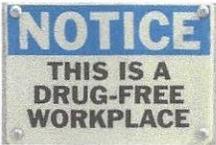


## Job Corps' Mission

As a national, primarily residential training program, Job Corps' mission is to attract eligible young adults, teach them the skills they need to become employable and independent, and place them in meaningful jobs, higher education, or the military.



## Trainee Employee Assistance Program




### Job Corps Center Locations



Boston Region  
21 Centers

- PR = 3 centers
- Maine = 2 centers
- NH = 1 center
- Vermont = 1 center
- Mass = 3 centers
- RI = 1 center
- Conn = 2 centers
- NY = 7 centers
- NJ = 1 center




## Trainee Employee Assistance Program a.k.a. TEAP Pronounced as ??






### TEAP: Today's Agenda

- 8:30: Introductions
- 9:00: Intro to Job Corps and Overview
- 9:15: Recent PRH Changes/Trends
- 9:30: Prevention and Education Activities
- 10:00: Screening and Assessment
- 10:30: Break
- 10:45: Urine toxicology screening: Chain of Custody, Suspicious screens and Alcohol Testing
- 11:45: Networking
- 12:00: Lunch
- 1:00: Intervention and Relapse Prevention
- 2:00: AFR (609/610)
- 2:15: CMHC Collaboration
- 2:30: MSWR
- 2:45: Break
- 3:00: TUPP
- 3:30: Confidentiality
- 3:45: Documentation, Forms, PCA prep, Bests Practices
- 4:15: Wrap up and Reminder

### Evolution of TEAP in Job Corps

- Job Corps began 1964
- 1992 – drug/alcohol testing program and full-time 'AODA Specialist' on all centers
- Zero Tolerance for Violence and Drugs Policy implemented in 1995
- Then changed to an employee-driven model and TEAP was modeled after an EAP (Employee Assistance Program)

**JOB CORPS**  
*Success lasts a lifetime!*

### 6.11 Related Health Programs

Includes TEAP, SART, HEALS, TUPP among others  
Goals for all these programs:

P1. To provide prevention and intervention services and short-term treatment that will enhance student participation in the program and employability

P2. To promote healthful choices that will have a positive impact on student physical and emotional well-being

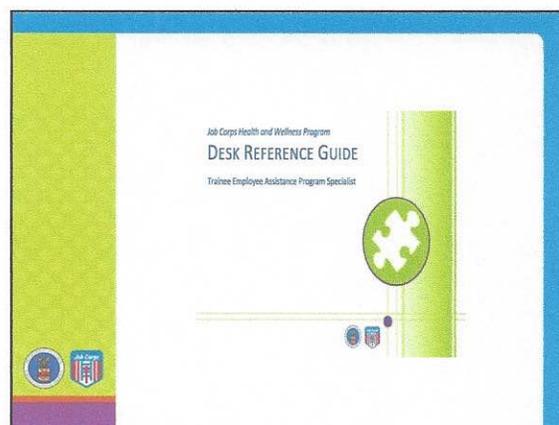
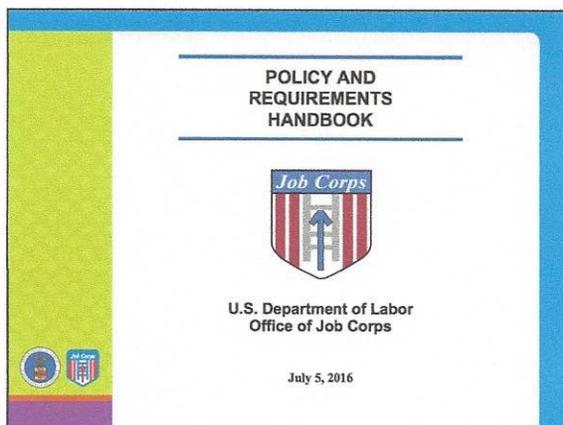
P3. To provide students with information and skills that will allow them to make appropriate choices regarding their health care needs, and to demonstrate acceptable workplace behavior that will enhance their opportunity for employment

### What is Overall TEAP Goal?

Assist students in developing appropriate health and wellness practices that will enhance their ability to obtain/maintain employment

### Important Resources

- PRH—The Policy and Requirements Handbook
- PAG—The Program Assessment Guide
- COP/SOP—Center or Standard Operating Procedures
- DRG—Desk Reference Guide
- WEBSITE  
<https://supportservices.jobcorps.gov/Health/Pages/default.aspx>



### Job Corps Health & Wellness Website

- For Job Corps health and wellness staff
- Outside of Citrix
- Get latest information notices
- Templates
- Other Information

### So What is TEAP?

Connected  
Support  
Trust  
Acceptance

Completers  
Address resistance  
Positive change  
Build relationships  
Energy  
Accessible

TEAP is Program not a Person

### TEAP Specialist Qualifications and Hours

Qualified defined in Exhibit 5.3 as:  
*Active, unrestricted substance abuse license or certification that meets minimum state licensing or certification requirements to practice in the state where the center is located (or else terminal 1 year waiver from NO required)*

Primary Duties: Provides substance use services/consultation/training  
Generally 50% of time used for:

- prevention and education for students and staff
- Consultation
- Annual trainings

Exhibit 6-5: TEAP Specialist: Six hours/100 students/week minimum required TEAP coverage by a qualified TEAP specialist



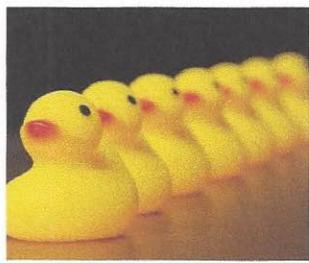
### Other Skills Needed



LAUGH A LITTLE  
EACH DAY  
IT'S BETTER  
THAN CHECKIN' SOUP  
AT LEAST THAT'S WHAT THE CHICKENS SAY



### Flexibility with Structure




### Let's Boil It Down – Six Major Areas

- PREVENTION/EDUCATION
- ASSESSMENT
- RELAPSE PREVENTION
- OVERCOMING BARRIERS
- DOCUMENTATION
- TRAINING



### TEAP/TUPP COMPONENTS

PREVENTION/EDUCATION (TEAP and TUPP)

- Being visible
- Center wide activities
- CPP/CDP/CTP
- Coordination with other staff
- TUPP activities for all students

ASSESSMENT (This is in part why credentialed necessary)

- AFR
- SIF
- Use of Formalized Assessment Measures
- MSWR



### Components (continued)

RELAPSE PREVENTION

- Self-help groups (on/off center)
- Groups with RP focus
- Individualized RP planning
- RP interwoven

OVERCOMING BARRIERS

- Oversee Drug testing program
- TEAP Intervention services
- Alcohol testing and intervention services
- TUPP intervention services



### Finally

DOCUMENTATION

- Clinical notes (content and participation) for TEAP and TUPP
- HCG's/SMG's

TRAINING

- On suspicion screening (drugs and alcohol)
- Other AODA related trainings – topic de jour
- Community partners for training



### Health Directives

- PRH Change Notices—Contain new or revised policy with instructions to delete, replace, or add pages to the PRH
- Program Instructions—Provide one-time instructions with a designated expiration date and usually require center response (e.g., survey)
- Information Notices—Provide one-time announcements with information that is of interest to centers (e.g., data summaries, meeting or training announcements)



### Update: Applicable to TEAP

PRH Change Notice

- 15-09 and 15-15: Revisions to Exhibit 3.1 (No suspicion screen intervention period; alcohol policy changes and implications for test refusal)
- 15-10: Waiver process change and Exhibit 5.3

Program Instruction

- PI 14-42 Clarify Count

Information Notices

- IN 15-09 Removal of levels (ng.)
- IN15-32 TEAP Observances
- IN14-43 Alcohol



### Emerging Trends: Opiates and JC

- June and July 2016 – two possible opiate related deaths in JC (on center)
- Importance of updating knowledge
- Educating staff and students
- Updating suspicion screen form
- Teach staff symptoms of opiate overdose
- Naloxone



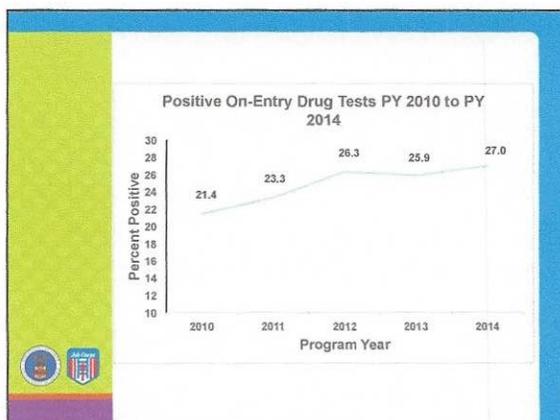

### PRH 6.11 R1: TEAP

The general emphasis of TEAP shall be on:

- Prevention
- Education
- Identification of substance abuse problems
- Relapse Prevention

Overall Goal: Helping students overcome barriers to employability

So why prioritize prevention and education?

### Prevention and Education Requirements

- 1 hour presentation on substance use prevention in CPP to include:
  - Description of the Center's TEAP
  - JC's and the center's drug and alcohol policies
  - Consequences for testing positive (alcohol and/or drugs)
- Career Development and Transition Period presentations
- Annual Center-wide activities (3)
- Consultation with staff around prevention and education efforts
- Coordination with other departments/programs




## Prevention and Education Services

Templates are available for all three transition phase presentations on the JC Community Website.

<https://supportservices.jobcorps.gov/health/Pages/default.aspx>

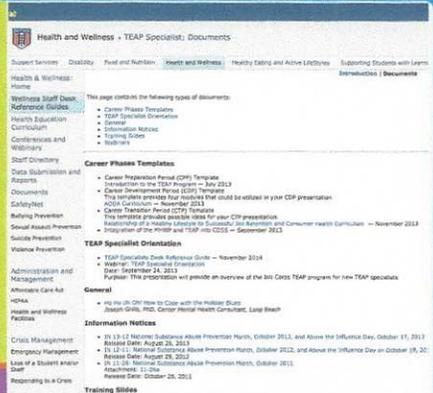
- Where are they located on the JC website?

## Look on the right hand side – third box down



**TEAP Specialist**

- TEAP Specialist Desk Reference Guide
- TEAP Documents
- Webinar: TEAP Specialist Orientation



**Health and Wellness - TEAP Specialist - Documents**

This page contains the following types of documents:

- Career Phase Templates
- TEAP Specialist Orientation
- TEAP Documents
- Information topics
- Training Slides
- Webinars

**Career Phase Templates**

- Career Preparation Period (CPP) Template
- Career Development Period (CDP) Template
- Career Transition Period (CTP) Template

**TEAP Specialist Orientation**

- TEAP Specialist Desk Reference Guide – November 2014
- Webinar: TEAP Specialist Orientation
- Date: September 24, 2013

## CPP Presentation

Components:

- TEAP Specialist Introduction Confidentiality (42 CFR Part 2 and HIPAA)
- Zero Tolerance (ZT) Policy
- Center-wide Prevention And Education Activities
- Drug Screening
- TEAP Mandatory Program
- Alcohol Use Policies
- Alternative Activities
- Tobacco Use Prevention Program (TUPP)
- Hazards Of Drug Use (Opiates?)
- Summary And Questions/Answers

## Career Development (CDP) and Transition Periods (CTP)

- More flexibility with format and time
- Focus on linking success in JC to a drug-free lifestyle which equals **EMPLOYABILITY**
- Templates on JC Community Website with many ideas for these meetings
- CDP: Alcohol and Other Drugs of Abuse
- CTP: Relationship of a Healthy Lifestyle to Successful Job Retention and Consumer Health

## CDT/CTP Programming

- Goal:
  - Feelings of competence/success reinforced when students successfully complete the phases of JC
- Activities:
  - Brainstorm what factors helped with success:
    - Personal/individual strengths: high motivation, focus on goals and better future,
    - External structure and routine: waking up at set time, set daily schedule and expectations
    - Support/mentoring: helpful and supportive instructors, RAs, counselors, H&W staff
    - Access to care services

### CDT/CTP Programming (cont.)

- Then tie to TEAP and employability to identify challenges of transitioning out of JC:
  - Staying abstinent/managing
  - Returning to the old neighborhood/negative influences
  - Finding local services (AA/EAP programs)
- Develop plan to include:
  - Services available in local communities (e.g., EAP, AA/NA, other support groups)
  - Use internet to find resources in their home town/future town
  - Draft plan to access these services addressing barriers such as transportation



### Another Prevention & Education Requirement

- Three center-wide activities annually (keep track of this information)
  - National TEAP Observances such as:
    - Kick Butt Day in March
    - National Alcohol Awareness Month - April
    - National Recovery Month - September
    - Red Ribbon Week in October
    - Above the Influence Day in October
    - Substance Abuse Awareness Month - October
    - Great American Smokeout - November
  - Outside Speakers/Activities
    - Tabling in cafeteria when students leave on break
    - Various Contests (e.g. poster, essay, poetry)
    - Presentations at weekly assembly
    - TEAP sponsored recreational activities
    - Special dress days: 'sock it to drugs', 'hats off to being drug-free'




### Prevention and Education

Clinical consultation/coordination to get input and buy-in from:

- Center Director
- Management Staff
- CMHC
- Wellness Staff
- HEALs
- Recreation and Residential staff



- Take lead on prevention activities
- Develop support and alliances for assistance
- Keep it salient/relevant
- Delegate



### Examples: Prevention and Education "in action"



Thanks to George  
In South Bronx




### Screening

To identify high risk students is the **SOLE** purpose and to develop rapid interventions effectively implemented

- ETA 653
- JC Health History Form (3 questions)
- SIF (Social Intake Form)



### Job Corps Health Questionnaire (ETA 653)

9. To your knowledge, have you EVER had or do you now have any of the following conditions?			
a. Anxiety (including panic and stress)	NO <input type="checkbox"/> YES <input type="checkbox"/>	10. Learning disabilities (e.g., dyslexia, etc.)	NO <input type="checkbox"/> YES <input type="checkbox"/>
b. Asthma	NO <input type="checkbox"/> YES <input type="checkbox"/>	11. Attention Deficit/Hyperactivity Disorder (AD/HD or ADHD)	NO <input type="checkbox"/> YES <input type="checkbox"/>
c. Visual impairment/blurred vision	NO <input type="checkbox"/> YES <input type="checkbox"/>	12. Mental Retardation (MR) Intellectual disability developmental disability	NO <input type="checkbox"/> YES <input type="checkbox"/>
d. Hearing impairment/blurred hearing	NO <input type="checkbox"/> YES <input type="checkbox"/>	13. Depression	NO <input type="checkbox"/> YES <input type="checkbox"/>
e. Obesity	NO <input type="checkbox"/> YES <input type="checkbox"/>	14. Anxiety disorder	NO <input type="checkbox"/> YES <input type="checkbox"/>
f. Diabetes (type 1 and 2)	NO <input type="checkbox"/> YES <input type="checkbox"/>	15. Obsessive-compulsive disorder	NO <input type="checkbox"/> YES <input type="checkbox"/>
g. Heart condition	NO <input type="checkbox"/> YES <input type="checkbox"/>	16. Impulse-control disorders (e.g., gambling, kleptomania, pyromania, etc.)	NO <input type="checkbox"/> YES <input type="checkbox"/>
h. High blood pressure	NO <input type="checkbox"/> YES <input type="checkbox"/>	17. Schizophrenia	NO <input type="checkbox"/> YES <input type="checkbox"/>
i. Kidney, bladder, or urinary problems	NO <input type="checkbox"/> YES <input type="checkbox"/>	18. Conduct disorder	NO <input type="checkbox"/> YES <input type="checkbox"/>
j. Speech problem (e.g., stuttering, etc.)	NO <input type="checkbox"/> YES <input type="checkbox"/>	19. Traumatic brain injury	NO <input type="checkbox"/> YES <input type="checkbox"/>
k. Tobacco use (TS) or another TN use	NO <input type="checkbox"/> YES <input type="checkbox"/>	20. Border disorder	NO <input type="checkbox"/> YES <input type="checkbox"/>
l. Abuse of alcohol or prescription or other drugs	NO <input type="checkbox"/> YES <input type="checkbox"/>	21. Anti-social personality disorder	NO <input type="checkbox"/> YES <input type="checkbox"/>
m. Epilepsy, seizures, convulsions	NO <input type="checkbox"/> YES <input type="checkbox"/>	22. Adult attention disorders (e.g., Attention Deficit)	NO <input type="checkbox"/> YES <input type="checkbox"/>
n. Hepatitis	NO <input type="checkbox"/> YES <input type="checkbox"/>	23. A mental health problem or disorder	NO <input type="checkbox"/> YES <input type="checkbox"/>
o. Cancer/pregnancy	NO <input type="checkbox"/> YES <input type="checkbox"/>	24. A drug or alcohol problem or disorder	NO <input type="checkbox"/> YES <input type="checkbox"/>



### JC Health History Form

3 Questions to review as needed or if referral:

**Alcohol, Drugs, and Tobacco**

33. In the past 2 weeks, have you used alcohol or used drugs frequently or daily? Yes

34. Have you ever smoked cigarettes or used tobacco products? Yes

35. Would you like to speak with someone about your alcohol or drug use? Yes

**\*Immediate referral to TEAP**



### Further Assessment

- Identify and intervene with high-risk students
- Each JC Center to determine:
  - Specifics of assessment process
  - Timeframe for assessment
  - Process for documentation in SHR
- The general process is:
  - Review SIF (Social Intake Form) within one week
  - Utilized Formalized assessment measures (e.g., SASSI3 or SASSIA2) and clinical judgment to determine students' level of risk for substance use (DAST; MAST =okay; CAGE is not)
  - Other assessment measures acceptable as long empirically-derived
  - CRAFFT is NOT considered FAM because it is given to everyone at entrance




### The Visual

1. Drink any alcohol (more than a few sips)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Smoked any marijuana?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Used anything else to get "high"?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If you answered NO in all three questions answer Question 4 only.</i>	
4. Have you ever ridden in a CAR driven by someone (including yourself) who was "high" or had been using alcohol or drugs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Do you ever use alcohol or drugs to RELAX, feel better about yourself, or to fit in?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Do you ever use alcohol/drugs while you are by yourself, ALONE?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If you answered NO in three questions skip the next four questions.</i>	
<i>If you answered YES in any of the above questions answer Questions 7 through 11.</i>	
7. Do you ever FORGET things you did while using alcohol or drugs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Do your family or FRIENDS ever tell you that you should not drink on your drinking or drug use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Have you gotten into TROUBLE while you were using alcohol or drugs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Are you bothered by a friend/family member/partner's alcohol or drug use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
11. In the past three months have you used any type of tobacco product?	<input type="checkbox"/> Yes <input type="checkbox"/> No

1. CRAFFT-Massachusetts Department of Public Health Bureau of Substance Abuse Services, Boston, MA, Massachusetts Department of Public Health, 2009.



### SIF Specifics

- Completed by counselors within 48 hours
- Sent to HWC within 1 week for review
- Provides critical clinical information about risk
- Built into SIF is actuarial risk measure (CRAFFT)
- CRAFFT is a mnemonic (**C**ar, **R**elax, **A**lone, **F**orget, **F**riends/Family and **T**rouble)
- Research indicates **2 or more yes** requires further evaluation and 4 or more "should raise suspicion of substance dependence" (Knight et al., 2002)
- Students with 2 or more are further assessed and offered TEAP services (cannot be mandated)



## CRAFFT

- Total of nine questions – both screening and follow-up questions
  - There are two other questions that are not part of CRAFFT but offer valuable information:
    1. Are you bothered by a close friend/family member/partner's alcohol or drug use?
    2. In the past three months have you used any type of tobacco product?
- Screening Questions:
  1. Drank any alcohol (more than a few sips)?
  2. Smoked any marijuana?
  3. Used anything else to get "high"?

If yes to any, then student answers next six questions



## Scoring of CRAFFT

4. Have you ever ridden in a **CAR** driven by someone (including yourself) who was "high" or had been using alcohol or drugs?
5. Do you ever use alcohol or drugs to **RELAX**, feel better about yourself, or fit in?
6. Do you ever use alcohol/drugs while you are by yourself, **ALONE**?
7. Do you ever **FORGET** things you did while using alcohol or drugs?
8. Do your family or **FRIENDS** ever tell you that you should cut down on your drinking or drug use?
9. Have you gotten into **TROUBLE** while you were using alcohol or drugs?



## SIF Important Step

Reviewed by:

Counseling Manager _____	Date _____
Center Mental Health Consultant, if applicable _____	Date _____
TEAP Specialist _____	Date _____

\_\_\_\_\_  
Print Name and Representative Office



## Next Steps with CRAFFT

- CRAFFT SCORE (one point for each yes on questions 4-9). Two or more 'yes' answers = high risk for ongoing substance use and requires further assessment using clinical judgment and FAM
- See this website for possible FAM if do not have access to SASSI inventories:
  - <https://www.drugabuse.gov/nidamed-medical-health-professionals/tool-resources-your-practice/screening-assessment-drug-testing-resources/chart-evidence-based-screening-tools-adults>
- FAM assessment must be designed and normed on adolescents/young adults
- FAM must be assessment devices and NOT screening tools



## Formalized Assessment Measures

- AUDIT - [http://www.integration.samhsa.gov/AUDIT\\_screener\\_for\\_alcohol.pdf](http://www.integration.samhsa.gov/AUDIT_screener_for_alcohol.pdf)
- DAST - [http://www.drtepp.com/pdf/substance\\_abuse.pdf](http://www.drtepp.com/pdf/substance_abuse.pdf)
- MAST <http://www.dorris.com/objects/MichiganAlcoholScreeningTest.pdf>
- SASSI - <https://www.sassi.com>
- 2009 article that reviews possible FAMs: [http://www.drugsandalcohol.ie/18266/1/NADA\\_A\\_Review\\_of\\_Screening\\_Assessment\\_and\\_Outcome\\_Measures\\_for\\_Drug\\_and\\_Alcohol\\_Settings.pdf](http://www.drugsandalcohol.ie/18266/1/NADA_A_Review_of_Screening_Assessment_and_Outcome_Measures_for_Drug_and_Alcohol_Settings.pdf)

Here is the portal at SAMHSA for screening measures as well: <http://www.integration.samhsa.gov/clinical-practice/screening-tools>

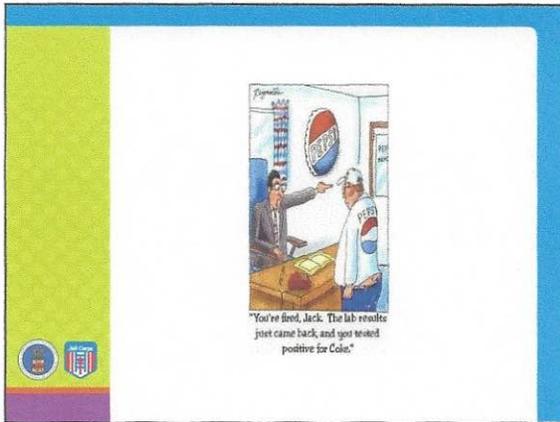
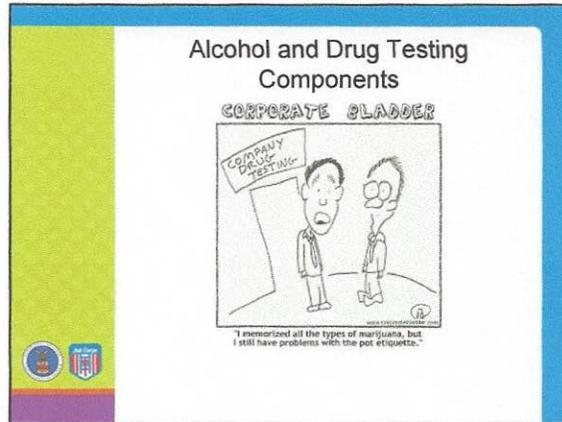
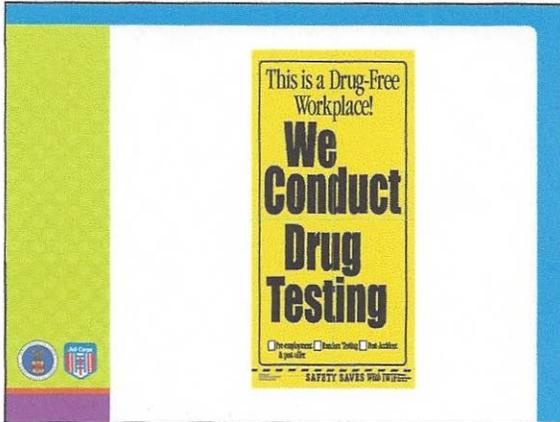


## Outcome of Assessment

If student is determined high-risk and substance use is likely to interfere with training, then consider:

- Voluntary TEAP services
- Brief Interventions (see SBIRT) using motivational interviewing
- Continuing to monitor informally
- MSWR (they do not have to agree)

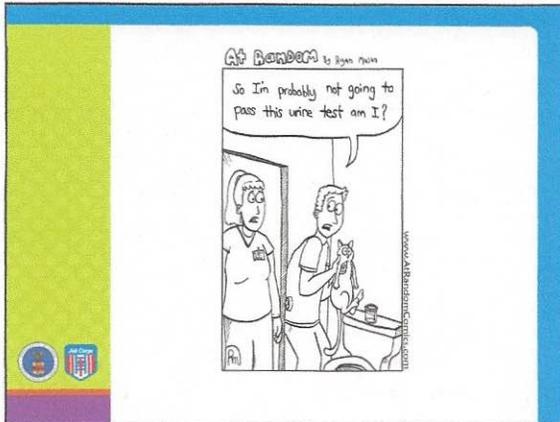




- ### Drug and Alcohol Testing
- Drug testing procedures – who gets tested:
    - New and readmitted students
    - Students who tested positive on entrance shall be retested between the 37th and 40th day after arrival on center
    - Students who are suspected of using drugs at any point after arrival on center (As of June 2016 is ZT termination)
  - Biochemical testing is never permissible on a random basis
  - If a student refuses to provide a specimen or has an unexcused absence from his or her follow-up drug test, referred to the center's behavior management system for appropriate disciplinary action
  - Students who state they are unable to produce a specimen shall be referred to the center physician or designee for follow up

- ### Update: Suspicion Screen Testing
- PRH Change Notice No. 15-09 issued on 02/04/2016:
- Changes for TEAP:
    - No suspicion intervention period
    - Now ANY student testing positive on suspicion at anytime will be a ZT termination
  - Need to educate staff/students about these change and the implications
  - Review new Exhibit 3-1

- ### Drug and Alcohol Testing Basics
- Collection of by **health and wellness staff** or a **staff member** trained in urine collection procedures
  - Follow Chain of Custody
  - Use the CDD (but not for testing outside of TEAP)
  - Reinstated students shall not be subject to entry drug testing upon return to the center
  - Transfer students shall not be subject to drug testing upon arrival at receiving center
  - Both reinstated and transfer students shall be subject to testing for drugs upon suspicion of use only



### Who Collects the Urine Drug Sample?

- PRH says: "Collection of urine for drug testing shall be in accord with chain- of-custody principles and conducted by health and wellness staff or a staff member trained in urine collection procedures."
- Why Wellness staff is recommended:
  - Trained health care providers
  - Understand Chain of Custody
  - No significant issues with waiting until Monday to test
- If other staff collects UDS then how maintain custody?

### Decrease the Likelihood of Adulteration

- Providing a private area for specimen collection
- Remove all cleaning products from the collection room area
- Perform visual and temperature checks. The sample temperature should fall between 90.5 F and 99 F.
- Visually should appear free of possible contaminants
- Turn off additional water sources in the immediate collection area, if possible
- Place a blue chemical in the toilet tank to color the water
- Have the student wash (with water only) hands and clean under nails and give student a paper towel for hand drying before he/she provides the requested sample

### More Basics for Supervised Collection

- Have the student remove outer garments (e.g., coats, sweaters, jackets)
- Prohibit bags, packages, or purses in the collection area
- Have the student provide the specimen while in an examination gown, if urine collection is part of a medical exam
- Have collection personnel stand close to the door and be aware of unusual sounds when conducting a routine **supervised collection**
- Make sure the student hands the specimen directly and immediately to collection personnel

### Supervised versus Observed

Observed **ONLY** recommended if concerns about adulteration

- This means same sex staff is watching the urine stream leave the body and enter the specimen container

### Drug Testing: Chain of Custody is Key to Integrity

- Definition: The course of action of documenting the management and storage of a specimen from the moment a donor gives the specimen to the collector to the final destination of the specimen and the review and reporting of the final result
- Supervise the collection process and ensure strict adherence to chain of custody principles
- Use a Chain of Custody form and process to insure the integrity of the specimen to be tested

### More about Chain of Custody

- Can there be medical explanation for a positive result?
  - Positive for opiates and student had a legitimate prescription
  - A student prescribed stimulants for ADHD
- Consulting with toxicology professionals, such as staff at the nationally contracted laboratory (CDD), if required
- Provide all students with results of all screens and document results in SHR (opportunity for further assessment and brief interventions)



### Chain of Custody and Ryan Braun



2012



### Ryan Braun Cleared because of Chain of Custody Issue

- Sample was not dropped off that day at FedEx because the collector thought it was too late and the shipping company was closed
- Sample kept refrigerated at his home for two days before making the shipment.
- Though the seals on the samples were unbroken lapse in protocol resulted in questioning the validity
- The MLB drug policy (think SOP) states "Absent unusual circumstances, the specimens should be sent by FedEx to the laboratory on the same day they are collected...If not immediately prepared for shipment, the collector shall ensure that it is appropriately safeguarded during temporary storage... must keep the chain of custody intact"
- MLB officials argued that despite the delay in shipping, the collector did keep the chain of custody intact and store the samples in the proper environment



### Alcohol Testing Procedures

- Students who are suspected of using alcohol at any point after arrival on center are **immediately** tested
- Device must measure alcohol in the breath or saliva (e.g., breathalyzers or alcohol test strips or swabs)
- Calibration – log
- Only administered by trained staff member (TEAP responsible for training)
- All testing documented and filed in SHR



### Update: Alcohol Testing Procedures

- As of June 2016 – all centers will have a 'three strikes and you are out' alcohol policy
- PRH Change Notice No. 15-09 emphasizes holding students accountable and having proportional consequences for infractions
  - There are changes that impact TEAP:
    - A third alcohol-use infraction (now called "Abuse of Alcohol") will result in a Level I ZT termination.
- Implications:
  - Educate students/staff
  - Intervene more quickly when students have alcohol-infractions
  - Assess more rapidly for substance use disorders and possible MSWR



### The Components of an Effective Suspicion Screen Process

- Observable signs
- Training the staff on the process – **ESSENTIAL**
- SOP for direction/guidance
- Clear and concise form
- FOLLOW YOUR PROCESS
- Assess and Intervene



**XXXX JOB CORPS CENTER**  
**TEAP REFERRAL FORM/SUSPICION/BREATHALYZER**

Student's Name: \_\_\_\_\_ Dorm: \_\_\_\_\_ Counselor: \_\_\_\_\_  
 Student ID#: \_\_\_\_\_ DOE: \_\_\_\_\_ DOB: \_\_\_\_\_  
 Date of Referral: \_\_\_\_\_ Referred by: \_\_\_\_\_

**◆TEAP REFERRAL BECAUSE:**  
 Engaged with Known Users  Talk of Relapsing  Student wants to self-refer to TEAP  
 With Others with Intent to Use  Thems to Use  Other: \_\_\_\_\_  
 Interrupted/Interrupted Attempt to Use  Seen in High Risk Places (such as winosod in a bar or liquor store)

**◆ REFERRAL FOR SUSPICION TESTING BECAUSE OF MULTIPLE AND NOTABLE SIGNS OF USE:**  
 Recent use of Alcohol/Drugs as Evidenced by (Check all that apply):

<input type="checkbox"/> Aggressive Behavior	<input type="checkbox"/> Slurred Speech	<input type="checkbox"/> Poor Coordination	<input type="checkbox"/> Slurring
<input type="checkbox"/> Drowsiness/nodding off repeatedly	<input type="checkbox"/> Non-responsive Sleep	<input type="checkbox"/> Odors of Substances	<input type="checkbox"/> Bloody Nose
<input type="checkbox"/> Changes in Personality	<input type="checkbox"/> Loss of Motivation	<input type="checkbox"/> Poor Performance	<input type="checkbox"/> Irritability
<input type="checkbox"/> Dry Mouth or Dehydration	<input type="checkbox"/> Poor Judgment	<input type="checkbox"/> Purses/Empheralia	<input type="checkbox"/> Dilated or Pinpoint Pupils
<input type="checkbox"/> Change in Behaviors/Inappropriate acts	<input type="checkbox"/> Rapid Mood Changes	<input type="checkbox"/> Bloodshot Eyes	<input type="checkbox"/> Excessive sweating
<input type="checkbox"/> Poor Thought Organization/Confusion		<input type="checkbox"/> Other:	

Incident Report Written?  Yes  No Incident Report Sent to TEAP?  Yes  No

 Note Inclusion of opiate related symptoms

**ALCOHOL TEST RESULTS (Attached printout from breathalyzer)**

READING 1	TIME	READING 2	TIME	READING 3	TIME

NAME OF STAFF PERFORMING TEST: \_\_\_\_\_ / \_\_\_\_\_  
 (Print Name) (Signature)

**TEAP USE ONLY**  
 Relevant Clinical Factors: \_\_\_\_\_  
 Recommendation for Testing: \_\_\_\_\_  
 Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**CENTER DIRECTOR/DESIGNEE USE ONLY**  
 DRUG TEST OR  TEAP PROGRAM  
 Explain Decision: \_\_\_\_\_

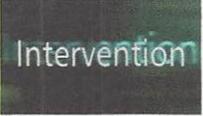
Center Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Final Disposition: \_\_\_\_\_  
 TEAP Specialist Signature: \_\_\_\_\_

### Notification of Drug and Alcohol Tests

- Drug and alcohol test results shall be shared only with center personnel who have a need to know for purposes of discipline, counseling, administration, and delivery of services (in accordance with 42 CFR, Part 2)
  - Students are informed by the TEAP specialist, center physician, or designee
  - Best practice is notify students of both positive and negative results (and document)
- The results of the retest drug test shall be provided to the student by the 45th day after enrollment
- Alcohol test results shall be provided to the student by the person administering the test
- If a student questions the validity of a confirmed positive drug test, he or she shall be referred to the center physician or designee for counseling



### Intervention Services









### Students Testing Positive on Entry

- New students and readmitted students get intervention services and are retested and must produce a negative test.
- A positive test means separated under ZT policy
- If an intervention period takes place during a center vacation period (i.e., winter break), the intervention period is suspended and resumes the day the student is scheduled to return to center
- Pay attention to CIS to determine how it was coded
- Readmitted students previously separated for drug use who test positive on entry or any time during their second enrollment at Job Corps are separated
- During the 45-day suspicion-intervention period, students in the driver's education program and student drivers who fall under DOT regulations are not permitted to drive



### Students Testing Positive (cont.)

- Students who test positive for drug use by an off-center facility are retested on center using CDD as soon as possible, to include:
  - Work-based learning students who tested positive on a drug test administered by experience sites, union trades, or potential employers;
  - Students who tested positive on a drug test administered at a referral health facility (e.g., hospital emergency department, urgent care facility).
- Student drivers who test positive under 49 CFR Part 391 DOT Federal Motor Carriers Safety Administration shall follow the same procedures outlined above for positive suspicion tests and cannot drive during this time
- Students who test positive for alcohol use on suspicion shall be referred to the TEAP specialist for assistance and the center's student conduct system for disciplinary action



### A Word (or two) about Counting

- Count begins the day they arrive at JC
- 2<sup>nd</sup> test results MUST be received so that student can be terminated from JC by 45 day (hence 37 to 40 day window)
- Count stops only winter break and MSWR
- Pay attention to CIS
- Check with PM in RO if have other counting questions



### Specifics of Intervention Services

- Individual and group intervention services with a focus on behaviors that represent employability barriers
- Collaboration with the CMHC for students with co-occurring conditions of mental health and substance use. Consider consolidating services
- Referral to off-center substance abuse professionals or agencies for ongoing treatment and/or specialized services (If separated provide referral to home community)



### 45-Day Intervention Period: But what does it really look like?

No mandated components

Remember goal = abstinence (and negative 45 day screen)

Components:

- Treatment Contract outlining program
- Individual/group meetings or check-ins
- Self-help introduction for relapse prevention
- Involvement of other Departments:
  - Recreation
  - Residential
  - Others?



### Relapse Prevention Program

- Relapse prevention services assist students in maintaining desired behavioral changes, reinforcing a drug-free lifestyle, and facilitating changes in personal habits and life choices
- The TEAP Specialist must provide relapse prevention services
- These services should be designed to help students develop new attitudes, skills, and behaviors
- Part of preventing relapse is assisting the student in developing a plan to recognize the warning signs aka "triggers"



### More on RP

- Help students understand the relapse process
- Identify and handle high-risk situations; for example, how to deal with first pass home or combat boredom
- Discuss ways to resist peer pressure on and off center (e.g., developing refusal skills)
- Discuss ways to handle cravings and the desire to use alcohol and/or other drugs
- Learn new ways to structure leisure time through recreation, leisure time activities, and other wellness activities
- Set goals and develop own recovery plan to use at Job Corps and when leave the program
- Understand the importance of being drug free and the impact substance use will have on their future goals and employability



### RP (cont.)

- CTP is important RP opportunity
- Assist students to prepare for entry into the workforce
- Provide information/strategies on dealing with substance use situations in the work world.
- Emphasize JC drug policy is modeled after work world



### RP Logistics

- Individual treatment plans to include RP
- Self-Help groups – on versus off center access
- Speakers at assemblies (like employers who hire)
- Ongoing RP groups
- CTP groups
- Emphasize (and document) in individual meetings
- Newsletters/electronic communication



### Applicant File Review




### When to Use Appendix 609 versus 610

<p><b>Direct Threat – Appendix 609</b></p> <ul style="list-style-type: none"> <li>• Rarely used when dealing with Substance Abuse/Dependency issues with applicants</li> </ul>	<p><b>Health Care Needs – Appendix 610</b></p> <ul style="list-style-type: none"> <li>• Commonly used when dealing with Substance Abuse/Dependency issues with applicant</li> </ul>
--	---



### Appendix 610 – Health Care Needs Assessment (HCNA)

Assessment conducted and signed by the TEAP when at all possible (If not the TEAP – then explain why)

The Health Care Needs Assessment should be completed if there is a concern that the center cannot meet the basic health care needs of the applicant.

- The applicant's health-care needs exceed those of basic care and cannot be met by the center
- The applicant's health-care needs are manageable at Job Corps as defined by basic health-care services in Exhibit 6-4, but require community supports and services which are not available near center



### Best Practice – Keep It Simple

- Do an interactive interview
- Gather the documents
- Get the updated forms from the website
- Call for consult before send in file



### CMHC Collaboration

- Meet regularly to talk about students co-occurring disorders
- Be mindful of MSWR
- Joint prevention-education activities
- Attend same meetings (counseling)



### TUPP

- Centers must implement a program to prevent the onset of tobacco use and to promote tobacco-free environments and individuals
- TUPP Coordinator may or may not be TEAP Specialist
- Centers must establish a smoke-free, tobacco-free environment for the majority of the center
- Centers are encouraged to maintain an entirely tobacco-free environment, especially during the training day




### MSWR for Substance Use Conditions

- Students may be given a MSWR for a diagnosed substance use condition, allowing the student to return to Job Corps to complete his or her training within 180 days
- To return to Job Corps, proof of treatment completion from a qualified provider must be received
- A MSWR for substance use conditions can only be given if the following conditions are met:
  - The TEAP specialist and center director agree
  - There is a documented assessment of the student's diagnosed substance use condition by the TEAP specialist in collaboration with the center mental health consultant.
- A MSWR cannot be granted in lieu of ZT separation when a positive 45-day intervention period follow-up test is reported
- If a student is placed on a MSWR during the 45-day intervention period, the intervention period is suspended and resumes the day the student is scheduled to return to the center



### TUPP PRH Requirement

- All buildings and center-operated vehicles must be tobacco-free
- Tobacco products must not be sold on center
- If center operators choose to allow smoking and use of tobacco products, they must designate specific areas for tobacco use. It is required that these areas be at least 25 feet, or as required by state law, away from all building entrances
- Minor students' access to tobacco products should be restricted as required by state law
- Minors who use tobacco products shall be referred to the TUPP
- All services provided should be documented in the SHR



### TUPP Tips

- Case management for tobacco cessation should be offered to all students who use tobacco products
- Designated smoking areas should be located away from central locations thereby discouraging non-smokers from congregating with smokers, and have proper receptacles
- Staff should not smoke in the presence of students
- Use EBP for tobacco cessation groups (Not on Tobacco)
- Have separate groups for minors and those wanting cease tobacco use
- Have policy for tobacco products like e-cigarettes
- CCMP for Tobacco Use
- TUPP resources at: <https://supportservices.jobcorps.gov/health/Pages/Tobacco.aspx>



### NPR and Minors

- Research clear minors are not good candidates for tobacco cessation products typically
- But here are empirically-based guidelines if using:
  - Students on NRT should participate in the TUPP on center
  - Students who desire to use NRT should be smoking more than 10 cigarettes per day (a half pack per day)
  - Should be willing to set quit date and use NRT for support of cessation
  - Should be followed weekly in the HWC to check-in with the staff and receive their one week supply of NRT



### Why can't it be just this simple?




### Relevant History

- Early 1970's Congress believed stigma associated with Substance Abuse would deter people from seeking treatment
- Resulted in 42 CFR Part 2
- Guaranteed strict confidentiality of information for those receiving Alcohol and Drug Prevention and Treatment Services
- Intent: Equalize playing field
- Insure Alcohol and Drug abuse patients were NOT made more vulnerable because of the existence of treatment records than individuals who had A & D problems but had not sought treatment



### And then in 1996 came....

HEALTH INSURANCE PORTABILITY  
and ACCOUNTABILITY ACT

# HIPAA

ADMINISTRATIVE SIMPLIFICATION;  
PRIVACY, SECURITY, TRANSACTIONS



### Standards for Privacy of Identifiable Health Information: Final Rule 2000

Substance Abuse programs that are subject to HIPAA must comply with the privacy rule as well. Job Corps is such a program

( See 42 CFR 2.11 Program definition: An individual or entity (other than a general medical care facility) who holds itself out as providing and provides, alcohol or drug abuse diagnosis, treatment or referral for treatment)

The general rules established by Part 2 and the Privacy Rule regarding uses and disclosures of patient health information are very different. Substance abuse treatment programs must comply with both rules.



### 42 CFR Part 2

- Anyone really read it?
- What in the 26 pages is relevant to Job Corps?
- Any information "which could reasonably be used to identify an individual and requires disclosure be limited to the information necessary to carry out the purpose of the disclosure"



### What are Allowable Disclosures Based on 42 CFR part 2?

- Written authorization/Consent (minors need to sign as well as guardian) "know state law
- Internal communications
- Communication without patient identifying information (TB patient in hospital)
- Medical Emergency
  - Only to medical personnel and limited to necessary to address emergency
  - MUST account for disclosure (to whom; affiliation; by whom; time/date; nature of emergency)



### There are implications of HIPAA/42 CFR violations



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### Internal Program Communication

- Limited to: Need for Information in connection with their duties that arise out of the provision of diagnosis, treatment or referral for treatment (42 CFR 2.12 c 3)
- May be acceptable as long as:
  - Within program
  - Between program and entity with direct administrative control over program



### HOWEVER....

- HIPAA requires you establish written policies to comply with minimum necessary requirement of Privacy Rule
- 42 CFR 2.16 requires written procedures to regulate access to records
- SO...
- Have written policies about when, how and what is disclosed to others, both within and outside of Job Corps



### So Which Staff 'Need to Know'?

- Excellent question
- May be culture on center which dates back to earlier 'versions' of TEAP – do they need to be revisited?
- What is your center's culture about confidentiality?
  - For instance: Used to be Center Director was given nanogram level to make decision about whether an additional 15 days would be allowed to test for a third time



### Need to Know

- Basic considerations to ask before share information:
  - What is our mission? (Employability)
  - What is the expected outcome of having this information?
  - How does having this information meet goal/help student?

What need to know to work with student?



### Getting Creative

- Identify information from Wellness and not from TEAP
- Make Statements such as "Student in jeopardy of not fulfilling 45 day obligation"
- 45 day projection status
- Under what circumstances would you share what drug the student tested positive for?
- Have authorization signed by student who has failed 2<sup>nd</sup> screen notifying them that results are made available to others (CSIO, RO)



### Memo to CSIO

This student entered the program on \_\_\_\_\_ and tested positive for drug use. They were referred to TEAP and provided with intervention services to assist him/her with remaining substance-free after entrance.

The required retest was collected on \_\_\_\_\_. The proper chain of custody was maintained and the collected specimen was sent to the CDD laboratory.

The results of this test were positive for drug use. To comply with PRH requirements, this student should be separated from the program as a Zero Tolerance separation (code #: 5.2a).

Information about remaining drug-free to obtain/maintain employment was again provided to the student with a referral



### Documentation in SHR

- Note in chronological then TEAP section
- SHR should 'tell a story' about that student
- Content of interaction and response of student
- Document the process (especially when unusual)
- No need for a 'therapy note'
- Use labels or stamps
- Keep all group notes on one sheet
- Other Shortcuts?




### Possible Forms

- Negative Results – Congratulation letter
- Positive results and consequences
- Intervention contract
- Helpful hints to "getting clean"



### Congratulation Letter

Congratulations! The Wellness Team wants to congratulate you on your recent negative drug screen results.

Upon entry to Job Corps you provided a urine sample that was tested for drugs and your results were negative.

This letter also serves as a reminder to make remain drug-free. You may also choose to participate optional TEAP services or relapse prevention programming.

To participate in services please see me.

\_\_\_\_\_  
TEAP Specialist  
Student acknowledge receipt of letter Date \_\_\_\_\_



### Positive Result Letter

Upon entry to \_\_\_\_\_ Job Corps you were asked to provide us with a urine sample to screen for possible substances of abuse. At that time you were informed of our "Chain of Custody" and asked to complete an accompanying consent form. The results are in and the toxicology report returned a positive result for your screen.

Even though you have returned a positive result upon entrance. The Wellness Team is here to assist you. You will be placed in the TEAP program and attend weekly group and individual meetings regarding substance abuse and employability, substance use education, and relapse prevention skills.



### Continued

You will be provided with a water bottle to help eliminate the drugs from your system, you will perform 18 hours of recreation activity and be placed on a TEAP restriction with the ultimate goal of a negative screen at the end of the 45 day probationary period as outlined in the TEAP contract.

You may also choose to participate in educational drug and alcohol groups and optional drug and alcohol support groups offered through the TEAP program at any time. Self-referral sheets are located in the wellness center waiting room. Please do not hesitate to contact us regarding any concern about health and substance related issues.

You may also request a referral with the Center Mental Health Counselor (CMHC) at any time.



### Intervention Contract

I have been informed that I tested positive for \_\_\_\_\_ on entrance to Job Corps.

I understand that I will be retested prior to the end of the 45-day probationary period. I acknowledge that it is my responsibility to be present for the re-test when it is scheduled. I understand that I will be terminated from Job Corps if I am not drug-free as evidenced by a negative result on the re-test.

I understand I am required to participate in the intervention services as listed below. Students who test positive for drugs upon entry are mandated to the following:

- 18 hours of recreational activities.
- Be restricted to center until second drug screen.
- Meet with TEAP specialist for xxx groups and xxx individual sessions. Skipped sessions will be reported to CSIO.
- Not operate an automobile in the driver's education program until after the second drug screen.
- Attend two self-help meetings



### Intervention Contract (cont.)

I understand that once this basic intervention plan is completed, I may continually participate in all TEAP activities, and are encouraged to follow-up with individual sessions with the TEAP Specialist.

I agree and understand that Job Corps does not offer substance abuse treatment and I am eligible for Medical Separation With Reinstatement Rights (MSWR), should my drug/alcohol/tobacco issues be beyond the scope of TEAP intervention strategies/services.



### Quarterly Alcohol Reports

Instructions:

- To fill out the quarterly Alcohol Report use online Alcohol Report System accessed through Citrix, on the JC Community Website under the Health and Wellness tab
- After you are on the Health and Wellness page click the "Online Data" tab on the left hand side
- Then choose the "Alcohol Report Survey" for the quarter you wish to submit the report for

Due by 10<sup>th</sup> after quarter closes (July – September; October – December; January – March; April – June)



### PCA: Brief Info

- Follow the PRH
- Attend the monthly calls
- Complete the pre-ROCA tool
- Talk about your strengths
- Track your data (re: drug testing data)
- The 2<sup>nd</sup> positive percentage is a barometer of quality
- Know the PY2014/15 data for your center
- Ask questions and use the time for technical assistance



**National Entry Positive is 27%**  
**National 45-Day Positive is 18%**

Job Corps Trainee Employee Assistance Program (TEAP) Report  
Program Year 2014

Region/Center	Entry Drug Tests	Entry Drug % Pos	45 Day Tests	45 Day % Pos	Sevgi Drug Tests	Sevgi Drug % Pos	Sevgi Alcohol Tests	Sevgi Alcohol % Pos
<b>Region 1 – Boston</b>								
ARIZONA	318	17.0%	23	17.0%	13	19.2%	8	0.0%
ARKANSAS	318	14.1%	37	18.9%	44	41.5%	5	100.0%
ARIZONA	201	15.4%	30	14.9%	5	40.0%	5	0.0%
CALIFORNIA	375	32.8%	107	28.6%	71	28.7%	21	72.7%
DELAWARE	499	41.7%	122	24.5%	12	28.6%	8	50.0%
FLORIDA	438	24.2%	96	22.0%	11	40.9%	29	50.0%
GEORGIA	222	25.2%	30	13.5%	12	45.7%	7	21.4%
ILLINOIS	385	11.7%	101	26.3%	17	17.6%	38	87.1%
INDIANA	300	29.3%	65	21.7%	18	20.0%	21	87.1%
IOWA	262	13.0%	89	17.2%	24	41.7%	20	44.4%
KANSAS	443	17.2%	152	34.3%	10	40.0%	0	0.0%
LOUISIANA	381	15.2%	107	28.1%	2	100.0%	22	24.3%
MAINE	389	19.8%	66	17.0%	25	34.6%	2	100.0%
MARYLAND	391	27.1%	89	22.8%	29	33.2%	23	69.7%
MICHIGAN	416	14.1%	135	32.5%	12	45.8%	22	66.7%
MINNESOTA	348	18.7%	85	24.4%	10	10.0%	10	20.0%
MISSISSIPPI	379	14.2%	46	12.1%	17	41.2%	0	0.0%
MISSOURI	408	27.0%	75	18.4%	17	47.1%	14	77.4%
NORTH CAROLINA	291	23.4%	57	19.6%	2	0.0%	21	52.4%
NORTH DAKOTA	159	16.4%	107	67.3%	40	41.0%	10	20.0%
NATIONAL TOTAL	6,481	28.0%	1,786	27.6%	445	32.8%	400	73.0%



### TEAP Best Practices

- Peer Mentoring
- Full-time Employee or at least full-time visibility on center
- Relapse Prevention Groups
- Separate mandatory versus Voluntary TUPP groups
- Ways to Keep TEAP visible
- Strong Community Partners
- Strong Center Alliances
- Strong Management Alliances



**To End the Presentation...**

# HUMOR




Does TEAP Feel Like This?

**Good Morning  
Let the  
Stress  
Begin...**



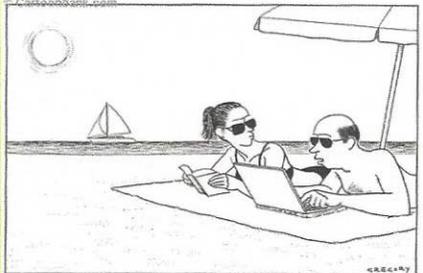

© Cartoonbank.com

I've called this meeting to discuss the problem of stress in the workplace!



STRESS

© Cartoonbank.com



GREGORY

*"I am not a workaholic. I just work to relax."*



Laughter is an instant vacation.

Humor

— Milton Berle



What are humor skills?

- Ability to see the absurdity in difficult situations
- Ability to take yourself lightly while taking work seriously
- A sense of joy in being alive



© Cartoonbank.com



ASCH

*"Do me a favor, honey, and go get me a latte?"*



Humor Applied... Think about Ducks



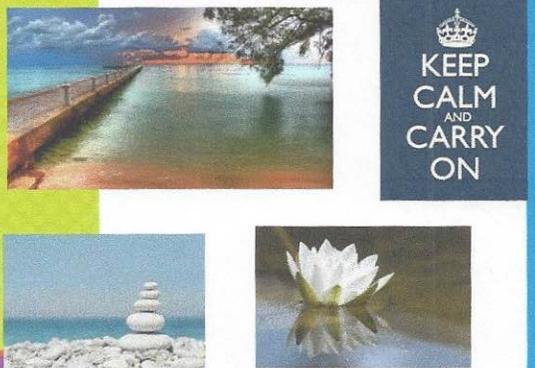

### What is "Duck-like"?:

- "Water off a duck's back"
- How do you NOT absorb what you experience (hear, feel, and see) everyday?
- Do Not think Sponge



### Humor and Coping

Be careful what you choose as your visual coping reminder!!



# TEAP/TUPP COMPONENTS

## PREVENTION/EDUCATION

- Being visible
- Center wide activities
- CPP/CDP/CTP
- Coordination with other staff
- TUPP activities for all students

## ASSESSMENT

- AFR
- SIF
- Formalized Assessment Measures
- MSWR

## RELAPSE PREVENTION

- Self-help groups (on/off center)
- Groups with RP focus
- Individualized RP planning
- RP interwoven

## OVERCOMING BARRIERS

- Drug testing program
- Intervention services
- Alcohol testing and intervention services
- TUPP intervention services

## DOCUMENTATION

- Clinical notes (content and participation) for TEAP and TUPP
- HCG's/SMG's

## TRAINING

- On suspicion screening (drugs and alcohol)
- Community partners for training

# Temporarily without a TEAP Specialist?

Recent PRH changes altered the staffing and delivery of TEAP services on center. As centers transition to the new requirements, some center may temporarily be without the services of a Specialist. Highlighted below are some suggested strategies to meet PRH requirements if your center is without a permanent TEAP Specialist. Note that these are suggestions to *temporarily* cover the responsibilities of a TEAP Specialist. Centers should actively recruit to fill this and all vacant positions. Duties that are temporarily assigned to the CMHC or health and wellness (HW) should not detract from the primary roles of these positions.

## Quick tips:

- Make sure other HW staff review and understand new TEAP requirements — PRH 6.11, R1: TEAP.
- Reach out and talk with other centers and your Nurse Health Specialists, Shannon Bentley and Melissa Cusey, and the TEAP Health Specialists, Diane Tennes and Christy Hicks.
- Document all services provided in the student health record.
- Ensure staff are trained to identify suspicious behaviors and appropriately refer students to HW.

Requirement	Suggestion(s)
Provide a 1-hour presentation on substance use prevention for all new students during CPP.	Ask the CMHC to present the TEAP materials during the mental health CPP presentation. An outline for this presentation is available on the Job Corps Health and Wellness website ( <a href="http://icweb.jobcorps.org/Health/Pages/Webinars.aspx">http://icweb.jobcorps.org/Health/Pages/Webinars.aspx</a> ) under the Reinventing TEAP: Guidance for TEAP Programmatic Changes webinar.
Provide at least three annual center-wide substance use prevention and education activities.	<ul style="list-style-type: none"> <li>• Enlist community resources to provide a brief presentation at a center-wide assembly.</li> <li>• Have HW staff provide substance use prevention materials during the student lunch hour or plan a substance use prevention and education event.</li> </ul>
Review Social Intake Form (SIF) or intake assessment of all students performed by counseling staff within 1 week of arrival.	Have the CMHC review the TEAP portion of the SIF when they are reviewing the mental health section. There is a high co-morbidity between substance use and mental health issues so a large portion of high-risk students may have both issues.
Provide drug testing.	HW nurses can collect the entry, 45-day, and suspicion tests adhering to the chain of custody principles outlined in the center/standard operating procedure.
Provide intervention services to students who test positive.	<ul style="list-style-type: none"> <li>• Meet with students to identify strategies that will help them achieve a drug-free lifestyle, including increasing exercise, connecting with drug-free peers, staying out of tempting situations, improving eating habits, and increasing fluid consumption.</li> <li>• Have students sign an intervention contract that delineates agreed upon strategies and consequences for testing positive on the re-test.</li> <li>• Provide a 30-60 minute weekly group intervention meeting where education and support are provided (career counselors or CMHC may be able to provide assistance). If the CMHC has graduate students, consider allowing them to provide the group under the CMHC's supervision.</li> <li>• Have students identify staff members to talk with for support.</li> <li>• Consider developing a policy where students are restricted to center during this intervention period. This appears to be one of the most effective strategies to support students' abstinence from drug use.</li> </ul>
Retest students who test positive between the 37 <sup>th</sup> and 40 <sup>th</sup> day after arrival on center.	Assign a staff member to track students who test positive on entry so that retesting can occur between 37 and 40 days. It is critical the second test is received on center before the 45 <sup>th</sup> day.
Provide medical separations/MSWRs, as appropriate.	The CMHC can facilitate this process.



**Xxxx JOB CORPS CENTER  
TEAP REFERRAL FORM/SUSPICION/BREATHALYZER**

<b>Student's Name:</b>		<b>Dorm:</b>		<b>Counselor:</b>	
<b>Student ID#:</b>		<b>DOE:</b>		<b>DOB:</b>	
<b>Date of Referral:</b>			<b>Referred by:</b>		

**◆ TEAP REFERRAL BECAUSE:**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Engaged with Known Users               | <input type="checkbox"/> Talk of Relapsing   | <input type="checkbox"/> Student wants to self-refer to TEAP |
| <input type="checkbox"/> With Others with Intent to Use         | <input type="checkbox"/> Threats to Use  | <input type="checkbox"/> Other:                              |
| <input type="checkbox"/> Intercepted/interrupted Attempt to Use | <input type="checkbox"/> Seen in High Risk Places (such as witnessed in a bar or liquor store) |  |

**◆ REFERRAL FOR SUSPICION TESTING BECAUSE OF MULTIPLE AND NOTABLE SIGNS OF USE:**

**Recent use of Alcohol/Drugs as Evidenced by (Check all that apply):**

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> Aggressive Behavior                    | <input type="checkbox"/> Slurred Speech       | <input type="checkbox"/> Poor Coordination     | <input type="checkbox"/> Staggering                 |
| <input type="checkbox"/> Drowsiness/nodding off repeatedly      | <input type="checkbox"/> Non-responsive Sleep | <input type="checkbox"/> Odors of Substances   | <input type="checkbox"/> Bloody Nose                |
| <input type="checkbox"/> Changes in Personality                 | <input type="checkbox"/> Loss of Motivation   | <input type="checkbox"/> Poor Performance      | <input type="checkbox"/> Irritability               |
| <input type="checkbox"/> Dry Mouth or Dehydration               | <input type="checkbox"/> Poor Judgment        | <input type="checkbox"/> Possess Paraphernalia | <input type="checkbox"/> Dilated or Pinpoint Pupils |
| <input type="checkbox"/> Change in Behaviors/Inappropriate acts | <input type="checkbox"/> Rapid Mood Changes   | <input type="checkbox"/> Bloodshot Eyes        | <input type="checkbox"/> Excessive scratching       |
| <input type="checkbox"/> Poor Thought Organization/Confusion    | <input type="checkbox"/>                      | <input type="checkbox"/>                       | <input type="checkbox"/> Other:                     |

**Incident Report Written?**  Yes  No    **Incident Report Sent to TEAP?**  Yes  No

**ALCOHOL TEST RESULTS (Attached printout from breathalyzer)**

READING 1	TIME	READING 2	TIME	READING 3	TIME

NAME OF STAFF PERFORMING TEST: \_\_\_\_\_ / \_\_\_\_\_  
(Print Name) (Signature)

**TEAP USE ONLY**

Relevant Clinical Factors: \_\_\_\_\_  
Recommendation for Testing: \_\_\_\_\_

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**CENTER DIRECTOR/DESIGNEE USE ONLY**

DRUG TEST OR  TEAP PROGRAM

Explain Decision: \_\_\_\_\_

Center Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Final Disposition: \_\_\_\_\_

TEAP Specialist Signature: \_\_\_\_\_

**SEND TO WELLNESS FOR INCLUSION IN SHR**

# Basic TEAP Intervention Contract

Name \_\_\_\_\_ Date \_\_\_\_\_

DOB \_\_\_\_\_

I have been informed that I tested positive for \_\_\_\_\_ on entrance to Job Corps.

I understand that I will be retested prior to the end of the 45-day probationary period. I acknowledge that it is my responsibility to be present for the re-test when it is scheduled. I understand that I will be terminated from Job Corps if I am not drug-free as evidenced by a negative result on the re-test.

I understand I am required to participate in the intervention services as listed below. Students who test positive for drugs upon entry are mandated to the following:

- 18 hours of recreational activities.
- Be restricted to center until your second drug screen.
- Meet with TEAP specialist for xxx groups and xxx individual sessions. Skipped sessions will be reported to CSIO.
- Not operate an automobile in the driver's education program until after the second drug screen.
- Attend two self-help meetings

I understand that once this basic intervention plan is completed, you may continually participate in all TEAP activities, and are encouraged to follow-up with individual sessions with the TEAP Specialist.

I agree and understand that Job Corps does not offer substance abuse treatment and you are eligible for Medical Separation With Reinstatement Rights (MSWR), should your drug/alcohol/tobacco issues be beyond the scope of TEAP intervention strategies/services.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

TEAP Signature \_\_\_\_\_ Date \_\_\_\_\_



\_\_\_\_\_ Job Corps Center

Dear

The Wellness Team here at \_\_\_\_\_ Job Corps would like to inform you on your recent drug screen results.

Upon entry to \_\_\_\_\_ Job Corps you were asked to provide us with a urine sample to screen for possible substances of abuse. At that time you were informed of our "Chain of Custody" and asked to complete an accompanying consent form. The results are in and the toxicology report returned a positive result for your screen.

Even though you have returned a positive result upon entrance. The Wellness Team is here to assist you. You will be placed in the TEAP program and attend weekly group and individual meetings regarding substance abuse and employability, substance use education, and relapse prevention skills. You will be provided with a water bottle to help eliminate the drugs from your system, you will perform 18 hours of recreation activity and be placed on a TEAP restriction with the ultimate goal of a negative screen at the end of the 45 day probationary period as outlined in the TEAP contract.

You may also choose to participate in educational drug and alcohol groups and optional drug and alcohol support groups offered through the TEAP program at any time. Self-referral sheets are located in the wellness center waiting room. Please do not hesitate to contact us regarding any concern about health and substance related issues.

You may also request a referral with the Center Mental Health Counselor (CMHC) at any time.

\_\_\_\_\_

TEAP Specialist

Student acknowledgement of receipt

Date

\_\_\_\_\_

\_\_\_\_\_

MEMO

To: Center Standard Officer  
From: Wellness Manager/TEAP specialist  
Subject: Required 5.2a Zero tolerance separation  
Date:

Student:  
ID #:

This student entered the program on \_\_\_\_\_ and tested positive for drug use. They were referred to TEAP and provided with intervention services to assist him/her with remaining substance-free after entrance.

The required retest was collected on \_\_\_\_\_. The proper chain of custody was maintained and the collected specimen was sent to the CDD laboratory.

The results of this test were positive for drug use. To comply with PRH requirements, this student should be separated from the program as a Zero Tolerance separation (code #: 5.2a).

Information about the importance of remaining drug-free to obtain/maintain employment was again provided to the student with a referral for a resource in their home community for further assistance.

Please let me know if you have further questions.

# CERTIFICATE OF TRAINING

*This Certifies that*

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*Has successfully completed the training  
program requirement for the Boston Regional TRAP Training (8 hours)*

*August 18, 2016*

DATE

  
DIANE A. TENNIES, PHD, LADC