Family Planning



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OVERVIEW

This technical assistance guide (TAG) provides guidance to centers in developing a family planning program that incorporates prevention, education, and counseling, as well as clinical care for pregnant students.

For parents, the birth of a child can interfere with schooling, training, and the attainment of career goals. Low-income mothers often face considerable obstacles maintaining employment and advancing in their careers.

Whether the pregnancy is planned or unplanned, it is necessary that each center develop a multidisciplinary approach to address the unique and complicated issues that arise with each student's pregnancy.

Ideally, Job Corps students would not engage in sexual behavior during their time on center and would instead focus on career and education goals; however, this expectation is not always realistic. Centers should encourage students to delay sexual activity and to focus on reducing the risk of unintended pregnancy and sexually transmitted diseases (STDs).

Job Corps Policy

The Job Corps Policy and Requirements Handbook (PRH-2: 2.3, R7, Family Planning Program), states that a family planning program, consisting of counseling, health promotion activities, and medical services, including birth control, must be provided to all students on a voluntary basis. The Center Director must appoint a staff member (i.e., the Family Planning Coordinator) to implement and monitor the program. Students who are pregnant and/or experiencing pregnancy-related medical conditions shall be afforded the same access to medical services, leave, and medical separation with reinstatement rights (MSWR) as any other student experiencing a medical condition, unless otherwise provided by law.

Pregnancy-related services are outlined in PRH-2: 2.3, R7 (c, d), Family Planning Program.

Parental notification requirements are outlined in PRH-2: 2.3, R7 (e) Family Planning Program.

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FAMILY PLANNING COUNSELING AND HEALTH PROMOTION ACTIVITIES

The family planning program should provide accurate, up-to-date information to students about human sexuality, reproduction, contraception, and STDs. This information should be delivered throughout a student's stay, within various contexts, and reinforced over time. Centers should establish community linkages (e.g., local Planned Parenthood or public health department specialty clinics) to assist in supporting and reinforcing family planning education. Education should take place during the following times:

- Introduction to Center Living—During the health and wellness orientation segment of new student orientation, students should be made aware that (1) family planning and reproductive health services are free and available to all students on a voluntary basis; and (2) confidentiality and privacy are maintained.
- During Career Development Period (CDP)—PRH-3: 3.4, R21 Required Instruction for <u>Health and Well-Being</u>, requires that students receive education on <u>relationships and</u> sexuality, reproduction and birth control, and STDs during CDP.
- At Health and Wellness Center (HWC) visits throughout a student's day—Students will
 receive information on sexuality, human reproduction, family planning, and STDs from the
 center health and wellness staff. Every HWC encounter is a potential opportunity to assess
 and provide reproductive services.
- Any time a student receives TEAP services—The use of alcohol and drugs is an
 important factor in unwanted pregnancy and the acquiring of STDs. The TEAP Specialist or
 guest educators should provide information regarding the importance of being drug and
 alcohol free to all students during center wide training and to at-risk students during group
 education sessions.

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FAMILY PLANNING MEDICAL SERVICES

Family Planning History and Assessment

All students will receive an assessment of family planning educational, counseling, and medical needs during the cursory health evaluation/medical history and entrance physical examination. This history and assessment, which should be conducted in private by health and wellness staff, may include the student's previous use of contraception and condoms, STDs, pregnancies and births, sexual orientation, number and gender of sexual partners, and history of previous sexual abuse and/or assaults.

Access to Birth Control

Based on the assessment, the HWC will determine the most appropriate reproductive health services. Several contraceptive options exist for students, including hormonal contraception, barrier methods, and long-acting reversible contraceptives (LARC). IUDs are no longer contraindicated in nulliparous adolescents. Students should be encouraged to use the most effective contraceptive method that fits their needs. Students should also be encouraged to use a condom every time they have sex to prevent STDs. The Food and Drug Administration (FDA) provides a Birth Control Guide on the effective use of contraceptives. This guide can be given to students or displayed in the examination rooms.

Centers are encouraged to offer all categories of contraceptives (i.e., hormonal, barrier methods, and LARC), either on or off center. If an off-center clinic is used, the center should ensure that students have birth control options available (e.g., condoms, birth control pills) while waiting for their appointment. Referral feedback should be received from the clinic to which students are referred. Centers should have a method of follow up to ensure students receive ongoing care and refills (e.g., 90-day reminders for Depo Provera, monitoring for LARC). Centers are encouraged to offer emergency contraceptive options.

Students may decline contraception during the entrance physical examination; however, they may reconsider their choice at a later time. Every HWC visit provides an important opportunity to assess students' sexual behaviors and contraceptive needs. The Family Planning Coordinator should ensure that all students using contraception are monitored for adherence. Alternative contraceptive methods should be encouraged for those having difficulty with their current method. All clinical services must be properly documented in the student health record (SHR).

Pregnancy Testing and Follow Up

A urine pregnancy test is performed within 48 hours of arrival on center. A pregnancy test can also be administered anytime at the student's request or as ordered by a healthcare practitioner.

The <u>Pregnancy Test Request Form</u>, located at the end of this TAG, provides a systematic approach for counseling a student who requests a urine pregnancy test. The <u>Pregnancy Test—Post-Test Counseling form</u>, located at the end of this TAG, provides an outline for counseling a student, based on the results of her pregnancy test. These forms allow for an interactive process between the student and the health and wellness staff to discuss the important issues including the initial reason for the request, a negative pregnancy result, and a positive

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pregnancy test result.

A pregnant student should be referred to the Center Physician/Nurse Practitioner (NP) as soon as possible. The Center Physician/NP should assess for health status, medications, and referral. A student who is not pregnant should be counseled about contraceptive options.

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WORKING WITH A PREGNANT STUDENT

Counseling the Student Whose Pregnancy Test is Positive

The Family Planning Coordinator or designee counsels the pregnant student as soon as possible after the pregnancy is identified. Counseling may involve more than one session and should include the expectant father, if available.

When pregnancy is identified, the student should be informed of her options: (1) carry the pregnancy to term, or (2) terminate the pregnancy (depending upon the gestational age). If she decides to continue the pregnancy, she must then consider her plan for the infant once it is born: (1) care for the baby herself or with her family, (2) place the baby for adoption, or (3) seek foster care. The Family Planning Care Management and Separation Plan, located at the end of this TAG, provides a concise, step-by-step outline for working with the pregnant student.

Parental Notification of Minors

State laws vary regarding notification of parent/guardian in the case of a pregnant minor. If required by applicable state laws in which the center is located, the center shall notify the student's parent/guardian of her pregnancy if she is a minor, and if required by applicable state law, inform the student of this requirement prior to the disclosure. If you are uncertain of your state laws, your public health department is a good resource.

Supporting the Pregnant Student Who Chooses to Continue Her Pregnancy

Prenatal Medical Care

A qualified obstetrical/gynecological provider should provide pregnant students with prenatal care. Care may either be provided by the Center Physician (usually through his or her private office or clinic) or, more likely, by an off-center health care facility or physician. The center shall identify available community health/social resources and services, and will make arrangements for transportation for the purpose of obtaining such resources and services consistent with PRH-6: 6.7, R9 (d), Local Transportation. In lieu of the center providing transportation, the center may approve a student's request to be transported by a friend, partner or family member. Centers should assist uninsured students in obtaining Medicaid or alternative health insurance.

The Center Physician, in conjunction with an obstetrical/gynecological provider and the student, will agree upon a care management plan that takes into account the health and safety of the pregnant student before and after childbirth.

Prenatal vitamins should be prescribed as soon as pregnancy is confirmed. Prenatal care should include all examinations, laboratory work, and ultrasounds that are the standard of care for the community. The health and wellness staff will maintain close communication with the obstetrical/gynecological provider and be apprised of any concerns regarding the student's care. Documentation of prenatal care visits and care management should be included in the SHR.

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Prenatal Education

Pregnant students should receive information on the anatomy and physiology of pregnancy; common discomforts of pregnancy and common measures to help alleviate these symptoms; effects of alcohol, smoking, and prescription/non-prescription drugs on fetal development and pregnancy; danger signs of pregnancy complications; nutrition and prenatal vitamins; prenatal and postpartum depression and anxiety; labor and delivery; and parenting (e.g., car seat safety, breastfeeding, and child development). The Family Planning Care Management and Separation Plan, located at the end of this TAG, provides a list of education topics.

This information might be offered through the center's Health and Wellness Program, counseling, and by local resources such as the health department or community hospital. Written materials should also be made available to the student. Enrolling the student and her partner in prenatal classes at a local clinic or hospital is encouraged.

Throughout the pregnancy, designated health and wellness staff should provide pregnant students with information related to family planning. It is never too soon to discuss contraception since a goal of pregnancy management is to reduce the incidence of subsequent unplanned pregnancies.

Prenatal Counseling

Counseling is intended to help pregnant students and significant others cope with the rush of feelings that accompany pregnancy. Some students or couples will need assistance adapting to the pregnancy. Counseling should include a discussion of:

- How the student will cope with the new role of parent
- How the child will be supported
- Whether the parents will live together/marry or not; and if not, how they will manage as single or absent parents
- Recognizing prenatal/postnatal anxiety and depression
- Locating new-parent support groups
- Parenting styles and child development

In cases where a student appears to be coping poorly despite counseling, a referral for a mental health evaluation should be made to the Center Mental Health Consultant (CMHC). If serious emotional problems are identified that could impact the well-being of the student and her child, the CMHC should recommend MSWR from Job Corps and referral for more comprehensive treatment.

Preparing for Separation

Students who are pregnant and/or experiencing pregnancy-related medical conditions should be afforded the same access to medical services, leave, and MSWR as any other student experiencing a medical condition. The Center Physician and/or obstetrical/gynecological

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provider and the pregnant student will agree upon a written care management and separation plan. The plan needs to be a flexible, working document. The competing factors that need to be considered include:

- Completion of program prior to delivery is advantageous, if possible
- A student's plan for delivery location will influence how long she can remain on center due to recommended restrictions on travel for pregnant women nearing term
- Women with complications of pregnancy or risk factors for preterm birth or birth complications may need to separate from the program earlier upon the recommendation of their obstetrical/gynecological provider (<u>Family Planning Care Management and Separation Plan</u>)

Continuity of Care

Arrangements for the transfer of care to a provider where the student will give birth should begin at the time the pregnancy is diagnosed. The Family Planning Coordinator is responsible for ensuring that the pregnant student is referred to a provider in her home community for continuation of prenatal care and delivery of the infant. Referral is based on the student's preference and may be made to a maternal and child health clinic or to a private physician. The Center Physician should assure the maternal and child health clinic or private physician that the student is currently receiving quality prenatal care and that adequate records are being kept and will be forwarded at the time of referral. The maternal and child health clinic or private physician should be kept informed of any complications during the prenatal course.

Medical Separation with Reinstatement Rights (MSWR)

At the time of separation, a written consent should be obtained for the release of the appropriate counseling and health information to be forwarded to her designated health care provider. After the student leaves the program, Job Corps is not responsible for her medical care and the associated costs.

Prepare for Student's Return to Job Corps

It is often difficult for students to return to Job Corps after having a baby. Job Corps staff can optimize a student's chances for returning through:

- Helping students identify services for childcare either on center or in the community.
- Encouraging students to come back to Job Corps. As with any MSWR, students should receive monthly calls.
- Applying for an extension to the MSWR, if applicable. To apply for an extension, center staff
 must submit a request to the Regional Office accompanied by supporting documentation
 from the student's health care provider verifying that extension of leave is medically
 necessary.

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Supporting Students with Young Children

After returning to Job Corps, parents may struggle with balancing the demands of new parenthood with their training. Centers are encouraged to provide resources to help new parents succeed, such as:

- Support groups and mentors—Mom-to-mom and peer-support groups are an effective
 way to ease young people through the transition into parenthood. A staff facilitator with
 children and/or experience working with young parents can serve as a mentor.
- Lactation support—It is important that Job Corps centers have a room available for new mothers, both staff and students, to express breast milk. Section 4207 of the Patient Protection and Affordable Care Act (PPACA) requires that employers "provide a reasonable break time for an employee to express breast milk for her nursing child for one year after the child's birth each time such employee has need to express milk." Moreover, employers must "provide a place, other than a bathroom, that is shielded from view and free from intrusion from co-workers and the public" for nursing employees. Although not required by law, a refrigerator to store expressed milk and a sink are helpful for mothers who choose to express breast milk. The United States Breastfeeding Committee provides a comprehensive guide to existing state and federal breastfeeding laws.
- Resources for fathers—Programs for new parents often focus on mothers, but a father's involvement is very important for childhood development. The <u>National Responsible</u> <u>Fatherhood Clearinghouse</u> provides information on fatherhood resources and programs.

Supporting the Pregnant Student Who Chooses Adoption and/or Foster Care

Any student who expresses a desire to relinquish her baby for adoption should be referred to a licensed adoption agency in her home community or wherever she chooses to deliver the baby. The Family Planning Coordinator should be aware of the adoption laws in the state where the student intends to deliver and about the rights of the father.

The center should help the student contact the local agency responsible for foster care if the student wishes to explore that as an option.

Supporting the Pregnant Student Who Chooses to Terminate Her Pregnancy

If a student indicates that she is considering termination of her pregnancy, she should be provided with information, counseling, and referral to a community resource that can discuss her options and provide information on payment resources. The Family Planning Coordinator should be aware of the laws in his/her jurisdiction pertaining to pregnancy termination.

If a student wishes to terminate her pregnancy, the center shall identify available community health resources and will make arrangements for transportation consistent with <u>PRH-6: 6.7,R9 Local Transportation</u>. In lieu of the center providing transportation, the center may approve a student's request to be transported by a friend, partner, or family member.

The center shall not pay for an abortion unless the pregnancy is the result of rape or incest or unless a physician has certified that the student suffers from a physical disorder, injury, illness,

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or condition that places her in danger of death unless an abortion is performed.

A student that is experiencing a pregnancy-related medical condition may be placed on paid administrative leave in accordance with Exhibit 6-1 Duty-Pay-Leave Status Chart, if necessary. Leave may be unnecessary, and students may be able to return directly to the center after an early, uncomplicated pregnancy termination.

Following the procedure, the student should be provided with counseling to resolve any emotional difficulties. The pregnant student's significant other may also be provided with support (when appropriate) to cope with and accept the decision to terminate the pregnancy. Contraceptive options should be explored and initiated to prevent future unwanted pregnancies.

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APPENDIX

PREGNANCY FORMS

Pregnancy Test Request Form
Pregnancy Test—Post-Test Counseling
Family Planning Care Management and Separation Plan

Pregnancy Test Request Form

Naı	me:			Student ID #	# :		
Prior to the pregnancy test, we request that you answer the following questions:							
1.	. Date last menstrual period began:						
2.	Was this last period no	ormal for you?	☐ Yes	□ No			
3.	. Are your periods regular (e.g., occur every 21-35 days)? Yes No						
4.	Are you currently using	g birth control?	☐ Yes	□ No			
	If yes, identify what birth control method you are using:						
5.	Have you had any syn check all that apply:	າptoms that wou	lld make you su	spect that you	are pregnant? Please		
	☐ Missed Period(s)	☐ Brea	ast tenderness	☐ Nau	usea/vomiting		
6.	How are you feeling to	day? Check all	that apply				
	☐ Happy☐ Excited☐ Hopeful☐ Worn	ту 🗆	Scared Confused Sad		ease explain):		
	Have you ever been p			□ No			
	. Number of pregnancies: Births: Miscarriages: Abortions:						
J.	9. If you are pregnant now, how would this affect your life?						
10.	10. Do you want to be pregnant right now? ☐ Yes ☐ No ☐ I'm not sure						
	FOR STAFF ONLY						
	Test Date	☐ Nega	Test Results ative Positi	ve	EDD		
Stu	dent Signature	Healt	h and Wellness St	aff Signature	Date		

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Pregnancy Test—Post-Test Counseling Student ID #: Name: Review student's **Pregnancy Test Request Form**. **Negative Pregnancy Test** If student responded "NO" to question 10, "Do you want to be pregnant right now?" discuss with the student: ☐ Birth control options/methods ☐ Student's birth control method perceptions/myths ☐ Past problems with birth control method ☐ Schedule follow-up appointment for birth control prescription If student responded "YES" to question 10, "Do you want to be pregnant right now?" discuss with the student: ☐ Reasons for wanting child ☐ Financial ability to support child ☐ Attitude of potential father ☐ Attitude of other support people ☐ Student's progress in Job Corps program (include benefits of waiting to start a family until after completion of the Job Corps program) ☐ Recommend peer counseling from other single parent students Physician appointment for further pre-pregnancy evaluation and counseling ☐ Referral to parenting program, if available If student responded "I'M NOT SURE" to question 10, "Do you want to be pregnant right now?" discuss with the student: Benefits of waiting to start a family until after completion of the Job Corps program ☐ Birth control options/methods ☐ Past problems with birth control method ☐ Student's birth control method perceptions/myths ☐ Schedule follow-up appointment for birth control prescription **Positive Pregnancy Test** Assist student to explore feelings regarding: ☐ Pregnancy ☐ Reasons for having a child at this time ☐ Financial ability to support child ☐ Attitude of father of the child and other support systems Discuss pregnancy options: ☐ Choices as it pertains to pregnancy ☐ Continue pregnancy and parent the baby ☐ Continue pregnancy and consider adoption and/or foster care ☐ Terminate pregnancy If student chooses to continue pregnancy or is unsure, referral to: (check all that apply) ☐ MD assessment appointment ☐ Prenatal Care Appointment ☐ Prenatal Education ☐ CMHC ☐ WIC or Health Department ☐ Peer Counseling If student chooses to terminate pregnancy, referral to: (check all that apply) ☐ Pregnancy Termination Counseling ☐ CMHC ☐ MD assessment appointment

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Health and Wellness Staff Signature

Date

Student Signature

Family Planning Care Management and Separation Plan

Name: _		S	udent ID#:		
DOB: _	LMP:		EDD:		
Parent/G	uardian of minor notified if require	d by state?	(circle one)	Yes	No
Obstetri	cal/Gynecological Provider Info	rmation			
Name: _					
Address:					
Phone N	umber:	Fa	x Number:		
Date and	Time of First Appointment:				
Documer	ntation Received? (circle one)	Yes No			
student 1	er appointment form and signed to appointment. e any restrictions by OB/GYN? (cir.			ds form	sent with
		·			
	plain:Ongoing Prenatal Appointments: _				
Insurance	e Information:				
	et for the Pregnant Student ons: Initial and date when completed.				
IIIStructio	Job Corps Family Planning (PRH-2		 viewed with the st	udent.	
	Authorization for Release of Medic	•			DB/GYN provider.
	Health records sent to OB/GYN provider (e.g. lab results, Physical Exam and History forms, immunization records).				
	Release of Information obtained fo and Wellness Center.	r OB/GYN pro	ovider to release i	informatio	n to the Health
	Meeting scheduled with Family Pla Specialist to review PCDP, if applic	•	nator, Counselor,	and Care	er Transition
	Referrals made to Oral Health, TE	AP, and/or Cl	MHC as necessar	y.	

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Prenatal Education

Date	Education Provided	Source of Education (e.g. center staff, community resources, or OB/GYN provider)
	Anatomy and physiology of pregnancy including labor and delivery	
	Common discomforts of pregnancy and common measures to help alleviate symptoms	
	Signs and symptoms of pregnancy complications	
	Effects of alcohol, smoking, and prescription/non- prescription drugs on fetal development and pregnancy	
	Nutrition, including the need for prenatal vitamins	
	Prenatal care (e.g., purpose, importance, what to expect)	
	Need to report any pregnancy-related concerns to the Health and Wellness Center	
	Prenatal and postpartum depression and anxiety	
	Parenting (e.g., car seat safety, sleep safety, breastfeeding, and child development	
	Family planning for post pregnancy	
	Other (indicate):	
	Other (indicate):	

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Pregnancy Related Administrative Leave Record

Leave Date	Reason for Leave	Mode of Transportation	Return Date	Comments		
Separation Plan						
According to the PRH, students are medically separated when they are determined to have a pre-existing or acquired health condition that significantly interferes with or precludes further training in Job Corps, or the health problem is complicated to manage, or the necessary treatment will be unusually costly. Because of this requirement, a pregnant student will need to be medically separated if they are no longer able to fully participate in the program, just as a student with any other health condition.						
As long as my OB/GYN provider and the center physician are in agreement and I do not have any health-related conditions that would cause me to not fully participate in the Job Corps program, my decided upon planned separation date is:						
Separation Details						
Actual sepa	Actual separation date: Mode of Transportation:					
Peferral information:						

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No

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Yes

Date

Date

Documentation requirement for reinstatement given to student? (circle one)

Student Signature

Health and Wellness Staff Signature