

# **Health Care Guidelines/ Written Instructions**



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## INTRODUCTION

Health Care Guidelines (HCGs) provide information concerning accepted practices for managing common health problems and situations in Job Corps. The guidelines may be used as is or modified by the appropriate health care professional.

### Background and Need

Since most Job Corps centers only have the services of a health care provider<sup>1</sup> for a few hours each week, many health and non-health staff are called upon to assess medical, dental, and mental health problems, and even to offer treatment in the health care provider's absence. Thus, authorizations, health care guidelines, which include treatment guidelines (TGs) for health staff and symptomatic management guidelines (SMGs) for non-health staff, chronic care management plans (CCMPs), and medication protocols were introduced to help staff perform various health-related functions via specific written instructions. Modifications may be needed to meet individual state medical and nursing board regulations.

### Expected Benefits of Specific Written Instructions

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 non-health staff with direction for action, especially when a member of the health services staff is not available or not on center.
- Avoid unnecessary emergency transport and visits to the emergency department.

### Policy<sup>2</sup>

All health care guidelines must be approved and signed annually by the Center Physician, Center Mental Health Consultant (CMHC), or Center Dentist, as appropriate.

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<sup>1</sup> Health care providers include: the Center Physician, Nurse Practitioner, Physician Assistant, Dentist, or Mental Health Consultant.

<sup>2</sup> See [PRH-2: 2.3, R16 Health Care Guidelines](#).

Current signed and dated health care guidelines must be kept in the Health and Wellness Center (HWC).

Annually, each center shall submit a memorandum to the Regional Office indicating if any health care guidelines have been modified, or the guidelines have been adopted unchanged. Copies of any individual health staff authorizations and health care guidelines that have changed must be sent to the Regional Office for approval. Refer to [Exhibit 5-2, Plan and Report Submission Requirements](#) for reporting deadlines.

## Basic Concepts

This technical assistance guide (TAG) provides the following administrative tools:

1. **Treatment Guidelines and Symptomatic Management Guidelines** are directives that outline different points to consider and steps to take when the health or non-health staff is presented with a student's health problem. These guidelines specify the treatments to be administered or offered by a staff member. These guidelines also outline the steps to determine whether to refer a student to the Center Physician, off-site health professional, or emergency service.
2. **Authorizations** are directives that outline the limits of the health care activities that specific members of the staff are expected to perform in particular situations.
3. **Chronic Care Management Plans** are tools that have been developed to provide a systematic approach for the treatment of chronic diseases.
4. **Medication Protocols** include both prescription and non-prescription medications used to treat common medical, mental health, and oral health conditions in a cost-effective manner.

## HEALTH CARE GUIDELINES

Health care guidelines (HCGs) are written directives that must be followed, especially when the health care provider is not present. This ensures that the health care provider knows and approves of how the staff will handle a problem. HCGs should include the following:

- A signature and date when the guidelines were last reviewed; review treatment guidelines at least once a year at the time of contract anniversary for contract centers and at the beginning of the program year for civilian conservation centers (CCCs), as well as when there is a health care provider change, to keep current.
- A signature by all responsible persons (e.g., Center Physician, Center Dentist, CMHC, Health and Wellness Directors (HWD) as appropriate).
- Clear and concise directions describing how and who is to handle the problem.

### The Process of Review and Approval

The health care provider and HWD, as appropriate, may adopt as written or modify any or all of the guidelines in this basic set. If all guidelines are adopted unchanged, submit electronically the memorandum and any new/amended personal authorization (see [Authorizations section](#)) for all nursing staff and dental staff (hygienists and assistants) to the Regional Office Project Manager and Nurse Specialist. Refer to the memorandum and personal authorization information on the [Job Corps Health and Wellness website](#) for more information.

If additional guidelines are created or guidelines are modified, submit electronically to the Regional Office Project Manager and Nurse Specialist. The electronic submission should include:

- Highlight all changes.
- Attach the created guidelines (if applicable) for review.

Contract centers should send this entire package to the Regional Office for review annually. CCCs will send the review package through agency channels. The Regional Nurse Specialist will review and recommend approval or modifications.

### Treatment Guidelines (TGs)

The TGs for Health Staff are designed specifically to prescribe the most current and cost-effective medical and behavioral treatments for commonly encountered medical, dental, and psychological diagnoses seen in the Job Corps student population.

The health care provider should establish a diagnosis before the applicable TG is implemented. The person implementing a TG must have an authorization to do so (see [Authorizations section](#)).

Before administering any recommended medication, the student should be asked if he/she is allergic to that medication. Ensure this is the correct student receiving the medication. If possible, also check the student’s health record (SHR) for similar information. If the student is allergic, refer to the alternate treatment in the TG or consult the Center Physician for guidance.

Medications administered as a single dose documented in the progress notes or prescribed over time must be carefully documented in the SHR on the medication administration record (MAR). The MAR should include dose, route of administration, frequency of administration, and duration of therapy. All medication orders should be documented and signed by the Center Physician or advanced practice clinician (NP/PA).

In addition, any necessary follow-up plan should be detailed in the SHR.

Such notes should be legibly signed by the administering person and may refer to the specific treatment protocol being used.

The following list constitutes a basic set of [treatment guidelines](#) for a center's health staff.

TREATMENT GUIDELINES			
Medical	Mental Health	TEAP	Oral Health
<ul style="list-style-type: none"> <li>• Acne</li> <li>• Allergic/Contact Dermatitis</li> <li>• Asthma</li> <li>• Bacterial Vaginosis</li> <li>• Bites and Stings</li> <li>• Burns</li> <li>• Candida (Yeast) Vulvovaginitis</li> <li>• Chlamydia Infection</li> <li>• Conjunctivitis</li> <li>• Constipation</li> <li>• COVID-19</li> <li>• Depo-Provera</li> <li>• Diabetes (Type I/II)</li> <li>• Dysmenorrhea</li> <li>• Emergency Contraception</li> <li>• Emergency Response Equipment and Supplies</li> <li>• Fever</li> <li>• Fractures</li> <li>• Frostbite</li> <li>• Fungal Skin Infections</li> </ul>	<ul style="list-style-type: none"> <li>• Anxiety Disorders (Including Panic and Phobic Disorders)</li> <li>• Attention-Deficit/Hyperactivity Disorder (ADHD)</li> <li>• Depression/Bipolar Disorder</li> <li>• Post-Traumatic Stress Disorder (PTSD) or Acute Stress Disorder</li> <li>• Psychotic Disorders</li> <li>• Suicidal Threats and Behavior</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol or Drug Use Behavior</li> <li>• Intranasal Narcan for Suspected opioid Overdose</li> <li>• Nicotine Replacement Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Avulsed Tooth</li> <li>• Oral Bleeding</li> <li>• Oral Infection</li> <li>• Oral Pain</li> </ul>

<ul style="list-style-type: none"> <li>• Gastroenteritis/Enteritis</li> <li>• Genital Herpes Infection</li> <li>• Gonococcal Infection</li> <li>• Headache</li> <li>• Head Injury (Closed Head Trauma)</li> <li>• Heat Injuries</li> <li>• Hypertension</li> <li>• Impetigo</li> <li>• Infectious Mononucleosis</li> <li>• Infective Endocarditis Prophylaxis Prior to Dental Procedures</li> <li>• Influenza</li> <li>• Insomnia</li> <li>• Intranasal Narcan for Suspected Opioid Overdose</li> <li>• Lacerations</li> <li>• Lyme Disease</li> <li>• Muscle Injury</li> <li>• Nicotine Replacement Therapy</li> <li>• Nocturnal Enuresis</li> <li>• Ocular Injuries</li> <li>• Oral Herpes Infection</li> <li>• Otitis Externa</li> <li>• Otitis Media</li> <li>• Pap Smear Abnormalities</li> <li>• Pelvic Inflammatory Disease (PID)</li> <li>• Pneumonia and Bronchitis</li> <li>• Pubic Lice (Pediculosis Pubis)</li> <li>• Scabies (Sarcoptes scabiei)</li> <li>• Seizure Disorder</li> <li>• Sexual Assault</li> <li>• Sprains/Dislocations</li> <li>• Syphilis (Primary and Secondary)</li> <li>• Trichomonas Infection</li> <li>• Tuberculin Skin Testing and Latent Tuberculosis</li> <li>• URI, Pharyngitis, Sinusitis</li> <li>• Urinary Tract Infection (UTI)</li> <li>• Warts (Common)</li> <li>• Warts (External Genital)</li> </ul>			
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## Symptomatic Management Guidelines (SMGs)

The SMGs for non-health staff are intended to assist non-health staff during hours when no health staff are present on center. They provide guidance on how to handle common symptoms without expecting the non-health staff to make a diagnosis.

SMGs also suggest parameters to follow about when to refer the student urgently to the on-call health staff or, if they are not reachable, to a local emergency response team or urgent care center. At the direction of the on-call health staff, a stabilized student may also be referred to the next open appointment time at the HWC. If the student’s condition deteriorates prior to that time, this decision can always be changed.

At a minimum, SMGs can be found in the HWC, residential, security, and recreation areas on center.

Whatever action is taken/not taken should be documented in writing and forwarded to the HWC the following day for inclusion in the SHR (date, times, symptoms, over-the-counter medications given, person(s) contacted, and outcome). If the on-call wellness staff person is contacted, this must also be documented in the SHR.

If the student is transported off center for care, appropriate center staff should be notified promptly (nursing staff, Center Physician, CMHC, and/or Center Dentist). Consider notifying a family contact with the student’s permission. Notification is required if the student is a minor. If it is a serious event, also notify the Center Director. All actions taken must be clearly documented in the SHR.

The following list constitutes a basic set of [SMGs](#) for a center’s non-health staff.

SYMPTOMATIC MANAGEMENT GUIDELINES			
Medical	Mental Health	TEAP	Oral Health
<ul style="list-style-type: none"> <li>• Abdominal Pain</li> <li>• Asthma</li> <li>• Burns</li> <li>• Cold and Sinus Congestion</li> <li>• Constipation</li> <li>• Coughing and/or Difficulty Breathing</li> <li>• COVID-19</li> <li>• Diarrhea and Nausea</li> <li>• Earache</li> <li>• Eye Injuries</li> <li>• Fever</li> <li>• Fractures</li> <li>• Frostbite</li> <li>• Headache</li> <li>• Head Injury</li> <li>• Heat Injuries</li> </ul>	<ul style="list-style-type: none"> <li>• Behavior Changes/ Unusual Behavior</li> <li>• Suicide Behavior or Threats</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol or Drug Use Behavior</li> <li>• Intranasal Narcan for Suspected Opioid Overdose</li> </ul>	<ul style="list-style-type: none"> <li>• Knocked-out Tooth</li> <li>• Oral Bleeding</li> <li>• Oral Pain</li> </ul>



<ul style="list-style-type: none"><li>• Intranasal Narcan for Suspected Opioid Overdose</li><li>• Lacerations</li><li>• Menstrual Cramps</li><li>• Muscle Injury</li><li>• Nosebleed</li><li>• Rash</li><li>• Seizure Disorder</li><li>• Sore Throat</li><li>• Sprain/Dislocation</li><li>• Vomiting</li></ul>			
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**Non-health staff should NOT attempt to follow TGs unless a signed and dated authorization exists for the non-health staff member.**

### **Training Requirements**

New non-health staff members must receive training in the use of SMGs within their first 90 days of employment and reviewed annually. New health and wellness staff members must receive training in the use of TGs within their first 90 days of employment. See [Exhibit 5-4, Required Staff Training](#).

## AUTHORIZATIONS

Authorizations are directives that outline the limits of the health care activities that specific members of the staff are expected to perform in particular situations.

### Health and Wellness Staff

The health care providers will specify which tasks each health staff member is authorized to perform. All health staff members will have personal authorizations on file in the HWC and in his or her personnel record.

Personal Authorizations for Health Staff (NP/PAs, nurses, dental hygienists, and dental assistants) procedures include:

- Complete personal authorizations within 15 days of hire. Must be submitted to the Regional Office and Nurse Specialist.
- Copies should be kept in a binder in the HWC, in personnel folder for each individual.
- These must be completed annually with the memorandum. Annually, submit authorizations only for changes made. If no changes were made and there were no staff changes, merely note that no changes were made in the memorandum.

### Non-Health Staff

The health care providers will specify which tasks each non-health staff member is authorized to perform after proper training. A copy of each non-health staff member's [personal authorization](#) must be filed in his/her personnel record.

Personal Authorizations for Non-Health Staff procedures include:

- The center should also have signed personal authorizations for each non-health staff person. These remain on center.
- These are only revised when a staff person changes positions on center.
- Complete personal authorizations within 15 days of hire.
- Copies should be kept in: 1) a binder in the HWC, in personnel folder for each individual and 2) in the dormitory for residential staff.

## CHRONIC CARE MANAGEMENT PLANS (CCMPS)

Chronic diseases have a major impact on employability as well as morbidity and mortality of Job Corps students. [PRH 2: 2.3, R2 \(b3\)](#), Health and Wellness Program states, "Students identified as having chronic health problems during the cursory or entrance physical examination must be monitored as directed by the Center Physician or other appropriate center health-care provider." [Chronic care management plans \(CCMPs\)](#) are tools that have been developed to provide a systematic approach for the treatment of chronic diseases. CCMPs have been developed for the most common chronic diseases and disorders found in the Job Corps student population.

All chronic management must be documented in the SHR on the progress record (SF600) or on the CCMP. If using the CCMP this must be filed in the SHR and not maintained in a binder.

Student Fact Sheets	Provider Health Questionnaire	CPP Guidelines	Flow Sheets	Other
Asthma Body Weight Diabetes Epilepsy HIV Hypertension Sickle Cell Sleep Apnea Tobacco Cessation	General Health Asthma Diabetes HIV Hypertension Obesity Seizure Disorder Sickle Cell Sleep Apnea Substance Use	Asthma Diabetes HIV Hypertension Obesity Seizure Sickle Cell Sleep Apnea Tobacco Cessation TEAP	Asthma Diabetes HIV Hypertension Obesity Seizure Sickle Cell Sleep Apnea Tobacco Cessation	CCMP Guidelines for CDP and CTP for Medical  Xerostomia (Chronic Dry Mouth) CCMP
ADHD Anxiety Disorders Autism Spectrum Disorders Bipolar Disorders Borderline Personality Disorders Conduct Disorders Depressive Disorders Intermittent Explosive Disorder Obsessive Compulsive Disorders Oppositional Defiant Disorder Panic Disorders Post-Traumatic Stress Disorder Schizophrenia Tourette Syndrome	ADHD Anxiety Disorders Autism Spectrum Disorders Bipolar Disorders Borderline Personality Disorders Conduct Disorder Depressive Disorders Intermittent Explosive Disorder Obsessive Compulsive Disorders Oppositional Defiant Disorder Panic Disorders Post-Traumatic Stress Disorder Schizophrenia Tourette Syndrome			

## MEDICATION PROTOCOLS

Medications should be stored and dispensed/administered in accordance with federal and state practice acts/laws. The appropriate TGs for Health Staff should be followed. It is the responsibility of the Center Physician and HWD to determine the security, accessibility, appropriate storage, and adequacy of medication supplies.

Medications should be purchased through a government supply center, such as the Health and Human Services Supply Service Center (HHS SSC), whenever possible.

Refer to the required Prescribed Control, Prescribed Non-Control and OTC SOPs [[PRH Exhibit 5-1](#)] for further guidance, center policies and procedures listed on the [Medication Management](#) webpage.

See PRH Chapter 2: Student Support Services, [2.3 Health Services, R14. Medication Management](#) and [Appendix 203 Medication Management Guidelines](#) for more information.