

Job Corps Health and Wellness Program

DESK REFERENCE GUIDE

Trainee Employee Assistance Program Specialist



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Introduction

This Desk Reference Guide (DRG) summarizes your responsibilities as a Job Corps Trainee Employee Assistance Program (TEAP) Specialist. 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](#).

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

- Contact your [Regional TEAP Health Specialist](#) to introduce yourself and receive an orientation to your new position. Your Regional TEAP Health Specialist serves as a technical expert for the Regional Office and the centers in your region—contact your Regional TEAP Health Specialist to answer your questions, clarify Job Corps policies, and provide you with up-to-date information that will assist you in your efforts to meet program requirements.
- Review your center’s operating procedures (COPs) for the TEAP. These procedures define how your program will operate on a day-to-day basis, describe staff roles, responsibilities, and provide guidance on center specific documentation, reporting, and communication protocols.
- Locate and familiarize yourself with the PRH (with special attention to sections [PRH 2: 2.3 Health Services](#)), [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.

HEALTH DIRECTORY

Contact information for Job Corps National Office staff, Health Specialists, and Health Support Contractor staff is located on the [Staff Directory](#) webpage.

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 2.3, sections R1 through R19, 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., health history form revisions).
- **Information Notices**—Provide one-time announcements with information that is of interest to centers (e.g., data summaries, National Substance Abuse Prevention Month).

Following an overview of Job Corps, this guide's format will provide TEAP Specialists with TEAP requirements and responsibilities, and then follow [PRH Chapter 2.3, R1 through R19](#) 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 120 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.

See the [Integration of Mental Health and Wellness Program and TEAP into CDSS](#) for additional guidance.

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 Office Health and Wellness Team Lead 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 center's Health and Wellness Program. All centers have the following staff as part of their health and wellness team:

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

The Center Physician, NP/PA, 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 [Exhibit 5-6 Center Health Services Staffing Requirements](#).

The Center Physician's role is that of a Medical Director for the Health and Wellness Center (HWC). He/she may also provide basic medical care along with the NP/PA. 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

Program Compliance Assessments (PCAs) are much like the accreditation reviews that occur at health facilities nationwide. Approximately every 2 years, Health Support and Accommodation Support Contractor personnel visit each center as part of a PCA team. You can expect to have student health records (SHRs), appointment books, and other records audited during this assessment. When the PCA is announced, an assessor will contact the HWM to set up an interview appointment with various members of the HWC staff. In preparation for the assessment, you will also be requested to complete the [TEAP Specialist Pre-PCA Questionnaire](#) that can be downloaded from the Job Corps Health and Wellness website.

This team uses the PRH and [Health and Wellness PCA tools](#) to conduct an overall assessment of your center's Health and Wellness Program. The PCA tools are designed to highlight the strengths of your program and identify program components and aspects that are out of compliance with the PRH. The PCA team will make recommendations to correct the noncompliant areas. After the PCA 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.

An unannounced Regional Office Targeted Assessment (ROTA) may also occur at anytime to assess program compliance, follow up on a complaint, or other inquiry.

In addition to PCAs, ROTAs, 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: Trainee Employee Assistance Program (TEAP) and Tobacco Use Prevention Program (TUPP)—(PRH 2.3, R5, R6)

Trainee Employee Assistance Program (TEAP)—PRH 2.3, R5

Overview and the General Emphasis of the TEAP Program—PRH 2.3, R5

Substance misuse and abuse can adversely affect a young person's life, contributing to poor academic performance, risky behaviors, physical and mental health consequences, and diminished employment prospects. Currently, Job Corps takes a multi-faceted approach to promote a positive and healthy substance-free lifestyle among students. First, Job Corps has a zero tolerance (ZT) policy meaning students found positive for substance use will face program sanctions, as well as possible separation. Second, centers screen all entering students for drug use and screen for substance use (drug and alcohol) on suspicion after entry. Third, Job Corps requires all centers have a position dedicated to maintaining the TEAP, which provides alcohol/drug assessment, intervention, prevention, and education services to students.

The Job Corps drug testing policy was established in the mid-1990s in response to a Congressional mandate to provide (1) students with substance use services, and (2) centers with capacity to identify/intervene/refer/separate students based on substance use patterns. Drug testing on entry was mandated as part of the Workforce Innovation and Opportunity Act (WIOA) of 2014, which states that Job Corps "shall require drug testing of all enrollees for controlled substances" (Sec. 152), and "prescribe procedures for informing enrollees that drug tests will be administered to the enrollees and the results received within 45 days after the enrollees enroll in the Job Corps" (Sec. 145).

The general emphasis of TEAP shall be on prevention, education, identification of substance abuse problems, relapse prevention, and helping students overcome barriers to employability. Job Corps does not offer drug counseling or treatment.

How the TEAP is structured, organized, and delivered will vary by center needs and the skills and expertise that TEAP Specialists and other center staff bring to the program. This guide provides a framework for centers to build effective programs; it presents strategies and techniques contributed by TEAP Specialists across the country as well as experts in the field. It is a starting point; the challenge is for centers to design programs that work for them, and more importantly, for the students they serve.

TIP: Research has clearly demonstrated that people need to be motivated to create changes. Motivational Interviewing (MI) is particularly effective. MI focuses on exploring and resolving ambivalence and centers on the motivational processes within the individual that facilitate change. To learn more visit [Motivational Interviewing Network of Trainers \(MINT\)](#).

Prevention and Education—PRH 2.3, R5 (b)

Substance use prevention is the promotion of a healthy lifestyle and norms that discourage alcohol, tobacco, and drug use. The term *prevention* is often used to refer to activities designed to:

- Make changes to drug use and lifestyle
- Prevent the onset of use of drugs
- Reduce extent of alcohol use
- Discourage the onset of tobacco use
- Reduce alcohol and drug-related problems
- Educate students on the consequences and impact of substance use

Center substance use prevention and education programs provide services for all students: those at risk for using alcohol and/or drugs, as identified through the counseling intake process (and the administration of the [Social Intake Form \(SIF\)](#); those who have used drugs in the past; and, those who have never used alcohol or drugs. Centers are required to provide several opportunities for substance abuse prevention:

- **Student introduction to center life**—The PRH requires that all students are provided with [information during the Career Preparation Period \(CPP\)](#) to acquaint them with center systems, behavioral standards, benefits, rules, and procedures to enable them to participate successfully in the program. This presents an opportunity to begin building relationships with all students. A minimum of a 1-hour presentation on substance use prevention for all new students during CPP is required. This presentation shall explain:
 - TEAP prevention, education, intervention, and relapse prevention services.
 - Job Corps drug and alcohol testing requirements and procedures.
 - Consequences of testing positive for drug or alcohol use while in Job Corps and the ZT policy.
 - An introduction to the Tobacco Use Prevention Program

TIP: TEAP should be presented as a helpful service on center and separate from the disciplinary system. Presenting it in this manner encourages students to self-refer to the program.

See the [Integration of Mental Health and Wellness Program and TEAP into CDSS](#) for additional guidance.

- **Career Development and Transition Periods (CDP/CTP) presentation(s)**—These presentations should focus on managing substance misuse, abuse, and dependency symptoms and issues in the workplace for students during CDP/CTP. Possible topics could include accessing Employee Assistance Program services, understanding how drug use poses barriers to employment, and tobacco use policies in the workplace.
- **Three center-wide activities**—There should be a center-wide emphasis on substance use prevention and education activities. Students should be provided with education on making healthy choices to avoid alcohol, drugs, and tobacco, and how these substances are barriers to employment. This can be accomplished through presentations to students, community speakers, handing out brochures, and supporting national substance abuse prevention initiatives such as the [Great American Smokeout](#), [National Recovery Month](#) and [Red Ribbon Week](#). Annually, a list of TEAP-related observances is made available to TEAP specialists. This will assist you in your planning of center-wide activities. It can be located on the Health and Wellness website on the [Alcohol and Other Drugs of Abuse](#) webpage under the Information Notices section.
- Consultation with Center Director, management staff, CMHC, and HWM regarding substance use prevention and education efforts for students and staff.

- Coordination with other departments/programs on center, to include, but not be limited to, residential, recreation, student government association, and HEALS (as the TEAP specialist is required member of this team), to develop integrated prevention and education services. To be effective, the TEAP must be viewed an integral part of center life. When developing prevention activities, collaborate with representative from other departments. For instance, research shows prevention programs are most effective when incorporate peer-led activities and are activity-based. Work with members of SGA to develop a peer-led mentoring program.

Assessment—PRH 2.3, R5 (c)

The program should provide the following levels of assessment:

- Assessment of applicants during the admissions process
- Review of the Social Intake Form (SIF) and the Job Corps Health History form
- Formalized assessment measures and clinical judgment to determine students' level of risk for substance abuse that would interfere with their training
- Collaboration with CMHC to determine when a medical separation with reinstatement rights (MSWR) or medical separation is appropriate

1. Assessment of Applicants During the Admissions Process

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

- **The Applicant File Review Team**—Reviewing applicant folders is an important part of your job as TEAP Specialist. The HWM will forward folders to you of applicants who report alcohol and drug issues on the [Job Corps Health Questionnaire \(ETA 6-53\)](#). The goal of your review is to evaluate the information contained in the folder and make a clinical recommendation about the stability of the applicant's drug and alcohol use status and Job Corps' ability to provide care management. If a prospective student's needs are beyond what Job Corps can provide, the Health and Wellness team needs to complete a Health Care Needs Assessment ([Form 2-05 Health Care Needs Assessment](#)). In addition to reviewing the file, you should interview the applicant face-to-face or by telephone if they cannot travel to the center for the interview. An interview is particularly helpful when you have outdated information and need to assess the applicant's present status. The review of the file and subsequent recommendation regarding the applicant should include a review of available clinical records. The Health and Wellness website contains reference documents to assist you in this task.

TIP: By involving as many staff from different departments as possible then TEAP truly becomes a program not a person.
- **The Reasonable Accommodation Committee (RAC)**—The 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 substance abuse problems. You may gather further information by asking the Admissions Counselor to obtain various records from 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 substance abuse disabilities must be evaluated on a case-by-case basis. See the [Job Corps Disability](#) website for additional guidance.

Note: Students need to be informed of Job Corps' ZT policy before they enter the program. Strategies include:

- **Contact with Outreach and Admissions (OA) Counselors**—Develop close working relationships with OA Counselors and center staff involved in applicant screening so they are familiar with the ZT policies and can provide this information to prospective students.
- **Conduct welcome calls**—You are encouraged to call students before their scheduled arrival date to explain the ZT policy and to discuss any concerns they may have about complying with the policy. Per requirements outlined in PRH Chapter 1, no new personal or clinical information is to be collected on this call. However, when completing welcome calls, you may ask the incoming student if there is anything they would like to talk about. Furthermore, you can answer their questions about the consequences of using substances at Job Corps, but you may not request new clinical information, such as whether they are currently using substances unless the student voluntarily discloses such information.
- **Conduct center tours**—Assist orientation staff in organizing center tours for local applicants. This introduction to the center should include a clear and comprehensive explanation of the ZT policy.

2. **Assessment of New Students Based on Responses to the Social Intake Form (SIF) or other Intake Assessment Tool and/or the Job Corps Health History Form**

Upon arrival on center, health information is collected from students in two ways:

- **Social Intake Form (SIF)**—The [SIF](#) is completed by the counselors and sent to HWC for review and signature by the various health care professionals, including the TEAP Specialist. This document provides critical clinical information to help you make determinations of how to proceed with each student in terms of an assessment of risk and what individualized services may be clinically warranted to support them during their training.

Built into the SIF is an actuarial risk measure called the CRAFFT, as well as other important questions related to alcohol, drug, and tobacco use. CRAFFT is a mnemonic for the six questions (Car, Relax, Alone, Forget, Friends/Family and Trouble) which comprise the measure. The first three questions are screening questions; questions 4 through 9 are totaled to obtain the CRAFFT score.

The empirical research on this measure shows that a “yes” on two of questions 4 through 9 on the CRAFFT signals a problem needing further evaluation and a score of

4 or more “should raise suspicion of substance dependence” (Harris et al., 2014¹). Students scoring 2 or more need to be further assessed and offered TEAP services; however, these services are voluntary and cannot be mandated. Using motivational enhancement techniques may be helpful at this juncture to help students appreciate the implications for scoring 2 or more on this measure. It should be explained this score indicates students could mean increased risk for having substance misuse problems that interfere with their training. If a student declines to be involved in the voluntary services, it is recommended that you document this and then follow up with them periodically throughout their Job Corps stay.

TEAP Specialists must review and sign the SIF **within one week** of the student’s arrival at Job Corps. These forms are filed in the SHR. Meetings with students, your assessment results, and their decision about involvement in the TEAP should be documented in the TEAP section of the SHR (see Documentation section below).

- **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 use problems. Students may be referred to you based on their answers to these alert questions.

3. Formalized Assessment Measures/Clinical Judgment

A major focus of the TEAP Specialist’s work should be on identifying and assessing those students who can succeed in Job Corps and those students who cannot because of substance use difficulties. You should utilize a formalized assessment process to determine students’ level of risk for substance use. The objective of this assessment should be to determine the type and severity of addiction and whether the student’s substance use difficulties are manageable within the Job Corps program.

The most significant service a TEAP Specialist can provide for students with a serious addiction problem is to accurately assess their needs and make the necessary referrals. Students who clearly need treatment services and who cannot succeed in the program because of their addiction should not be retained in the Job Corps program. If the TEAP Specialist’s assessment determines that a student’s substance use difficulties cannot be managed within the scope of Job Corps, the TEAP Specialist should document the assessment and confer with the CMHC. A formal recommendation is then offered to the HWM and the Center Director.

Use of reliable and valid instruments is often necessary to assess the history and level of alcohol and drug use among adolescents and young adults. You are cautioned to make sure that assessment measures are reliable and valid for the students in Job Corps and are the appropriate measures for adolescent students and not designed only for older adults. Examples of these instruments include:

¹ Harris, S. K., Louis-Jacques, J., & Knight, J. R. (2014). Screening and brief intervention for alcohol and other abuse. *Adolescent medicine: state of the art reviews*, 25(1), 126-156.

- **SASSI family of instruments**—A two- page test that identifies adolescents and adults who suffer from substance misuse and offers recommendations. Visit [The SASSI Institute](#) for further information as training is required to use these instruments.
- **Michigan Alcohol Screening Test (MAST)**—The [MAST](#) is in the public domain and available for download.
- **Drug Abuse Screening Test – 10 (DAST-10)**—The [DAST](#) is in the public domain and available for download.
- **National Institute of Drug Abuse (NIDA) Quick Screen**—The [NIDA Quick Screen test](#) is in the public domain and available for download.
- **The Cannabis Use Identification Test – revised (CUDIT-R)** —The [CUDIT-R](#) is in the public domain and available for download.

A formal assessment of risk of substance use problems also includes utilization of one’s own clinical judgment to determine and document not only the level of risk but also what interventions are warranted.

Intervention Services PRH 2.3, R5 (d)

Intervention services should be offered to students identified at an elevated risk for substance abuse. Students who self-refer or who are identified to be at risk through assessment tools can voluntarily participate in services. Students who test positive on entry are required to complete intervention services.

TIP: Make sure the information regarding your assessment process and recommendations as well as the student’s response is documented in the SHR. It can even be documented right on the assessment protocol itself.

42 CRF Part 2 governs how substance use information is disclosed and has more protections than HIPAA. These [regulations were revised in 2020](#) and you should familiarize yourself with these revisions. In addition to these federal confidentiality requirements, you should be familiar with your state laws regarding the sharing of drug testing results with a parent/guardian. If allowed, notification of a positive entry drug screen should occur (and be documented) to the parent/guardian of a minor student. Having the student notify their parent/guardian by telephone while you are in the room allows for this process to occur in a sensitive manner where you are available to answer questions for the parent/guardian. Notification should be documented in the SHR.

Intervention Planning/Strategies

The TEAP Specialist should design an intervention plan that addresses the student’s individual needs and includes appropriate strategies and activities to assist the student in understanding their substance use and how to abstain from such use. TEAP Specialists may focus on:

- Supporting drug-free students as well as at-risk students
- Emphasizing substance use awareness and consequences of using drugs or alcohol
- Assisting students to understand the patterns and processes that contribute to substance use
- Helping students set individual abstinence goals
- Developing healthy alternative behaviors to substance use

- Guiding students to develop positive support system

The TEAP Specialist should use a variety of strategies as part of the intervention plan and should incorporate relapse prevention strategies. These services should focus on behaviors that represent employability barriers and can be provided via group or individual sessions. Involvement in recreational activities should also be strongly encouraged or required when possible. Students also benefit from community support groups (e.g., [Alcoholics Anonymous](#), [Narcotics Anonymous](#), [Students against Destructive Decisions](#), [Smart Recovery](#), and [Adult Children of Alcoholics](#)). For rural areas that do not have ready access to face-to-face groups or for students in virtual learning status, many of these organizations have online support services as well.

All intervention services provided to students should be documented in the SHR. For groups, this should include topic of the group, the student's reaction to the information, and any other necessary clinical information. Individual sessions should also be documented in SHR and include the focus of the session as well as the student's response. There is no required format for these clinical notes, although some TEAP Specialists utilize the SOAP format (meaning there are sections labeled subjective, objective, assessment and plan). See the [Sample Employability SOAP and BIRP Notes](#) for additional guidance.

Collaboration with the Center Mental Health Consultant (CMHC) for students with co-occurring conditions of mental health issues and substance use

Job Corps students sometimes have complex emotional and/or psychological issues that contribute to their alcohol or drug use. These students may have a behavioral health issue or co-occurring disorder, i.e., they have significant psychological problems in addition to their addiction. The TEAP Specialist and CMHC are encouraged to collaborate in the assessment of these complicated cases. Collaboration may also include co-facilitating groups for students with co-occurring disorders which utilizes the expertise of both the CMHC and TEAP Specialist. Some students may have significant substance use issues but could remain in Job Corps with additional support.

Additional outpatient substance abuse services may be warranted for those students who are identified during the assessment as at significantly higher risk for not completing Job Corps because of these substance use issues. Referral for outpatient substance use counseling is coordinated by the TEAP Specialist who can assist with locating a treatment provider, as well as facilitating the referral and ensuring the provider has the necessary referral information. This should also include periodically checking in with the students about their treatment as well as coordinating with the treating provider.

When a student leaves Job Corps because of substance use, the TEAP Specialist is required to make a referral to off-center addiction specialists as part of the separation process. This departure includes both ZT separations (for a positive suspicious screen or 45-day follow up positive drug test) or MSWRs for substance use issues.

Relapse Prevention

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 for students. These services should be designed to help students develop new skills and behaviors.

Part of preventing relapse is assisting the student in developing a plan to identify triggers and respond in healthy ways. Relapse prevention concepts should be integrated into all interactions with students. Following are some suggestions for supporting students who are at risk:

- Help students understand the relapse process
- Help students identify and handle high-risk situations; for example, how to deal with their first pass home or how to 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
- Help students learn new ways to structure their leisure time through recreation, leisure time activities, and other wellness activities
- Have students set goals and develop their own recovery plan that they can use while in Job Corps and when they leave the program
- Help students understand the importance of being drug free and the impact substance use will have on their future goals and employability

An important component of relapse prevention is provided during the Career Transition Period. At that time, the TEAP Specialist will assist students to remain substance free and to prepare them for entry into the workforce. The TEAP Specialist should provide students with information and strategies on how to deal with substance use situations in employment situations. Explain to students that the Job Corps drug policy is designed to prepare them for what they will encounter once they leave the program and join the world of work.

Job Corps students need to know and understand that employers conduct drug testing. Consider inviting employers to attend a presentation and talk to students about drug use in the workplace. Another idea would be to show students a list of companies who do pre-employment testing and do not retain individuals who test positive for drugs.

Drug and Alcohol Testing Policies and Procedures PRH 2.3, R5 (e)

Drug Testing

Job Corps has comprehensive and detailed drug testing policies and procedures. Testing categories, timeframes, and appropriate procedures, including chain-of-custody principles and the use of the nationally contracted laboratory, are discussed at length in [PRH 2.3, R5 \(e\)](#).

The Integrity of Drug Testing

It is critical to ensure, through appropriate collection procedures, that biochemical test results are accurate. Staff should ensure the integrity of the biochemical testing program by:

- Being properly trained in urine collection procedures and chain of custody.

- Providing a private area for specimen collection.
- Supervising the collection process and ensuring that there is strict adherence to chain of custody principles. For drug testing, chain of custody refers to 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. All urine toxicology screening should include use of the [Consent for Drug Screening Test and Chain of Custody Form](#) to document the collection process and adherence to chain of custody.
- Assessing and determining whether a medical explanation can account for a positive result. For example, opioids may be detected for a prescription pain medicine and stimulants may be detected for ADHD medication. In this case, the positive result would not be considered a true positive. The student would not receive intervention services and a 45-day retest would not occur. The process of making this decision should be documented in the SHR.
- Consulting with toxicology professionals, such as staff at the nationally contracted laboratory, if required.
- Referring all cases of a disputed test result to the Center Physician for appropriate action.
- Adopting procedures to decrease the likelihood of adulteration of the specimen, include:
 - Remove all cleaning products from the collection room area
 - Perform visual and temperature checks on all samples. The sample temperature should fall between 90.5°F and 99° F; visually the sample should appear free of possible contaminants
 - Turn off additional water sources in the immediate collection area, if possible
 - Place a bluing chemical in the toilet tank to color the water
 - Have the student wash (with water only) hands and clean under nails; hand the student a paper towel for hand drying before he/she provides the requested sample
 - 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

The above procedures constitute a supervised urine toxicology screening. If you believe the integrity of the collection process and chain of custody has been compromised (e.g., the student produced a sample whose temperature falls outside the recommended parameters), then an **observed** urine collection is recommended. An observed urine collection means that students

are directly observed providing a sample, and the observer watches the urine stream leave the body and enter the specimen cup.

All drug testing should be performed by the nationally contracted laboratory. The laboratory is responsible for supplying the center with all testing supplies and materials and providing test results to the center in accordance with DOL-specified parameters. At the request of the center, the nationally contracted laboratory may provide additional testing for substances which are not included in the current drug testing panel, such as synthetic cannabinoids. The center is then responsible for the cost of this testing. There should be a written SOP/COP that explains the consequence of testing positive for an illicit substance that is not on the standard drug panel.

Alcohol Testing

All centers have been provided with the Alcoblow breathalyzers to determine if there have been violations to the student conduct code. These are referred to as “safety” breathalyzers. Centers shall also have a secondary alcohol-detection method to use when there are health or safety concerns regarding alcohol consumption that provides a quantitative measure of the blood alcohol concentration (see [Information Notice 16-29 Instructions and Clarification Regarding Use of AlcoBlow Breathalyzers and Continued Use of a Secondary Alcohol Detection Method](#)).

Each center is encouraged to develop its own SOP/COP for when the secondary alcohol-detection method (typically a “medical” breathalyzer) are utilized, including when and how medical intervention is indicated. When the test is positive for alcohol, retests should occur until the BAC is consistently decreasing.

Alcohol test results should be provided to the student by the person who administered the test. All testing (whether negative or positive for alcohol) should be documented with results sent to the HWC to be placed in the SHR. 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.

Breathalyzers must be calibrated to the manufacturer’s required calibration schedule.

Staff Training Requirements for Alcohol Testing

Health and Wellness staff is responsible for training designated center staff, including documentation procedures. This training should be provided based on manufacturer-supplied materials.

Quarterly Alcohol Testing Reporting Procedures

Centers must submit a quarterly report on center alcohol testing ([PRH 5.1, R4](#)). This report must be submitted by the tenth day following the end of each quarter (i.e., January 10, April 10, July 10, and October 10). The Alcohol Screening Report is available on the [Data Submission](#) webpage.

Medical Separation with Reinstatement Rights (MSWR) for Substance Use Disorders

Job Corps does not provide drug abuse treatment or counseling. If a student has a severe substance use condition, and it is determined that the student's needs may best be met in a treatment setting, the student shall receive a MSWR from the Job Corps program and staff should provide a referral to an appropriate treatment provider or center.

The MSWR allows students with diagnosed substance use conditions to (1) obtain treatment outside of the Job Corps program and (2) return to Job Corps to complete his/her training within 180 days. To return to Job Corps, proof of treatment completion from a qualified provider must be received. However, no additional drug testing should occur for the student to resume their training. A MSWR for substance use conditions can only be given if the following conditions are met:

- The TEAP Specialist and Center Director agree that the student has a diagnosed substance use condition.
- There is a **documented** assessment of the student's diagnosed substance use condition by the TEAP Specialist in collaboration with the CMHC.

Students may also be granted a medical separation (without reinstatement rights). The Other Health Program Management section of this DRG provides more information on the types of medical separations.

The Center Director must approve all medical separations. The TEAP Specialist should include and document the following information with the Center Director's formal medical separation notification:

- **Diagnosis**—A narrative statement of the student's condition according to the most recent DSM diagnostic categories, including all relevant clinical information. A SPAMIS code must also be provided based on the International Classification of Diseases – Edition 10.
- **Functional Statement**—A clinical statement that includes a summary of clinical evidence and information about the student's functional ability and how they are not able to benefit from the training program at this time.
- **Escort**—A specific statement regarding the need for an escort to ensure that the student arrives safely at his/her destination.
- **Referral**—The substance abuse agency or services identified, and the actual referral arrangements made to assist the student. Before leaving the center, the student should sign a release of information form so that the TEAP Specialist can provide the agency with a referral summary and receive treatment information.

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.

Documentation

All services provided shall be documented in the SHR. See [PRH 2.3, R13](#) for more specific information. There are established clinical standards that should be met that include, using pen

for entries and then dating and signing each entry with your name and credentials. Centers frequently have a separate section in the SHR, for TEAP entries. If this is the case, then there should also be a brief note in the chronological section of the SHR indicating there is a TEAP note with date. The use of stamps or labels is encouraged as a time-saving measure.

Tobacco Use Prevention Program (TUPP)—PRH 2.3, R6

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. While they need not be a Health and Wellness staff member, the TEAP Specialist frequently functions in this role so they can integrate the TEAP and TUPP. If the designed TUPP Coordinator is not from Health and Wellness, then a process will need to be developed to ensure that notes from TUPP services are filed in the SHR given the TUPP Coordinator would not have access to the confidential medical record.

Centers must establish a tobacco-free environment for the majority of the center. Centers are encouraged to maintain an entirely tobacco-free environment, especially during the training day. Most centers only allow cigarettes and sometimes chewing tobacco in the tobacco use areas. Other tobacco products such as electronic nicotine delivery systems (e.g., e-cigarettes such as JUULs), cigars and vaping are not allowed in any form on center. The TUPP Coordinator is encouraged to obtain training in empirically established techniques to assist with tobacco cessation. The Office of Disease Prevention and Health Promotion lists [evidence-based information and recommendations related to Tobacco Use](#).

TUPP requirements:

- All buildings and center-operated vehicles must be tobacco free.
- Tobacco products must not be sold on center.
- If center operators choose to allow use of some 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 and federal law.
- Minors who use tobacco products shall be referred to the TUPP for mandatory services.
- All TUPP services provided should be documented in the SHR. This can be done in either the chronological section, a specially designated TUPP section or the TEAP section if the TEAP Specialist is also the TUPP Coordinator.

TUPP tips:

- Introduce the TUPP during CPP so that students understand the tobacco use policies and what types of tobacco products are allowed on center.
- Case management for tobacco cessation should be offered to all students who use tobacco products.

- Designated tobacco use areas should be located away from central locations thereby discouraging non-tobacco users from congregating with tobacco users and have proper receptacles.
- Staff should not use tobacco products in the presence of students.

Part 2: Health Services (PRH 2.3)

Student Introduction to Health Services—PRH 2.3, R1

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 TEAP Specialist 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.

Health and Wellness Program (Medical)—PRH 2.3, R2

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 ([Exhibit 2-4 Job Corps Basic Health Care Responsibilities](#)) 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.

Health and Wellness staff may identify students with substance use needs as well as educate them about health-related issues such as reproductive health, mental health issues, 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 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.

Oral Health and Wellness Program—PRH 2.3, R3

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.

Mental Health and Wellness Program—PRH 2.3, R4

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 Center Mental Health Consultant:

- Provides assessments and recommendations for Job Corps applicants.
- Coordinates a mental health promotion and education component for Job Corps staff and students.
- Utilizes an employee assistance program approach that includes short-term counseling, referral to center support groups, and crisis intervention services for students with mental health conditions.
- Makes recommendations for care management plans and accommodations for students with chronic mental health conditions.
- Assists students with chronic mental health conditions. Services may be documented on Mental Health Chronic Care Management Plans (MHCCMPs).

As the TEAP Specialist, you should set aside time each week to collaborate with the CMHC to provide services 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 CMHC.
- Provide direct support for students with co-occurring disorders or difficult cases.
- Collaborate with the CMHC in authorizing medical separations with/without reinstatement for drug- and alcohol-related diagnoses.
- Document case coordination in the SHR.

Family Planning Program—PRH 2.3, R7

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 TEAP Specialist 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 CMHC 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

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 below in Other Program Management section of this DRG. See the [Family Planning TAG](#) for additional guidance.

Healthy Eating and Active Lifestyles—PRH 2.3, R9

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. The TEAP specialist must serve on the HEALs Committee and actively attend meetings.

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 TEAP Specialist, you can affect students' health. To get involved with HEALs:

- Serve as PRH-required member of the HEALs committee.
- Plan training for other staff members on food addiction.
- Use your talents and interests to enhance the HEALs program as you see fit.

Basic Health Services Provided by Job Corps Centers—PRH 2.3, R11

Center operators are responsible for providing and paying for basic health care as detailed in [Exhibit 2-4 Job Corps Basic Health Care Responsibilities](#).

Providers may not bill third party payors, including Medicaid, for basic health services covered by the provider's subcontract.

Professional Standards of Care—PRH 2.3, R13

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 SHR. When writing notes, remember the phrase, "If it isn't charted, it didn't happen." Notes are typically in

the TEAP section and an entry must also be made in the chronological record indicating that the student was seen by you and referencing the note in the TEAP section. Notes should be completed in pen, signed and dated, and professional credentials should be included. Progress notes should include, at minimum, general information about the type of intervention as well as specific information as to how the student responded to the intervention.

Health Care Guidelines—PRH 2.3, R16

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 the Center Physician, CMHC, or Center Dentist, as appropriate, and 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 and Wellness staff and Health Care Guidelines that have changed shall be sent to the Regional Office for approval. Personal authorizations for non-health staff should be retained on center.

The [Health Care Guidelines TAG](#) includes Health Staff Treatment Guidelines, Non-Health Staff Symptomatic Management Guidelines, Chronic Care Management Plans, and Prototype Staff Authorizations.

Continuous Quality Improvement—PRH 2.3, R19

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 TEAP 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 intervention protocols.

Part 3: Other Program Management

PRH Chapter 2.0 Student Support Services

Disability Program—PRH 2.4

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 will have at least two Disability Coordinators, one within academics and one within the Health and Wellness Center (typically the HWM), 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 are outlined in [Form 2-03 Definitions and Documentation Requirements Related to Reasonable Accommodations](#) and on the [Job Corps Disability](#) website.

There may be times when the TEAP Specialist collaborates with the Disability Coordinator(s) to assist students with alcohol- and drug-related disabilities.

See the [Job Corps Disability](#) and the [Job Corps Learning Disabilities](#) websites for additional guidance

PRH Chapter 3.0 Student Training Services

Required Instruction for Health and Well-Being—PRH 3.4, R21

During the Career Development Period (CDP), students receive instruction on a variety of health topics including emotional and social well-being, depression, sexually transmitted infections, and nutrition and fitness. As part of your consulting and prevention role, you can teach the alcohol and drug portion of the wellness class and specifically indicate how alcohol and drug issues affect student employability in the workforce (e.g., the relation of drug use to job instability or how impaired decision making can affect one's employability). [PRH 3.4, R21](#) provides a list of training subjects for students.

PRH Chapter 5.0 Management Services

Reporting—PRH 5.1, R4

[Exhibit 5-2 Plan and Report Submission Requirements](#) provides a list of required health reports and due dates.

The TEAP Specialist is usually responsible for completing the Alcohol Quarterly Report and is available on the [Data Submission](#) page. Your HWM may ask you to provide input on other reports.

Sexual Assault Prevention and Response—PRH 5.1, R39

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 TEAP Specialist, you may serve on the SART committee or provide trainings/resources on sexual assault and substance use to both staff and students. The [Sexual Assault and Prevention TAG](#) is available for additional guidance.

Health Services Staffing—PRH 5.2, R3

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 [Exhibit 5-6 Center Health Services Staffing Requirements](#).

Center Safety and Security Standard Operating Procedures—PRH 5.3, R1

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., alcohol testing procedures, drug testing on suspicion, synthetic drug use, 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

Significant Incidents—PRH 5.4

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).

As the TEAP Specialist, you may be asked to provide written input related to a TEAP related emergency.

[PRH 5.4](#) provides information on management, reportable events, incidents requiring immediate contact with the appropriate regional office, and incidents that requires Occupational Safety and Health Administration (OSHA) notification.

Minimum Staff Qualifications—Exhibit 5-3

All staff must meet minimum education and licensure qualifications. As the TEAP Specialist, you must have a state-issued license or credential as a substance use professional in the state where the Job Corps center is located. If not, the center must request approval for a one-year terminal waiver from the National Office. No extensions will be granted and you must complete the process within that year. See [Exhibit 5-3 Minimum Staff Qualifications](#) for additional guidance.

Required Staff Training—Exhibit 5-4

All Job Corps employees are required to complete trainings when they begin employment, with some trainings, such as HIPAA, CPR/first aid, and bloodborne pathogens, etc., being repeated annually. [Exhibit 5-4 Required Staff Training](#) lists training requirements and frequency.

In addition to required training, all Job Corps employees are required to complete 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.

Additionally, all center staff members are required to complete the web-based prevention trainings on the SafetyNet, which **can** count towards the 5 hours of required adolescent growth and development training. These trainings include suicide prevention, violence prevention, and other safety topics.

FYI: SafetyNet trainings are located in Citrix (Citrix account is required)
Once inside Citrix go to <http://lms.jobcorps.org>.

- At the login page, enter your Job Corps Citrix email address and password
- Click on Training Catalog icon and search for "SafetyNet"
- Click on Job Corps SafetyNet Toolkit icon
- Click on Enroll icon
- Click on Access Item icon

PRH Chapter 6.0 Administrative Support Services

Enrollments, Transfers and Separations—PRH 6.2

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.

[PRH 6.2 Enrollments, Transfers, and Separations](#) provides information on enrollments, transfers, enrollment extensions, separations, medical separations, and re-enrollments.

Authorizations (Consent for Treatment)—PRH 6.5, R5

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 [Form 1-01 Job Corps 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 \geq 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. You should also make sure you follow state law regarding your legal reporting responsibilities related to duty to warn or report information and apprise your Center Director. The following can provide additional information:

- [PRH 6.5 Rights, R5. Authorizations \(Consent for Treatment\)](#)
- [Form 1-01 Job Corps Informed Consent to Receive Mental Health and Wellness Treatment](#)