Job Corps Health and Wellness Program

DESK REFERENCE GUIDE

Center Mental Health Consultant
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Introduction

This Desk Reference Guide (DRG) summarizes your responsibilities as a Job Corps Center Mental Health Consultant (CMHC). Use this guide in conjunction with the Policy and Requirements Handbook (PRH), Job Corps directives, and other valuable information found on the Job Corps Health and Wellness website.

All forms and documents referenced in this DRG can be found on the Job Corps Health and Wellness website located here: https://supportservices.jobcorps.gov/Health/Pages/default.aspx.

If you are new to Job Corps or just new to the job as CMHC, here are a few tips to get you oriented to your new position:

- Contact the Mental Health Specialist in your region to introduce yourself and receive an orientation to your new position. Your Mental Health Specialist serves as a technical expert for the Regional Office and the centers in your region—contact your Mental Health Specialist to answer your questions, clarify Job Corps policies, and provide you with up-to-date information that will assist you in meeting program requirements.

- Review your center’s operating procedures (COPs) for the Health and Wellness Program, with special attention to the COPs for the Mental Health and Wellness Program (MHWP). These procedures define how your program will operate on a day-to-day basis, describe staff roles and responsibilities, and provide guidance on center-specific documentation, reporting, and communication protocols.

- Locate and familiarize yourself with the PRH (with special attention to sections 6.10 through 6.12), health and wellness Technical Assistance Guides (TAGs), and health-related Job Corps directives (i.e., Information Notices, PRH Change Notices, and Program Instructions).

- Visit the Job Corps Health and Wellness website to review the latest information about the Job Corps Health and Wellness Program, including updates to this guide.

A list of Job Corps TAGs is located here: https://supportservices.jobcorps.gov/health/Pages/Documents.aspx.

Policies and procedures for center Health and Wellness Programs are defined and clarified in several documents:

- **Code of Federal Regulations (CFR), Section 670.525**—The CFR states the operating requirements for Job Corps. The promotion and maintenance of student health and wellness is a desirable goal as well as a requirement under the CFR: “A Job Corps center operator must provide medical services, through provision and coordination of a wellness program which includes access to basic medical, dental, and mental health services for all...
students, from their date of enrollment until separation from the program.”

- **Policy and Requirements Handbook (PRH)**—The PRH expands the CFR by establishing operating policy requirements for Job Corps centers. There are six PRH chapters. Chapter 6, sections 6.10 through 6.12, defines the required parameters and services of center health and wellness programs.

- **Technical Assistance Guides (TAGs)**—TAGs contain guidelines and assistance for implementing the policies and requirements set forth in the PRH. As new requirements are added to the PRH, TAGs are updated or new TAGs are developed to assist in implementing policy.

The Job Corps directive and field communication system is used to update the PRH and to disseminate information throughout Job Corps. Three types of directives are issued:

- **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., psychotropic medication survey).

- **Information Notices**—Provide one-time announcements with information that is of interest to centers (e.g., data summaries, violence prevention recommendations).

Following an overview of Job Corps, this guide’s format will provide CMHCs with MHWP requirements and responsibilities, and then follow PRH Chapter 6, 6.10 through 6.12, as well as address other relevant sections of the PRH.
Job Corps Overview

Job Corps is the nation’s largest residential educational and career technical training program for economically challenged young adults aged 16 to 24 (there is no upper age limit for individuals with disabilities who are otherwise eligible). Funded by Congress and administered by the U.S. Department of Labor (DOL), Job Corps has been training young adults since 1964. Students are offered such services as basic education, occupational exploration, career technical training, work-based learning, social and employability skills training, health care, counseling, recreation, and post-program placement support.

The mission of Job Corps is to:

1. Provide students . . .
   - Career and technical training programs that are rigorous and relevant
   - Competencies recognized for employment and advancement in high-growth industries
   - Preparation for multiple jobs in a career path for life
   - Support services to optimize success

2. Provide employers . . .
   - A ready pool of qualified employees
   - Employees with industry-based skill standards and certifications
   - Opportunities to customize training programs with their employment needs

3. Provide communities . . .
   - Partnership opportunities in all phases of the Job Corps operation
   - Partnerships with education and local and regional workforce investment systems
   - A solid business base for those communities in which Job Corps resides
   - A viable resource for community service

4. Provide society . . .
   - Workers and citizens who will contribute to the Nation’s economic growth and success

Organization of Job Corps

Job Corps is a national program administered by DOL through the National Office of Job Corps and six Regional Offices. The National Office of Job Corps establishes policy and requirements and facilitates major program initiatives. Job Corps’ Regional Offices administer contracts and perform oversight activities.

There are currently over 125 operational Job Corps centers throughout the United States and Puerto Rico. Each center is part of a region. The six regions include: Atlanta, Boston, Chicago, Dallas, Philadelphia, and San Francisco. Each region has approximately 20 centers within its jurisdiction.
If your center is managed by a company that won the bid for a contract to operate the center, it is referred to as a contract center. If your center is operated by the USDA Forest Service, you are working at a civilian conservation center (CCC). Both contract centers and CCCs work toward the same goals and objectives.

Each Regional Office has Program Managers (PMs) who work closely with the centers. Your PM is the DOL representative and liaison who works with your center to ensure that you have the resources you need to do your job and that you are working successfully to meet the established program outcomes.

**Career Development Services System**

The Job Corps Career Development Services System (CDSS) is a comprehensive and integrated career management system for equipping all Job Corps students with the skills, competencies, knowledge, training, and transitional support required to facilitate entry into and sustain participation in a competitive labor market, the military or advanced education or training. The four CDSS periods within which health and wellness services and activities are conducted include:

- **Outreach and Admissions (OA) Period**—OA staff members administer a health questionnaire, request immunizations records, explain to applicants the kinds of health and wellness services available at their center, and review requests for accommodations during the admissions process.

- **Career Preparation Period (CPP)**—The CPP ensures that students are introduced to health and wellness services and are provided accommodations, if needed, to fully participate in program offerings.

- **Career Development Period (CDP)**—The CDP ensures that career management teams coordinate with health services on health-related issues, and students perceive good health as being critical to achieving career goals.

- **Career Transition Period (CTP)**—The CTP ensures that students understand health-related aspects of independent living, students with special needs have systems in place to support transition to and retention of employment, and post-center service providers know how to coordinate with Job Corps when needed to help graduates succeed.

**National Health and Wellness and Disability Programs**

The National Office, Health Support Contractor, and Accommodation Support Contractor guide the operation of center Health and Wellness and Disability Programs as follows:

- **The National Office**—The Job Corps health and disability components are led by the National Health and Wellness Manager who is responsible for developing and implementing the policies and procedures that guide the delivery of health care and reasonable accommodation on center.

- **The Health Support and Accommodation Support Contractor**—The Health Support and Accommodation Support Contractor works with the National Office, all Regional Offices, and
all centers to develop and enhance center health and wellness and disability services. For example, the contractor assists the National Office in developing policy, training center staff on new health and wellness and disability initiatives, developing resource materials, collecting and analyzing health and disability program data, pilot testing new health and wellness and disability initiatives, and managing a national network of subject-area experts. Functioning under the auspices of the Health Support and Accommodation Support Contractor, a team of Health/Disability staff is assigned to each Regional Office. Every Regional Office has a Nurse Specialist, Medical Specialist, Mental Health Specialist, Oral Health Specialist, TEAP Specialist, and Regional Disability Coordinator. Health and Disability staff provide technical assistance to center Health and Wellness/Disability staff members and conduct center assessments for quality and compliance with the PRH.

**Center Health and Wellness Team**

The Health and Wellness Manager (HWM) is the administrative team leader for the Health and Wellness Program. All centers have the following staff as part of their Health and Wellness team:

- **Medical**: Center Physician, HWM, nurses, clerical staff
- **Mental Health**: Center Mental Health Consultant (CMHC)
- **Oral Health**: Center Dentist, Dental Assistant, Dental Hygienist
- **Trainee Employee Assistance Program**: TEAP Specialist
- **Disability**: Disability Coordinator (DC)

The Center Physician, CMHC, TEAP Specialist, and oral health positions are usually filled by independent subcontractors rather than by center employees. Required staffing levels have been established for each position based on the center’s contracted student enrollment capacity and are included in PRH Chapter 6: Exhibit 6-5.

The Center Physician’s role is that of a Medical Director for the Health and Wellness Center (HWC) and medical care provider. The HWM manages daily operations, while the Center Physician guides the Health and Wellness Program and assumes responsibility for the quality of care rendered. The Center Dentist, CMHC, and TEAP Specialist do likewise for their respective areas. Center nurses play a vital role in implementing the Health and Wellness Program and are often given primary responsibility for particular tasks, such as the Family Planning Program or Healthy Eating and Active Lifestyles (HEALs) Program.

The Center Director (CD) has the final administrative decision making authority on all matters concerning students and staff.

**Center Assessments**

Regional Office assessments are much like the accreditation reviews that occur at health facilities nationwide. Every 1 to 2 years, Health Support and Accommodation Support Contractor personnel visit each center as part of a Regional Office Center Assessment (ROCA) team. You can expect to have student health records (SHRs), appointment books and other records audited during this assessment. When the ROCA is announced, an assessor will contact the HWM to set up an interview appointment with various members of the Health and Wellness Center staff. In preparation for the MHWP assessment, you will also be requested to
complete the CMHC Pre-ROCA Questionnaire that can be downloaded from the Job Corps Health and Wellness website.

This team uses the Job Corps Program Assessment Guide (PAG) and Health and Wellness ROCA tools to conduct an overall assessment of your center's Health and Wellness Program. The PAG is located on the Job Corps Community website. The PAG and ROCA tools are designed to highlight the strengths of your program and identify any program components and aspects that are out of compliance with the PRH. The ROCA team will make recommendations to correct the noncompliant areas. After the ROCA report is released, the center administration will develop and submit corrective action plans to the National and Regional Offices. You may be consulted to assist with formulating corrective action plans as necessary.

The CMHC Pre-ROCA Questionnaire and ROCA Tools are located here: https://supportservices.jobcorps.gov/health/Pages/Documents.aspx.

ROCAs provide an opportunity for you to highlight the strengths of the MHWP and for Regional Office staff to provide feedback about areas that could be changed or improved. As with each section of the PRH, the MHWP is rated from 0-9 for the requirements listed in PRH-Chapter 6.10 (R3). In addition to the compliance rating, the assessors give a quality rating 0-9 collectively for all the programs in PRH 6.10-6.12 and for each of the quality indicators in PRH 6.10-6.12.

The table below describes ratings as outlined in the PAG:

<table>
<thead>
<tr>
<th>Compliance/Quality Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>0-1 Unsatisfactory</strong></td>
<td>Critical requirements are missing or minimally evident. Quality indicators are not achieved. The program lacks procedures and controls necessary to ensure compliance, quality, and data integrity.</td>
</tr>
<tr>
<td><strong>2-3 Marginal</strong></td>
<td>Requirements and/or quality indicators are missing or minimally evident in applicable program areas. Quality assurance is minimal resulting in inconsistencies in accountability and integrity of program assets and data.</td>
</tr>
<tr>
<td><strong>4-5 Satisfactory</strong></td>
<td>Requirements and quality indicators are generally evident in applicable program areas with minor exceptions. A quality assurance plan is in place that demonstrates adequate controls to ensure integrity and accountability of program assets and data.</td>
</tr>
<tr>
<td><strong>6-7 Very good</strong></td>
<td>Programs, procedures, and systems are consistently in place to ensure delivery of requirements and achievement of quality indicators. Some innovative approaches are employed to promote continuous improvement. A viable quality assurance plan ensures integrity and accountability of program assets and data.</td>
</tr>
<tr>
<td><strong>8-9 Exceptional</strong></td>
<td>Programs, procedures, and systems are well organized, clearly communicated, and administered to ensure quality delivery of all requirements and achievement of quality indicators. Innovative approaches result in program enhancements and improved outcomes. Through rigorous self-assessments and quality assurance, the operator safeguards program assets and maintains the integrity of program data.</td>
</tr>
</tbody>
</table>

In addition to ROCAs and Corporate Office Center Assessments, the HWMs typically conduct their own internal record audits and program assessments on an ongoing basis. If you are familiar with the program requirements and the assessment criteria, it will be easier to maintain a continuous level of quality and a consistent level of compliance.
Part 1: Mental Health Services (PRH 6.10, R3)

Mental Health and Wellness Program—PRH 6.10, R3

The Job Corps Mental Health and Wellness Program is coordinated by a licensed mental health professional responsible for overall direction of the program. The general emphasis of the Mental Health and Wellness Program shall be on the early identification and diagnosis of mental health problems; basic mental health care; and mental health promotion, prevention, and education designed to help students overcome barriers to employability. The program utilizes an Employee Assistance Program (EAP) approach that includes short-term counseling with an employability focus, referral to center support groups, and crisis intervention (such as emotional reaction to HIV testing, rape, suicidal behavior, death, or other serious loss).

Your Center Director, in consultation with the Regional Office, determines the number of required on-center hours for your position. Six hours/100 students/week is the minimum required level of mental health coverage by a qualified licensed mental health professional. Except for emergencies or consults by a psychiatrist, all mental health clinical services defined as basic health care in PRH Exhibit 6-4 must be provided on center by you and/or designated intern, extern, or practicum graduate student. More information about graduate training programs is included under Community Linkages and Resources.

Lastly, the Mental Health and Wellness Program is augmented by a counseling component that focuses on students' individual needs and progress in personal and social development, basic education, and career technical training. These counseling services are to be provided by Career Counselors, Residential Living staff, and other staff with the support and guidance of you.

Given the limitations of your time, the focus on employability, and the great needs of the students, it is best to conceptualize the Mental Health and Wellness Program as an EAP model with the following components: assessment; promotion, prevention, and education; and treatment. The CMHC Task and Frequency Chart will help you to prioritize and schedule activities.

The CMHC Task and Frequency chart is located here: https://supportservices.jobcorps.gov/health/Pages/MentalHealth.aspx.

Assessment—PRH 6.10, R3 (b)

As CMHC, you will provide mental health assessments for applicants and students to examine mood, behavior, thinking, reasoning, and other areas related to emotional wellness. There are three types of assessments that will occur: 1) for applicants during the admissions process, 2) for new students based on responses to the Social Intake Form (SIF) and/or the Job Corps Health History Form, and 3) for any student by referral.

1. Assessment of Applicants during the Admissions Process

Reviewing applicant file folders during the admissions process is an important part of your job as a CMHC. The HWM will forward files to you of applicants who report mental health...
and/or behavioral problems on the Job Corps Health Questionnaire (ETA 6-53).

There are two teams you will be asked to participate in as part of the assessment of applicants during the admissions process:

- **The File Review Team (FRT)** typically includes you and the Disability Coordinator to review and assess mental health information of applicants for the program. This will require contact with the applicant to conduct a clinical interview by phone or face to face depending upon the location of the applicant.

- **The Reasonable Accommodation Committee (RAC)** is led by the Disability Coordinator. You will assist the Disability Coordinator in gathering information to determine the need for reasonable accommodation and identifying accommodations for applicants with mental health disabilities. You may gather further information by asking the Admissions Counselor to obtain various records from schools, hospitals, physicians, and therapists in order to formulate an appropriate accommodation plan. As part of the accommodation process, you and/or the center’s RAC may interview the applicant by phone or schedule a face-to-face interview. Requests for accommodation from applicants and students with psychiatric disabilities must be evaluated on a case-by-case basis.

The goal of your review of applicants during the admissions process is to evaluate the information contained in the folder and make a clinical recommendation about the current stability of the applicant’s mental health and Job Corps’ ability to provide care management. There are three potential outcomes of this assessment:

- To determine if the applicant poses a direct threat to self or others that cannot be alleviated with reasonable accommodation. If indicated, you will complete the Direct Threat Assessment Form (PRH 6: Appendix 609).

- To determine whether the applicant’s health care needs are manageable at Job Corps or whether, even with reasonable accommodations, the needs are beyond Job Corps’ basic health care responsibilities. If indicated, complete the Health Care Needs Assessment Form (PRH 6: Appendix 610).

- To recommend admission into the program and review reasonable accommodations for applicants with mental health disabilities. For guidance regarding whether an applicant is a person with a disability, refer to PRH 6: Appendix 605.

In your role as a consultant, you can only make recommendations regarding denial of applicant files. The Center Director will review your recommendation and then send the assessment to the Regional Office for final decision. Contact your Regional Mental Health Specialist when you are ready to complete your first recommendation for denial.

The Job Corps Health Questionnaire (ETA 6-53) is located here: [https://supportservices.jobcorps.gov/health/Pages/Documents.aspx](https://supportservices.jobcorps.gov/health/Pages/Documents.aspx)
2. Assessment of New Students Based on Responses to the Social Intake Form (SIF) and/or the Job Corps Health History Form

- **SIF**—Career Counselors are required to conduct an intake assessment, including student history, during the first 48 hours of enrollment (PRH 2.4, R2 (a)). Typically the intake assessment is recorded on the SIF, though centers may use a different form if they wish. It is required that you review the SIF or intake form of students who indicate mental health history, current mental health problems, or who request to see you, within 1 week of arrival. You should make recommendations/referrals if indicated, and sign that the form has been reviewed. When completed, the form should be filed in the student health record.

- **Job Corps Health History Form**—The student’s health history is collected within 48 hours and documented on the Job Corps Health History Form. The Job Corps Health History Form includes alert questions designed to help Health and Wellness staff members quickly screen for emergent physical-, mental-, and oral-health issues, and serious substance abuse problems. Students may be referred to you based on their answers to these alert questions.

3. Assessment for any Student by Referral

Students may be referred for mental health services at any time during their stay in Job Corps. Referrals may come from counselors, instructors, or other staff using the referral and feedback form. This form has a section for you to provide feedback to the referral source after your interview and assessment of the student. The completed original referral and feedback form should be placed in the SHR and a copy provided to the referral source. Students may also self-refer.

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**TIP 1:** Provide training to Counseling staff on how to triage referrals. This will ensure you are receiving appropriate referrals requiring mental health services versus adjustment behaviors that can be addressed by counseling staff.

**TIP 2:** Feedback to referral sources should include descriptions of behaviors to address and recommendations, not diagnoses.
Steps to Working with Students

This next section will walk you through the components of an assessment within the Job Corps setting and relevant dispositions or outcomes. Depending upon the reason for the referral, an appointment for an intake interview should be scheduled as soon as possible or, if urgent, that same day. This section will review the intake interview, disposition, and case management.

1. Intake Interview

You should review the referral and health records prior to the student intake interview. Sometimes it might also be helpful to speak directly with the referral source before the student interview. As this is the first interaction between you and the student, you may want to take time to develop rapport and explain what will happen during the intake interview.

During the intake interview you will identify and diagnose potential problems the student may have which might include a mental status examination. After you complete your intake interview, you have two options depending upon the anticipated treatment plan for that student.

a. If there is not going to be a treatment plan and the student simply needs a supportive plan from Counseling staff, then an entry in the progress note should be completed which includes a brief summary of the intake interview including reason for referral, presenting problem, mini mental status exam and diagnostic impression if applicable, and recommendations.

b. If the student will begin short-term therapy with you or will be referred off center for ongoing therapy, a full intake assessment should be completed using the mental health intake form and included in the SHR. The mental health intake form includes reason for referral, presenting problem, history of presenting problem, relevant mental and chemical health history, mental status exam, barriers to employability, recommendations, and working diagnosis based on the current version of the Diagnostic and Statistical Manual (DSM).

Sample mental health intake forms are located here: [https://supportservices.jobcorps.gov/health/Pages/MentalHealth.aspx](https://supportservices.jobcorps.gov/health/Pages/MentalHealth.aspx).

2. Disposition

After the intake interview and completion of your assessment, you have several options:

- Manage the student on center (addressed in case management section)
- Refer to:
  - Center Physician or TEAP Specialist for additional assessment
• Reasonable Accommodation Committee (RAC) for identification of accommodation support
• Community mental health services for on-going services

- Determine if a medical separation with reinstatement rights (MSWR) or medical separation is appropriate (addressed in Part 3: Health Administration)

**Note:** Psychological testing is costly and time consuming, but it may be necessary in select cases to complete an evaluation or to determine the disposition. Use of psychological test batteries to establish a diagnosis and clinical treatment plan is discouraged and not considered part of the CMHC’s hours required by the PRH. Students who need educational and psychological testing to document a suspected learning disability should be referred to vocational rehabilitation or another appropriate agency. If appropriately licensed and trained CMHCs or supervised graduate students are involved in testing, they must conduct an evaluation to document the disability that meets community standards.

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**A copy of the Job Corps Educational and Psychological Assessment Guidelines is located here:**

[https://supportservices.jobcorps.gov/health/Pages/MentalHealth.aspx](https://supportservices.jobcorps.gov/health/Pages/MentalHealth.aspx)

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3. **Case Management**

After an assessment of the student’s mental health needs and a determination that Job Corps can meet those needs, you should make a confidential entry in the SHR and prepare a case management plan. The management plan should:

- Be multidisciplinary and describe various modes of treatment, including groups, TEAP counseling, medication evaluation, and off-center referrals.

- Identify barriers to employment and interventions designed to minimize those barriers. For example, problems managing anger can be a barrier to employment. The intervention could be participation in an anger management group on center.

- Be tied to Job Corps program elements and specific staff members. For example, a student who has problems managing anger needs to find positive ways to release stress and anger. The management plan may include participation in recreation, which is a Job Corps program element. The specific staff member responsible for this part of the case management plan would be a member of the recreation staff.

This same case management plan may also include participation in the Career Success Standards (CSS), another Job Corps program element, requiring the student to successfully achieve the Interpersonal Skills Standard. This part of the case management plan would be implemented by the staff conducting CSS on center.

A Career Counselor is the ideal Case Manager for an individual with academic or social problems. The Case Manager is responsible for following up on the mental health management plan. You and the Case Manager work together to provide a bridge between the student's needs and staff skills. For example, if the plan calls for group recreational
activities, the Career Counselor and you discuss this aspect of the management plan with the Recreation staff.

Case management plans require communication among staff, monitoring, and follow up. Information exchange shall occur through regular case conferences with you, Counseling staff, and other appropriate staff based on individual student needs. Here are a few suggestions to assist you:

- Utilize the Job Corps Case Management Plan Template to develop the case management plan with center staff.

- Have the case management plans reviewed and updated during the evaluation of students’ progress panel meetings. These meetings are scheduled approximately every 60 days with the Career Counselor to monitor progress on center. Check with the Career Counselor assigned to the student regarding the schedule of the panel meetings. Document this update in the SHR via your own progress note or place a copy of the counseling note in the SHR.

- To assist you and other center staff, there are Mental Health Chronic Care Management Plans (MHCCMPs) which provide a systematic approach to treating and managing chronic mental health conditions. MHCCMPs are available for Attention Deficit/Hyperactivity Disorder, Anxiety Disorders, Autism Spectrum Disorder, Bipolar Mood Disorder, Borderline Personality Disorder, Obsessive-Compulsive Disorder, Depressive Disorders, Panic Disorder, Post-Traumatic Stress Disorder, Schizophrenia, and Tourette’s Disorder. Each MHCCMP includes a disorder fact sheet for students; a disease-specific questionnaire sent to the applicant’s health care provider during the application process by the Admissions Counselor; and a summary of specific interventions.

The Case Management Plan and MHCCMPs are located here: https://supportservices.jobcorps.gov/health/Pages/MentalHealth.aspx.

Treatment—PRH 6.10, R3 (d)

Job Corps provides students with mental health treatment, to include:

1. **Short-term counseling with mental health checks as needed. The focus of these sessions should be on retention and behaviors that represent employability barriers.**

   Job Corps is not staffed to provide extensive treatment for students with serious psychological and/or emotional problems. Clinical services are limited to those who are physically and emotionally able to participate in normal Job Corps duties without extensive medical and mental health treatment.

   - **Brief Therapy**—Some students may benefit from brief therapy. You should consider two major options in this event: (1) on-center short-term therapy conducted by you or an intern under your supervision; or (2) off-center sessions conducted by a licensed mental health professional. As a general guideline, short-term counseling is defined as no more
than six sessions with additional mental health/medication checks as needed to increase resilience and employability.

- **What if a Student Requires More than Brief Therapy?**—You may not provide long-term psychological treatment to a student; however, further counseling focused on employability barriers and coping skills may be indicated on a case-by-case basis for those students who present with greater and/or episodic mental health needs. If a stable student requires long-term treatment to remain in the program, you may:
  
  - Utilize externs and interns to carry long-term cases as required by their academic institutions with a focus on employability.
  
  - Make a referral to an off-center provider if plausible. You should maintain documented contact with the off-center mental health provider to monitor the student's compliance and progress.

2. **Collaboration with TEAP Specialist for short-term counseling of students with co-occurring conditions of mental health and substance use.**

   See Part 2: Related Health Programs—Trainee Employee Assistance Program for your responsibilities related to the TEAP.

3. **Collaboration with Center Physician and Health and Wellness staff on psychotropic medication monitoring of stable students, with the advice of consulting psychiatrist, if appropriate.**

   You should work closely with the Center Physician and Nursing staff to help manage students on medications. Your role is to help evaluate any students already on medication and to identify any other students who may need to be referred to the Center Physician or consulting psychiatrist for a medication evaluation. In preparation for this role, it is helpful to be familiar with the various medications that may be used, including their desired effects and undesirable side effects. Although a detailed review of specific medications and treatments is beyond the scope of this DRG, a few general principles and procedures may be helpful in your role:

   - Most psychiatric medications take at least 2 weeks to begin to work effectively. Some minor side effects may occur the first few days after the medication is begun. These side effects will usually subside as the body gets used to the medication as long as the medication is taken at least once a day.

   - In order to reduce misuse of medications, potentially addictive medications or those that can be used to achieve a high (e.g., stimulants, sedatives, or strong pain medications) are usually only given out at the HWC or by Residential staff with specialized training.

   - Any student showing adverse reactions to medications that do not subside should be encouraged to seek advice from one of the Health and Wellness staff.

   - Warn students against stopping medications on their own once they begin to feel better without professional advice from their doctor or nurse. Just like it takes a while for medications to begin to work, it generally takes about one or two weeks for the
medication to get out of the body and if the symptoms return, the students may miss part of their training until they get re-stabilized.

- Reinforce with students that medications are only one of a number of tools or skills used to help them control symptoms. If they are referred for other “talking” or behavior therapy, strongly recommend that they make use of those opportunities as well as the medications to get better control of their mind and body.

- If a student needs to remain on some medications after they leave Job Corps, it is recommended that Health and Wellness staff members help them find affordable health insurance or a medication assistance program.

For more specific information about various medications that may be used by Job Corps students, you should become familiar with a few tools that can be useful:

- Mental Health Disabilities TAG
- Job Corps List of Preferred Medications
- The Physicians’ Desk Reference (PDR) or similar volumes (e.g., Mosby Drug Consult) are usually available in the HWC for regular use by the physicians and nurses providing care for the students

The Job Corps List of Preferred Medications and the MH Disabilities TAG is located here: https://supportservices.jobcorps.gov/health/Pages/Documents.aspx

4. Collaboration with Counseling staff in developing and/or leading psycho-educational skill-building groups to promote wellness (e.g., relaxation training, anger management, mood regulation, assertiveness skills, handling relationships, sleep hygiene, etc.).

- Psycho-Educational Groups—Groups may be conducted by Counselors, TEAP Specialists, and CMHCs. It is your responsibility to:
  - Determine what groups are occurring on center and make recommendations for new groups
  - Help train staff to conduct and manage psycho-educational groups
  - Lead or co-lead groups as appropriate
  - Allow graduate students to provide groups with supervision from you

- Counseling Component—The Mental Health and Wellness Program MUST have a counseling component that focuses on students’ individual needs and progress in personal and social development, basic education, and vocational training. These counseling services are to be provided by Career Counselors, Residential Living staff, and other appropriate staff with your support and guidance.

TIP: Document in the SHR when you refer a student to a group and whether they attend.
Career Counselors are an extension of the Mental Health and Wellness Program and help students maintain contact with family and others in the home community. They assist students with suggestions and advice on how to negotiate the Job Corps system and attain their educational and vocational goals. Through regular individual and group counseling sessions, Career Counselors help students review their reasons for coming to Job Corps and their progress toward long-term employment goals. When Counselors identify students in need of more extensive mental health services, they should refer these students to you for further evaluation.

Career Counselors support the Mental Health and Wellness Program by providing regular individual and group counseling sessions. Career Counselors help students to review their reasons for entering Job Corps, deal with personal issues such as a loss of a girlfriend/boyfriend, and support their progress toward long-term employment goals.

5. **Information exchange through regular case conferences between the CMHC, Counselors, and other appropriate staff based on individual student needs.**

As CMHC, you support the Career Counseling staff by offering mental health training and participating in regular student case conferences. When Counselors identify students in need of more extensive mental health evaluation and therapy, they can refer these students to you for further evaluation. The Career Counselors, with your technical assistance, should also work closely with Residential Living staff to address students' problems. This requires communication among staff, monitoring, and follow up. A weekly documented meeting should occur for students with updates in the SHR.

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A sample form to document case management meetings with counselors can be found here: [https://supportservices.jobcorps.gov/health/Pages/MentalHealth.aspx](https://supportservices.jobcorps.gov/health/Pages/MentalHealth.aspx).

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6. **Crisis intervention, as needed.** In the event of a mental health emergency, the CMHC or the Center Physician shall conduct a mental health evaluation as soon as possible, and when necessary, refer the student for psychiatric care. If the Center Physician or CMHC is not available, the student shall be referred immediately to the emergency room of the nearest medical facility. If there is a life-threatening situation, 911 or the emergency response team should be called.

- **Crisis Intervention**—Each center has specific procedures for the operation of most aspects of the HWC. As CMHC, you are responsible for developing and providing staff training and crisis intervention for topics such as emotional reaction to HIV testing, rape, suicidal behavior, death, or other serious loss. You are also responsible for drafting center procedures for emergency psychiatric situations such as suicide attempts, psychotic episodes, urgent referrals, and danger to self and others. As part of these procedures, there should be a process for 24-hour on-call coverage to address serious mental health situations. You can find additional information on crisis intervention on the
7. **Referral to off-center mental health professionals or agencies for ongoing treatment and/or specialized services.**

   - **Community Linkages and Resources**—Your position is one of prevention, assessment, and triage. The practice of referring out to the community is a large part of this position, and therefore community linkages are imperative to implementing an effective Mental Health and Wellness Program. The following are a few examples of community resources that may be appropriate linkages and referral sources:

     - Community educational groups for stress and depression management
     - Emergency psychiatric facilities
     - Graduate school programs that could provide graduate psychology, counseling, and/or social work students to offer entry-level mental health services on center

     For additional information on developing training programs with graduate schools, see the Externship/Internship Programs section located here: [https://supportservices.jobcorps.gov/health/Pages/ExternshipInternshipPrograms.aspx](https://supportservices.jobcorps.gov/health/Pages/ExternshipInternshipPrograms.aspx)

     - Specialized off-center referrals can help support students who may have special mental health or cultural needs ranging from lifestyle choices to language barriers
     - Department of vocational rehabilitation referrals to assist with assessment of present ability level and planning an appropriate individual reasonable accommodation plan
     - Psychiatry consults through a memorandum of understanding with a board-certified psychiatrist to have students evaluated and/or maintained on more complex psychotropic medications; the Center Physician is usually capable of prescribing the more common antidepressants and stimulant medications

8. **A written referral/feedback system shall be established and documented in the SHR.**

   The PRH requires a written referral and feedback system for mental health treatment. To ensure that this requirement is met, it is recommended that you develop a two-part mental health referral form:

   - **Part 1** would allow the referral source (e.g., Career Counseling, Residential Living staff, Academic/Vocational staff) to describe the student’s behavior and the need for a referral.

   - **Part 2** would go back to the referring staff with a recommendation from you. To protect the confidentiality of the student, this recommendation should be in general terms with a behavioral focus. Do not disclose any unnecessary medical information such as a diagnosis. (For example: Do not write “student has ADHD;” instead write “student is having trouble maintaining concentration and could benefit from frequent breaks during the training day.”) In addition to written feedback, verbal contact among all persons
involved is desirable. This contact may be accomplished with phone calls and case conferences. Make certain to document verbal care coordination in the SHR.

A sample referral and feedback form is located here: https://supportservices.jobcorps.gov/health/Pages/MentalHealth.aspx.

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### Mental Health Promotion and Education—PRH 6.10, R3 (c)

Mental health promotion and education include:

1. **Minimum of a 1-hour presentation on mental health promotion for all new students during the Career Preparation Period with an emphasis on employability.**

   Presentations shall explain the Mental Health and Wellness Program, what services are available, and how to make a self-referral.

   Students will learn basic skills in identifying and responding to a mental health crisis.

2. **At least one annual center-wide mental health promotion and education activity.**

   - **Center-wide Activities**—There should be a center-wide emphasis on preventing mental health problems through providing students with education on how to deal with stress, recognizing signs of depression, and helping them learn when to ask for help. This can be accomplished through presentations to students during introduction to center life, handing out brochures, and supporting major mental health prevention initiatives on center like "Mental Health Awareness Month", “National Depression Screening Day” or "World Mental Health Day."

   Centers are also required to provide center-wide education on bullying, sexual harassment, appropriate behavior, boundaries, and consequences (PRH 6.8, R3). This includes providing new students with information on anti-bullying policies (PRH 2.2, R1). CMHCs are strongly encouraged to help develop a center anti-bullying policy if one doesn’t already exist.

   Sample templates for the mental health presentations to be conducted during CPP, is located here: https://supportservices.jobcorps.gov/health/Pages/MHPromotionEducation.aspx.

   An example anti-bullying policy is located here: https://supportservices.jobcorps.gov/health/Pages/BullyingPrevention.aspx.

3. **Clinical consultation with Center Director, management staff, and HWM regarding mental health-related promotion and education efforts for students and staff.**

   An important part of your role is to consult with staff to promote a positive center environment and provide training opportunities for staff and students. In addition, your meetings with the Center Director should be monthly and documented via written minutes (PRH 6.12, R16).
5. **Coordination with other departments/programs on center, to develop integrated promotion and education services.**

To be effective, the Mental Health and Wellness Program should be viewed as an integral part of center life and support other programs on center. When developing mental health promotion and education activities, collaborate with representatives from other departments. For example, research indicates that exercise is an excellent way to boost an individual’s mood. Work with the HEALs Coordinator, Recreation Supervisor, and Student Government Association to sponsor a "Stay High" or "Lift Your Mood" weekly aerobic or workout class where information on positive emotional wellness is shared with students.

**TIP:** You may be asked to present information on the Mental Health and Wellness Program and the role of the CMHC to Admissions Counselors (ACs). This presentation should focus on helping ACs understand their role in collecting mental-health information.
Part 2: Mental Health Interface with other Wellness Disciplines
[Health and Wellness, Oral Health, Trainee Employee Assistance Program (TEAP), and Related Health Programs (PRH 6.10 and 6.11)]

Health and Wellness Program (Medical)—PRH 6.10, R1

The Health and Wellness Program is in place to assist students in attaining and maintaining optimal health. Job Corps centers are required to provide basic health services (PRH 6: Exhibit 6-4) to all students and accommodations for students with disabilities. In providing care, Job Corps adheres to all current HIPAA and 42 CFR Part 2 regulations regarding consent and confidentiality for protected health information.

Exhibit 6-4, Job Corps Basic Health Care Responsibilities, is located here: https://supportservices.jobcorps.gov/PRH/prh_ch6_ex6_04.pdf

Health and Wellness staff may identify students with mental health needs and counsel and educate students about health-related issues such as alcohol and drug use, reproductive health, weight control, hypertension, etc.

Because of the interdependence of physical and emotional well-being, it is essential that an efficient system for student referrals and feedback exist among you, the Health and Wellness staff, career counseling staff, and other staff, as appropriate. To facilitate communication between you and Health and Wellness staff, your office should be located in the HWC. The HWM should ensure that logistical support (e.g., scheduling) is available to you.

Oral Health and Wellness Program—PRH 6.10, R2

The general emphasis of the Oral Health and Wellness Program shall be on early detection, diagnosis of oral health problems, basic oral health care, dental hygiene, and prevention/education (e.g., oral hygiene instructions, caries risk assessments, the relationship between oral health and employability, oral health and wellness plans).

The Oral Health and Wellness Program is led by the Center Dentist and supported by a Dental Hygienist and a Dental Assistant.

Trainee Employee Assistance Program (TEAP)—PRH 6.11, R1

The general emphasis of TEAP shall be on prevention, education, identification of substance use problems, intervention services, relapse prevention, and helping students overcome barriers to employability.

The TEAP Specialist:

- Ensures orientation of new students to the center’s TEAP program as a center-wide alcohol and drug prevention and education effort with a focus on preventing barriers to employability.
Desk Reference Guide: Job Corps Center Mental Health Consultant

- Provides center-wide substance prevention and education services that encourage healthy lifestyle choices.
- Conducts assessment of students to identify substance use problems and develops intervention services as needed.
- Coordinates relapse prevention services.
- Assures adherence to Job Corps’ Zero Tolerance policy for substance abuse among students.
- Coordinates all aspects of the biochemical testing program—from scheduling students for drug testing to training staff in the use of alcohol testing devices.
- Ensures that the integrity of the biochemical testing program is maintained.
- Submits quarterly alcohol reports to the National Office.

As CMHC, you should set aside time each week to provide the TEAP Specialist with clinical support as described below:

- Assist in developing interventions for students who have drug and/or alcohol issues such as psycho-educational or counseling groups.
- Review student cases with the TEAP Specialist.
- Provide direct support for students with co-occurring disorders or difficult cases.
- Collaborate with the TEAP Specialist in authorizing medical separations with/without reinstatement for drug- and alcohol-related diagnoses.
- Document case coordination in the SHR.

**Tobacco Use Prevention Program (TUPP)—PRH 6.11, R3**

Centers must implement a program to prevent the onset of tobacco use and to promote tobacco-free environments and individuals. To support this program, a TUPP Coordinator shall be appointed (he or she need not be a health services staff member). 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.

**TUPP requirements:**

- All buildings and center-operated vehicles must be smoke 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.

As CMHC, you will be asked to support the center’s efforts to be a smoke free/tobacco free environment by working with the TUPP Coordinator to develop cognitive-behavioral strategies to change the thoughts, attitudes, and actions of students toward tobacco use. You may also be asked to help develop strategies to maintain abstinence. This may be accomplished by providing program resources for the TUPP Coordinator and/or direct group involvement.

**Family Planning Program—PRH 6.11, R4**

Health and Wellness staff members provide reproductive health services with the assistance of mental health and other staff, as needed. These services cover sexuality, family planning, sexually transmitted infections, and pregnancy management. Both female and male students should be included in family planning education and services.

While the Family Planning Coordinator should ensure that staff members who are adequately trained in family planning issues perform counseling functions, as CMHC you support the Family Planning Program by providing guidance to the staff when necessary. For example:

- If a pregnant student is found to be positive for drugs or alcohol and is at risk for a complicated pregnancy, you, along with the TEAP Specialist and Center Physician, should evaluate the student. If she is considered to be at severe risk requiring services beyond the scope of the center, a medical separation with reinstatement (MSWR) that includes a community referral for both drug and alcohol treatment and obstetrical services should be considered. A detailed explanation of medical separations can be found in Part 3—Health Administration of this DRG.

- If a student appears to be coping poorly with a pregnancy despite counseling with her Career Counselor, a referral for a mental health evaluation should be made to you. If serious emotional problems are identified during the evaluation that could impact the well-
being of the student or the pregnancy, you may need to recommend MSWR or medical separation from Job Corps with a referral for more comprehensive treatment.

- If a student’s sexual behavior interferes with his or her ability (or the ability of others) to participate in the Job Corps program, you may be asked to evaluate and provide a MSWR or medical separation with mental health referral(s).

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**Forms and additional information are located here:**
[https://supportservices.jobcorps.gov/health/Pages/FamilyPlanning.aspx](https://supportservices.jobcorps.gov/health/Pages/FamilyPlanning.aspx)

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**HIV/AIDS—PRH 6.11, R5**

All students receive HIV/AIDS education, testing on entry and when clinically indicated, follow up, and counseling. HIV-positive students receive case management on center but are often treated by off-center infectious disease specialists.

When a student tests positive for HIV, you should work with the Center Physician and Nursing staff to help communicate the results and provide short-term intervention and referral, as indicated. HIV-positive students who are medically and psychologically able to participate in Job Corps’ programs are case managed by a team that includes the Center Director, Center Physician, HWM, CMHC, and designated Career Counselor.

You may provide the following clinical services to HIV-positive students:

- Perform post-test informing and counseling and document in student health record
- Ensure that crisis intervention and treatment are provided as necessary
- Conduct complete psychosocial assessments in accordance with Job Corps protocols
- Make psychosocial recommendations to retain or separate HIV-positive students
- Participate in case management team meetings
- Participate in the development and modification of case management plans
- Maintain contact with the case manager as needed
- Perform quarterly (or as needed) assessments

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**Exhibit 6-12, the HIV Testing Information Sheet, is located here:**

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**Sexual Assault Prevention and Response—PRH 6.11, R6**

Each center must establish a program for sexual assault prevention, counseling, treatment, and follow-up care. Centers are required to develop a sexual assault response team (SART) that involves center staff and outside resources. Education regarding rape and sexual assault prevention should be incorporated into introduction to center life.

Sexual assaults must be reported to local law enforcement authorities as required by state and local law and as significant incidents.

As CMHC, your role is to:
Assist the SART Coordinator in developing staff training on sexual assault awareness and prevention.

- Provide short-term therapy. Long-term therapy should be referred to the local rape crisis center where the student can receive immediate specialized services.

- Provide follow-up support when the student returns after receiving outside services.

- Act as center liaison with the local crisis center.

- Provide HIV counseling and crisis assistance, if needed.

The Sexual Assault and Prevention TAG, is located here: https://supportservices.jobcorps.gov/health/Pages/SexualAssaultPrevention.aspx

Healthy Eating and Active Lifestyles—PRH 6.11, R7

Sound nutrition and physical activity, along with other healthy behaviors, form the basis for wellness. Centers are required to establish a Healthy Eating and Active Lifestyles (HEALs) Committee to oversee and coordinate this program, incorporate student preferences into program planning, provide individualized weight management programming and/or counseling, incorporate motivational interviewing and goal setting into counseling, and periodically assess the program.

Job Corps’ HEALs Program website provides an evidence-based curriculum to educate students; guidance for food service, recreation, Health and Wellness staff, as well as information for instructors and residential living staff; web-based trainings and workshops; tips to integrate healthy living into the center culture; and strategies to evaluate the program.

As a CMHC, you can affect students’ physical health along with their mental health. To get involved with HEALs:

- Consider offering a monthly weight management group that focuses on the link between stress and the drive to eat (“comfort eating”). Help students identify feelings and situations that cause them to overeat and discuss coping strategies to manage stress and painful emotions. See the Foods and Moods Curriculum on the HEALs website for activities.

- Assess students for eating disorders, including Binge Eating Disorder, when applicable.

- Plan training for other staff members on weight bias, emotional eating, or motivation.

The HEALs Discipline-Specific Guidance section is located here: https://supportservices.jobcorps.gov/HEAL/Pages/DisciplineSpecificGuidance.aspx
Part 3: Health Administration (PRH 6.12)

Staffing—PRH 6.12, R1

Center management has a responsibility to employ or subcontract with qualified health care providers. The number of hours required to staff a Job Corps HWC is determined by the center's contracted student enrollment capacity; these requirements are included in PRH 6: Exhibit 6-5.

Exhibit 6-5, Center Health Services Staffing Requirements, is located here: [https://supportservices.jobcorps.gov/PRH/prh_ch6_ex6_05.pdf](https://supportservices.jobcorps.gov/PRH/prh_ch6_ex6_05.pdf)

Authorizations (Consent for Treatment)—PRH 6.12, R2

The Job Corps Health Questionnaire (ETA 6-53), which authorizes basic/routine health care, should be placed in the SHR prior to the student's arrival. Additionally, students are asked to sign the Informed Consent to Receive Mental Health and Wellness Treatment form during the admissions process. This form should arrive along with the ETA 6-53; in the event that it is not present, Health and Wellness staff should have the student sign the consent during the cursory health evaluation. If the student is a minor, the form should be sent to the student's parent/legal guardian for signature.

Written consent/authorization from the student (if age > 18 years) or parent/legal guardian (if age 16 or 17 years) for any care or services beyond basic/routine health care authorized on initial ETA 6-53 should also be placed in SHR.

Students must be informed when and why specific information will be shared with other staff. Three situations in Job Corps which warrant breaching confidentiality are: (1) a student's threat to harm self, (2) a student's threat to harm others, and (3) suspicion of child/elder abuse. In these cases, you should inform the Center Director and HWM in writing immediately and provide recommendations as to a course of action. Unless specifically contradicted by state law, this reporting to center management fulfills your legal responsibility to protect, inform, warn, and/or report.

The Informed Consent to Receive Mental Health and Wellness Treatment form is located here: [https://supportservices.jobcorps.gov/health/Pages/MentalHealth.aspx](https://supportservices.jobcorps.gov/health/Pages/MentalHealth.aspx).

Basic Health Services Provided by Job Corps Centers—PRH 6.12, R3

Center operators are responsible for providing and paying for basic health care as detailed in PRH-6, Exhibit 6-4.

Providers may not bill third party payors, including Medicaid, for basic health services covered by the provider's subcontract.
Professional Standards of Care—PRH 6.12, R5

The medical practice standards for Job Corps HWCs are comparable to those for other health facilities found in communities nationwide. All Health and Wellness staff in the Job Corps setting should follow accepted professional standards of care and are subject to state laws.

Documentation of current credentials, licenses, and liability insurance (if applicable) for all health care providers must be available for review in the HWC.

The wellness model is a multidisciplinary treatment team approach. It is important that assessment, treatment, and case management notes are legible and part of the student health record. When writing notes, remember the phrase, “If it isn’t charted, it didn’t happen.” Notes should be in the chronological record, where they can be easily found. If notes are in the mental health section, an entry must be made in the chronological record indicating that the student was seen by you and referencing the note in the mental health section. Providers are strongly encouraged to use the SOAP note format (subjective information; objective data; assessment; plan) or DAP (data, assessment, and plan).

Health Care Guidelines—PRH 6.12, R9

Health Care Guidelines provide information concerning accepted practices for common health problems and situations in Job Corps. There are several reasons why it is important that each center has specific written instructions to be used throughout Job Corps. They are designed to:

- Help ensure the safety and comfort of students.
- Provide evidence-based scientific rationale to support decisions regarding treatment of students.
- Decrease the possibility of medicolegal concerns for center staff.
- Provide information and training on current health care practices for the staff.
- Save time for the consulting medical personnel to address other problems requiring their special attention.
- Facilitate the orientation of new health and non-health staff.
- Provide non-health staff with direction for action, especially when a member of the health services staff is not available or not on center.
All Health Care Guidelines shall be approved and signed annually by you, the Center Physician, or Center Dentist, as appropriate, and shall be kept in the HWC.

Annually, each center shall submit a memorandum to the Regional Office indicating which, if any, Health Care Guidelines have been modified. Copies of any personal authorizations for health staff and Health Care Guidelines that have changed shall be sent to the Regional Office for approval. Personal authorizations for non-health staff shall be retained on center.

The Health Care Guidelines TAG includes Health Staff Treatment Guidelines, Non-Health Staff Symptomatic Management Guidelines, and Prototype Staff Authorizations.

The Health Care Guidelines TAG is located here: [https://supportservices.jobcorps.gov/health/Pages/Documents.aspx](https://supportservices.jobcorps.gov/health/Pages/Documents.aspx)

**Student Introduction to Health Services—PRH 6.12, R10**

Students learn about the center’s Health and Wellness Program through orientation sessions and the student handbook. Orientation, which occurs soon after students arrive on center, is designed to:

- Prepare students for required medical examinations and tests
- Inform students about available health and wellness services
- Begin building motivation for preventive care
- Elicit questions and concerns
- Help new students feel comfortable and at ease using health and wellness services

This is an excellent opportunity for the Mental Health and Wellness Program to communicate services and quickly identify students who may need assistance. In fact, students who briefly meet you during orientation often feel more comfortable approaching you later if they need help. A verbal orientation, supported by the material in the student handbook, and followed by small group or individual conferences, represents the foundation of support for new students.

**Medical Separations—PRH 6.12, R11**

Medical separations occur when students have significant health problems that preclude participation in career training, are too complex to manage on center, or are unusually costly.

Medical separations are initiated by health services staff.

There are two options for medical separation:

1. **Medical separation:** A decision to medically separate should be made if a medical assessment and functional evaluation indicate that a student's medical, dental, mental health or substance use condition is unable to be ameliorated within 180 days.

   Any student receiving a medical separation is eligible to reapply to Job Corps one year following the date of his/her separation.
2. **Medical separation with reinstatement rights (MSWR):** A decision to medically separate with reinstatement rights may be used if the health care provider estimates that the student's condition will be resolved and the student will be able to return to the center within 180 days.

   For MSWR, students are contacted monthly by the HWM to assess progress and plan their return to Job Corps within the 180 days allowed. Center staff may submit a request to the Regional Office to extend an MSWR beyond 180 days for extenuating circumstances. The request should be accompanied by supporting documentation from the student’s health-care provider verifying that extension of leave is medically necessary. Requests will be reviewed on a case-by-case basis.

   Health and Wellness staff must approve a student’s transportation plan for medical separation.

   For both types of separation, a detailed health assessment, conducted by the appropriate provider, must be performed prior to every medical separation. The Center Director must approve all medical separations.

   The HWM should gather all needed information, obtain the Center Director's decision, notify required parties, make referrals, and document all actions.

   **Note:** The majority of separations for mental health conditions tend to be with reinstatement as most can be stabilized within 6 months if student is compliant with treatment. Thus, it is important that the student understands what he/she must comply with in order to return to center.

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### Death—PRH 6.12, R12

In the event of a student’s death, the Center Director must notify multiple parties, arrange for the remains to be sent home, and forward student records to the National Office. A significant incident report (SIR) must be submitted. Many of these activities may be delegated to health and wellness staff.

As CMHC, your role will be to determine the degree of emotional trauma for the center, organize crisis intervention services, and provide any grief counseling and support needed to attain a constructive resolution for students and staff.

Depending on the specifics of the student death, your activities may include all or some of the following:

- Individual counseling for students who may have witnessed the death or been most affected by it, such as roommates and girl/boyfriends.

- Small group discussions for staff and students who were close to the deceased or who express concern over the circumstances of the death to inform them about the death and the facts surrounding it in a sensitive fashion.

- Locate counseling assistance in the community.
- Keep records of affected students and provide follow-up services as needed.
- Follow the schedule of the deceased and visit classrooms/dorms of close friends.
- Model an appropriate response.

If the death was a suicide, critical incident debriefing and post intervention activities should occur that reduce the chances of anyone else committing suicide.

The Critical Incident Crisis Intervention Plan document is located here: [https://supportservices.jobcorps.gov/health/Pages/ViolencePrevention.aspx](https://supportservices.jobcorps.gov/health/Pages/ViolencePrevention.aspx)

The Management of Student Injury and Death under FECA/OWCP TAG is located here: [https://supportservices.jobcorps.gov/health/Pages/Documents.aspx](https://supportservices.jobcorps.gov/health/Pages/Documents.aspx).

### Continuous Quality Improvement—PRH 6.12, R15

Quality improvement activities should focus on improving performance as well as compliance with the standards of care. These activities are essential to managing and improving the care provided to students by the HWC. Consider the following when establishing a continuous quality improvement system on your center:

- Seek feedback of the Mental Health and Wellness Program from students through surveys.
- Utilize the Student Government Association’s Health and Wellness Committees to develop a quality management system that works for your center.
- Establish ongoing processes to assess effectiveness of current treatment protocols.

### Monthly Meeting with Center Director—PRH 6.12, R16

Both the Center Physician and you are required to meet monthly with the Center Director to discuss clinical and organizational issues. During these meetings, trends in student health needs can be recognized and addressed, changes or modification to the Health Care Guidelines for staff can be discussed and approved, mental health promotion and education activities can be planned, and health-related policies can be reviewed. Meeting minutes should include documentation of attendees and items discussed.

### Reporting —PRH 6.12, R17

There are several Job Corps required reports and documents, including the Health and Wellness Center Annual Program Description, Health Care Guidelines, Alcohol Testing Report, Health Services Utilization Report, HIPAA Disclosure Log, and the Bloodborne Pathogen Control Plan. Your HWM may ask you to provide input on certain reports.
Part 4: Additional Requirements

Although the majority of CMHC responsibilities are found in PRH 6, sections 6.10 through 6.12, several other areas of the PRH may require your attention.

Wellness Education—PRH 3.17, R1

During the Career Development Period (CDP), students receive instruction on a variety of health topics including emotional and social well-being, depression, and nutrition and fitness. As part of your consulting and prevention role, you can teach the mental health portion of the wellness class and specifically indicate how mental health issues affect student employability in the workforce (e.g., the relation of depression to job instability or how poor anger management can impair one’s employability).

Standard/Center Operating Procedures—PRH 5.1, R3

A standard/center operating procedure (SOP/COP) is an established procedure to be followed in carrying out a given operation or in a given situation. All SOPs/COPs should be center specific and individualized. It is recommended that your center have a SOP/COP for each health- and wellness-related PRH component and additional procedures for specific center policies (e.g., emergency psychiatric situations, mental health referral and feedback, etc.). Requirements for SOPs/COPs vary among centers and center operators.

SOPs/COPs should:

- Reflect current PRH information and be updated anytime there is a change in policy or practice.
- Include a reference to the corresponding PRH component.
- Provide a detailed, step-by-step approach to complying with the PRH requirement or performing the center practice.
- Reference center-specific forms, if applicable.

Emergency Psychiatric Services—PRH 5.4, R8 (a, b)

Emergency psychiatric services must occasionally be used until a more permanent solution can be arranged, usually psychiatric hospitalization. For centers in rural locations, such arrangements may require a few hours before the student can be taken to a more appropriate setting. Your center should have a center operating procedure (COP) that details the center specific operations for each of the three types of services which include:

- **Temporary Isolation**—Use of individual accommodations on center may be needed for temporary segregation of students from their peers when behavior constitutes an immediate threat to themselves, other persons, or property.
A student placed in isolation must be observed every 15 minutes and this observation must be documented on a signed log giving the exact time of observation and the signature of the staff member conducting the observation. Isolation may not exceed 12 hours unless accompanied by a statement from the Center Physician that the isolation is not medically prohibited.

- **Physical Restraint**—Physical restraint may be needed in situations where a student with a psychiatric disorder or substance abuse disorder seriously threatens persons or property, including suicidal behavior. No student will be restrained longer than one hour without consultation and approval from a physician. Staff may not use handcuffs, mace, pepper spray (or any derivatives) on students.

  The use of physical restraint indicates the need for a higher level of care. The student should be immediately transported for an evaluation at a psychiatric facility or emergency room to ensure the safety of students and staff. The Center Director may also request the assistance of local medical and/or law enforcement personnel when a student's behavior endangers the student or others.

- **Hospitalization**—Psychiatric hospitalization may be needed in serious situations of emotional disturbance. Even brief hospital stays can provide immediate safety for disturbed students as well as initial diagnosis and treatment.

  Brief involuntary hospitalization, even commitment, may be necessary if the student is suicidal, homicidal, or psychotic, but unwilling to enter a hospital voluntarily or is incompetent to make decisions. Laws and regulations regarding involuntary hospitalization and commitment vary from state to state, so the COP should outline procedures that comply with existing state laws. Parental notification is usually advisable, though is not required in cases of involuntary hospitalization where there may be risk to safety.

  You should evaluate any student hospitalized for mental health reasons who subsequently wishes to reenter Job Corps if at all possible.

To ensure appropriate emergency care and short-term services, each center should have a written agreement with a local health care facility, such as a hospital emergency department or a community mental health center, for 24-hour psychiatric emergency coverage and for short-term hospitalization.

### Management and Reporting of Significant Incidents—PRH 5.5

A Significant Incident Report (SIR) is a detailed report submitted by center staff documenting Job Corps-related significant incidents (e.g., serious injury, assault, death). The purpose of these reports is to ensure proper and effective management of serious incidents involving students, staff, or facilities.

All Job Corps centers are required to submit a SIR within 24 hours of the center being made aware of the incident (6 hours in the case of student or reportable staff death). SIRs must be submitted within this timeframe even if all information has not yet been gathered or a resolution has not yet been determined.
As CMHC, you may not be asked to complete a SIR; however, if the incident is related to a mental health emergency you should make sure you are contacted and allowed to have input regarding what is written and the disposition of the student.

Minimum Staff Qualifications—PRH Exhibit 5-3

All health and wellness staff must meet minimum education and licensure qualifications, which can be found in Exhibit 5-3. As CMHC, you must be an independent practitioner licensed as a clinical/counseling psychologist, psychiatrist, clinical social worker in the state of the Job Corps center where you are providing services. As a private contractor, you are responsible for maintaining a current license and liability insurance (at least $1 million, $3 million respectively), which is consistent with community standards and provide proof of these documents to the HWM to keep on file for ROCAs. Regional review and approval of this position is required.

Exhibit 5-3, Minimum Staff Qualifications, is located here:
https://supportservices.jobcorps.gov/PRH/prh_ch5_ex5_03.pdf

Required Staff Training—PRH Exhibit 5-4

All Job Corps employees are required to complete trainings when they begin employment. Some trainings, such as HIPAA, CPR/first aid, and bloodborne pathogens, etc., must be repeated annually.

In addition to required training, all Job Corps employees are required to complete an additional 5 hours of adolescent growth and development training. This requirement may be met by attending Job Corps trainings and webinars or through training by outside professional organizations.

You may be asked to provide adolescent growth and development training to other staff. Topics may include: effective communications, anger management, sexuality, suicide prevention, behavior management system, zero tolerance policy, appropriate staff/student boundaries, sexual assault prevention and response, sexual harassment and related social skills training, intervention techniques, and safety issues.

Additionally, all center staff members are required to complete the Web-based prevention trainings on the SafetyNet. These trainings include suicide prevention, violence prevention, and other safety topics.

Exhibit 5-4, Required Staff Training, is located here:
https://supportservices.jobcorps.gov/PRH/prh_ch5_ex5_04.pdf

SafetyNet trainings are located on SIMON at https://simon.jobcorps.org. A Citrix account is required to access the system. To access the training: 1) click on Learning Center; 2) click on Course Information and Enrollment, and; 3) type SafetyNet Toolkit in the Keywords box.
Student Enrollments, Transfers and Separations—PRH 6.4

If a student transfers from one center to another and has received medical services, including mental health, oral health, and TEAP, the transferring center will provide a legible or typed summary note on the student’s current status, medication, and treatment compliance at least 2 weeks prior to the student’s arrival. The SHR must arrive at the time of student arrival.

Disability Program—PRH 6.14

Because it is a federally funded training program, Job Corps is required to ensure its program and facilities are accessible and provide reasonable accommodation to individuals with disabilities to prevent discrimination on the basis of disability. Each center should have Disability Coordinators who ensure the center is providing services to students with disabilities as required by the PRH and Workforce Innovation and Opportunity Act (WIOA) regulations.

Guidelines for providing reasonable accommodation and documenting when a student declines accommodations are outlined in Appendix 605 and on the Job Corps Disability website.

As CMHC, you may be asked by the Disability Coordinator to participate in the reasonable accommodation process for students with mental health disabilities who may require accommodations. You may assist in gathering information to determine the need for reasonable accommodation and developing student accommodation plans. You may gather further information by asking the Admissions Counselor to obtain various records from schools, hospitals, physicians, and therapists in order to formulate an appropriate accommodation plan. As part of the accommodation process, you and/or the center’s Reasonable Accommodation Committee may interview the applicant by phone or schedule a face-to-face interview. An interview is also important when you have outdated information and need to assess the applicant’s present status.

A List of Sample Accommodations for Students with Mental Health Disabilities is located here: [https://supportservices.jobcorps.gov/health/Pages/MentalHealth.aspx](https://supportservices.jobcorps.gov/health/Pages/MentalHealth.aspx).

The Job Corps Disability website is located here: [https://supportservices.jobcorps.gov/disability/Pages/default.aspx](https://supportservices.jobcorps.gov/disability/Pages/default.aspx).

The Learning Disabilities website is located here: [https://supportservices.jobcorps.gov/SupportingStudentsLD/Pages/default.aspx](https://supportservices.jobcorps.gov/SupportingStudentsLD/Pages/default.aspx).