

January 11, 2013

DIRECTIVE:	JOB CORPS PRH CHANGE NOTICE NO. 12-10
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TO: ALL JOB CORPS NATIONAL OFFICE STAFF
ALL JOB CORPS REGIONAL OFFICE STAFF
ALL JOB CORPS CENTER DIRECTORS
ALL JOB CORPS CENTER OPERATORS
ALL NATIONAL TRAINING AND SUPPORT CONTRACTORS
ALL OUTREACH, ADMISSIONS, AND CTS CONTRACTORS

FROM: ROBERT PITULEJ
Acting National Director
Office of Job Corps

SUBJECT: Policy and Requirements Handbook (PRH)
Chapter 5, Sections 5.2, 5.3, 5.4, 5.9, and 5-20; Exhibit 5-1; Exhibit 5.2;
Exhibit 5-3; and Exhibit 5.4; Chapter 6, Sections 6.3, 6.10, 6.11, and 6.12;
Exhibit 6-4; and Exhibit 6-5

1. Purpose. To revise and update the current PRH regarding the Health and Wellness Program.
2. Background. The Office of Job Corps established the Health-Care Cost Efficiency Workgroup to identify cost-saving strategies in health-care services. The workgroup consisted of Office of Job Corps staff, Job Corps Regional Office staff, representatives from Job Corps centers, managing corporate offices, and the United States Forest Service.

The PRH changes in this document are the results of carefully considered recommendations from the Health-Care Cost Efficiency Workgroup. Because changes will impact staffing levels, select Health and Wellness requirements have been restructured accordingly.

3. Explanation of Changes. Highlights of PRH changes are as follows:
 - a. PRH Chapter 5: Management
 - (1) Revised 5.2, Personnel, R4 (b) by adding a number 5 to outline policies surrounding staffing qualification waivers for Health and Wellness staff.

- (2) Revised 5.3 Staff Training, R2 (a) by adding the word “crisis” in front of “intervention techniques,” and adding “bullying prevention” and “violence prevention” to the sentence.
- (3) Revised 5.4, Personal Safety and Security, R4 (f) now reads, “Illegal drugs, unauthorized prescription drugs, and drug paraphernalia.”
- (4) Revised 5.4 Personal Safety and Security, R8 (a) by adding, “Staff shall be aware of and abide by any state laws regarding restraint and isolation.”
- (5) Revised 5.9 Facility Standards, R2 (d) to include private consultation office space for use by the center mental health consultant, dentist, physician, and TEAP specialist.
- (6) Revised 5.20 Occupational Safety and Health (OSH) Program and Written Plans, R8 (a) by changing “Consultant” to “Specialist” and changing “...should not be submitted...” to “...does not need to be updated...”

b. Exhibit 5-1: Standard Operating Procedures

- (1) Revised (e) by adding “for violence and drugs” to this Standard Operating Procedure.
- (2) Added “m. Applicant File Review Procedures” and “n. Reasonable Accommodation Process” to Standard Operating Procedures. For both, added “x” in Centers and Outreach/Admissions columns.

c. Exhibit 5-2: Plan and Report Submission Requirements

- (1) Revised Health Reports by changing “Health Services Program Description” to “Health and Wellness Center Annual Program Description.”
- (2) Revised Health Reports by deleting “Health Services Time Distribution.”
- (3) Revised Health Services Utilization Report by adding “X” under Centers column.
- (4) Revised Annual Plans by adding “Disability Accessibility Plan” with “Annually” under Frequency column, “6/30” under Due Date column, “Maintain On-Site” under Destination column, “Chapter 6” under PRH Reference column, and “X” under Centers column.
- (5) Revised Non-Recurring Reports by deleting “HIV Notification.”

d. Exhibit 5-3: Minimum Staff Qualifications

- (1) Updated primary duties and minimum qualifications language for the following positions:
 - i. Health and Wellness Manger (formerly Registered Nurse)
 - ii. Staff Nurse (formerly Licensed Practical Nurse)
 - iii. Center Mental Health Consultant (formerly Mental Health Consultant)
 - iv. Dentist
 - v. Dental Hygienist
 - vi. TEAP Specialist
- (2) Updated minimum qualifications language for:
 - i. Physician
- (3) Added the position, primary duties, and minimum qualifications for:
 - i. Consulting Psychiatrist
 - ii. Nurse Practitioner (NP)/Physician Assistant (PA)

e. Exhibit 5-4: Required Staff Training

- (1) In New Staff Orientation section, revised the “EEO, Civil Rights, including Religious Rights and Ban on Sexual Harassment, Code of Conduct and Ethics” bullet by adding “Anti-Bullying Policies” to sentence.
- (2) In New Staff Orientation section, deleted “Non-health Standing Orders.”
- (3) In New Staff Orientation section, renamed the “Privacy Rule” as “HIPAA,” and deleted the “X” in the Health Staff column. Added an “X” in the Yearly column (under Frequency). Added an “X” in Admissions Counselors and Career Transition Specialists columns.
- (4) In New Staff Orientation section, added “Crisis Intervention” bullet; added “X” in 1st 90 Days column and Yearly column (under Frequency), and added “X” in All Center Staff column (under Staff).
- (5) Moved “Disability Program” requirement from overall Training Requirement section to New Staff Orientation section as a bullet and adding an “X” in the 1st 90 Days column (under Frequency).
- (6) In Training Requirement section, changed language for CPR/First Aid from “certification” to “recertification.”

- (7) In Training Requirement section, “Health Standing Orders,” is now “Treatment Guidelines for Health Staff.”
- (8) In Training Requirement section, revised “Non-health Standing Orders” requirement by changing “Non-health Standing Orders” to “Symptomatic Management Guidelines for Non-Health Staff.”
- (9) In Training Requirement section, added “Proper Restraint Procedures” as a requirement, and added an “X” in the 1st 90 Days column (under Frequency) and the Security column (under Staff).

f. PRH Chapter 6: Administrative Support

- (1) Revised 6.3, R3 (a, 3) by removing “SF 93”
- (2) Revised 6.4, R4 (c, 5) by adding “substance use” to sentence
- (3) Revised 6.10, R1 by adding “(See Exhibit 6-4, Job Corps Basic Health Care Responsibilities)”
- (4) Revised 6.10, R1 (a) by replacing “SF 93” with “Job Corps Health History Form”
- (5) Revised 6.10, R1 (b) by replacing “SF 88” with “Job Corps Physical Examination Form,” and by replacing “the center physician or other qualified health professional” with “a qualified health professional.”
- (6) Revised 6.10, R1 by reordering footnotes
- (7) Revised 6.10, R1 (c) by removing “all” from “All females...” in the Pap smear requirements.
- (8) Revised 6.10, R1 (d)
 - 1. Added “All applicants are required to provide Admissions Counselors with current immunization records at the time of application. Records will be reviewed by center health staff on entry to determine currency of immunizations.”
 - 2. Changed “The following immunizations shall begin within 14 days after a student’s arrival, and shall be documented on the Job Corps Immunization Record (see the Job Corps Forms Handbook on the Job Corps Community website). Students who arrive with documented current immunizations are exempt from this requirement” to “1. Immunizations or boosters if the following

immunization series are incomplete or if current immunization records cannot be produced:

- (a) Tetanus and diphtheria toxoid (Td) or Tetanus-diphtheria-acellular pertussis (Tdap)
 - (b) Inactivated polio vaccine (IPV) for students younger than 18 years
 - (c) Measles, mumps, and rubella vaccine”
3. Removed the reference to TAG B and added “(e.g., influenza vaccine)” to optional immunizations.
 4. Added “Centers should utilize the Vaccines for Children program to update immunizations for eligible students according to the latest Centers for Disease Control and Prevention (CDC) guidelines.”
- (9) Revised 6.10, R1 (e) by adding “test” after “Mantoux” and removing the reference to TAG M.
 - (10) Added 6.10, R1 (g), “An inpatient unit (during office hours) for minor conditions, such as respiratory infections or flu symptoms.”
 - (11) Edited 6.10, R1 (h) to read, “An appointment system for follow-up during the training day for treatment of chronic, urgent, and other conditions within the capabilities of center health professionals. Treatment guidelines for health staff shall be used to manage common acute and chronic conditions.”
 - (12) Added 6.10, R1 (i) “Access to prescription medications.”
 - (13) Relettered 6.10, R1 (j-1) to reflect additions.
 - (14) Revised 6.10, R2 by adding “(See Exhibit 6-4, Job Corps Basic Health Care Responsibilities)”
 - (15) Revised 6.10, R2 (b) to read, “A dental readiness inspection shall be completed within 14 days after arrival by the center dentist or designee (i.e., dental hygienist or assistant).”
 - (16) Section 6.10. R2 (c) now reads, “An elective oral examination, including bitewing x-rays, priority classification, and treatment plan, shall be completed and recorded on the Job Corps approved oral examination form

by the center dentist upon student request as a follow up to the dental readiness inspection. The x-ray images should be securely stored as part of the student's health record."

- (17) Deleted 6.10, R2 (d), "Basic oral health care shall be provided based on the priority classification system, with treatment comprising a minimum of 50 percent of services rendered by the center dentist. Students may decline non-emergent oral health care."
- (18) Replaced 6.10, R2 (d) text with, "Dental procedures to treat oral disease and correct oral health conditions that may represent employability barriers, to include: restorations; extraction of pathological teeth; root canal therapy on anterior/other strategic teeth; replacement of missing upper anterior teeth with a removable prosthesis; and dental hygiene treatment for periodontal disease."
- (19) Added 6.10, R2 (e) "Referral agreement with community facilities for emergent or urgent conditions treatable beyond the expertise of a general dentist."
- (20) Revised section 6.10, R3, Mental Health and Wellness Program. Section now reads:

Centers shall provide basic mental health services as described below:

- a. The general emphasis of the Mental Health and Wellness Program shall be on the early identification and diagnosis of mental health problems, basic mental health care, and mental health promotion, prevention, and education designed to help students overcome barriers to employability. The program uses an employee assistance program approach that includes short-term counseling with an employability focus, referral to center support groups, and crisis intervention.
- b. Assessment and possible diagnosis, to include:
 - 1. Assessments and recommendations for Job Corps applicants;
 - 2. Review of Social Intake Form (SIF) or intake assessment performed by counseling staff of students who indicate mental health history, current mental health problems, or who request to see the Center Mental Health Consultant within 1 week of arrival;
 - 3. Mental health assessments and recommendations for referred students. Students who are assessed as a safety risk to self or others must be continuously supervised, until their case is resolved. Disposition should occur as soon as possible;

4. Determination when a MSWR or medical separation is appropriate and recommended for students with mental health conditions and/or substance use co-occurring conditions.
- c. Mental health promotion and education, to include:
1. Minimum of a 1-hour presentation on mental health promotion for all new students during the Career Preparation Period with an emphasis on employability;
 - a. Presentations shall explain the mental Health and Wellness Program, what services are available, and how to make a self-referral;
 - b. Students will learn basic skills in identifying and responding to a mental health crisis.
 2. Presentation(s) on managing mental health-related symptoms and behaviors in the workplace for students during the Career Development and Transition Periods;
 3. At least one annual center-wide mental health promotion and education activity;
 4. Clinical consultation with Center Director, management staff, and Health and Wellness Manager regarding mental health-related promotion and education efforts for students and staff
 5. Coordination with other departments/programs on center, including, but not limited to, residential, recreation, student government association, and HEALs, to develop integrated promotion and education services.
- d. Treatment, to include:
1. Short-term counseling defined as no more than six sessions with mental health checks as needed. The focus of these sessions should be on retention and behaviors that represent employability barriers;
 2. Collaboration with TEAP specialist for short-term counseling of students with co-occurring conditions of mental health issues and substance use;
 3. Collaboration with center physician and Health and Wellness staff on psychotropic medication monitoring of stable students, with the advice of consulting psychiatrist, if appropriate;
 4. Collaboration with counseling staff in developing and/or leading psycho-educational skill-building groups to

promote wellness (e.g., relaxation training, anger management, mood regulation, assertiveness skills, handling relationships, sleep hygiene, etc.);

5. Information exchange through regular case conferences between the Center Mental Health Consultant, counselors, and other appropriate staff based on individual student needs;
6. Crisis intervention, as needed. In the event of a mental health emergency, the Center Mental Health Consultant or the center physician shall conduct a mental health evaluation as soon as possible, and when necessary, refer the student for psychiatric care. If the center physician or Center Mental Health Consultant is not available, the student shall be referred immediately to the emergency room of the nearest medical facility. If there is a life-threatening situation, 911 or the emergency response team should be called;
7. Referral to off-center mental health professionals or agencies for ongoing treatment and/or specialized services;
8. A written referral/feedback system shall be established and documented in the student health record.

- (21) Revised section 6.11, R1, Trainee Employee Assistance Program (TEAP). Section now reads:

Trainee Employee Assistance Program (TEAP) (See Exhibit 6-4, Job Corps Basic Health Care Responsibilities)

Centers shall provide basic TEAP services, as described below:

- a. The general emphasis of TEAP shall be on prevention, education, identification of substance use problems, and helping students overcome barriers to employability.
- b. Substance use prevention and education, to include:
 1. Minimum of a 1-hour presentation on substance use prevention for all new students during the Career Preparation Period. This presentation shall explain (1) TEAP prevention, education, and intervention services, (2) Job Corps drug and alcohol testing requirements and procedures, and (3) the consequences of testing positive for drug or alcohol use while in Job Corps;
 2. Presentation(s) on managing substance misuse, abuse, and dependency symptoms and issues in the workplace for

students during the Career Development and Transition Periods;

3. At least three annual center-wide substance use prevention and education activities;
 4. Clinical consultation with Center Director, management staff, Center Mental Health Consultant, and Health and Wellness Manager regarding substance use prevention and education efforts for students and staff;
 5. Coordination with other departments/programs on center, to include, but not be limited to, residential, recreation, student government association, and HEALs, to develop integrated prevention and education services.
- c. Assessment for identification of students at risk for substance use problems to include:
1. Review of Social Intake Form (SIF) or intake assessment of all students performed by counseling staff within 1 week of arrival;
 2. Formalized assessment measures (e.g., SASSI3 or SASSIA2), and clinical judgment to determine students' level of risk for substance use;
 3. Collaboration with the Center Mental Health Consultant to determine when a MSWR or medical separation is appropriate and should be recommended for a student with substance use conditions (see Section 6.11, R1, e5).
- d. Intervention services for students identified at an elevated risk for substance use, to include:
1. Individual and group intervention services with a focus on behaviors that represent employability barriers;
 2. Collaboration with the Center Mental Health Consultant for students with co-occurring conditions of mental health issues and substance use;
 3. Referral to off-center substance abuse professionals or agencies for ongoing treatment and/or specialized services. Any student separating from Job Corps who has a substance use condition shall be provided with a referral for support services in his or her home community.
- e. Drug and alcohol testing
1. Drug testing procedures
 - (a) Students in the following categories shall be tested for drug use:

- (1) New and readmitted students shall be tested within 48 hours of arrival on center.
 - (2) Students who tested positive on entrance shall be retested between the 37th and 40th day after arrival on center.
 - (3) Students who are suspected of using drugs at any point after arrival on center (including during the 45-day intervention period) shall be tested; this testing shall take place as soon as possible after staff suspects use.
 - (4) Students who tested negative on entry and then positive on suspicion shall be retested between the 37th and 40th day after the positive suspicion-of-drug-use test.
- (b) Biochemical testing is never permissible on a random basis, with the exception of designated licensed student drivers who are subject to 49 CFR Part 391 DOT Federal Motor Carriers Safety Administration. In addition, biochemical testing requested by work experience sites, union trades, or potential employers may only be performed by the requesting entity.
 - (c) If a student refuses to provide a specimen or has an unexcused absence from his or her follow-up drug test, he or she shall be referred to the center's behavior management system for appropriate disciplinary action. Students who state they are unable to produce a specimen shall be referred to the center physician or designee for follow up.
 - (d) Collection of urine for drug testing shall be in accord with chain-of-custody principles and conducted by health and wellness staff or a staff member trained in urine collection procedures.
 - (e) The Job Corps nationally contracted laboratory shall be used for all required drug testing. On-center urine drug testing is prohibited.
 - (f) Reinstated students shall not be subject to entry drug testing upon return to the center. Transfer students shall not be subject to drug testing upon arrival at receiving center. Both reinstated and transfer students shall be subject to testing for drugs upon suspicion of use only.

2. Alcohol testing procedures

- (a) Students who are suspected of using alcohol at any point after arrival on center shall be tested; this testing shall take place immediately after staff suspects use.
- (b) Centers shall use devices that measure alcohol in the breath or saliva (e.g., breathalyzers or alcohol test strips/tubes/swabs). Alcohol testing shall only be administered by a staff member trained in the use of these testing devices. All testing shall be documented and the results submitted to the health and wellness center.

3. Students testing positive for drug or alcohol use:

- (a) New students and readmitted students not previously separated for drug use (ZT separation code 05.2a) who test positive on entry shall receive intervention services and a follow-up drug test. The results of the follow-up drug test shall be received on center prior to the end of the 45-day intervention period.

To remain in the program, students who test positive on entry must have a negative drug-test result within the 45-day intervention period.

If an intervention period takes place during a center vacation period (i.e., summer break or winter break), the intervention period is suspended and resumes the day the student is scheduled to return to the center (e.g., if a student is on day #30 of his or her intervention period at the time of the center vacation, the day count will be suspended at 30 days, and resume as day #31 the day he or she is due back on center). If a student does not report to the center on the day he or she is expected to return, the intervention period still resumes and the student is labeled AWOL.

Students who are AWOL on the day of their scheduled follow-up drug test will be tested on the day they return to the center. If this drug test is positive and the results are not received before the end of the 45-day intervention period, the student will be separated under the ZT policy and the separation will be counted in the center's statistics. Students AWOL during the intervention period who never return to the center cannot be separated under code 05.2a (a positive drug test is required for a

05.2a ZT separation); instead, the student shall be separated as AWOL.

- (b) Readmitted students previously separated for drug use (ZT separation code 05.2a) who test positive on entry or any time during their second enrollment at Job Corps must be separated immediately without a 45-day intervention period. Such students shall not be allowed to reapply to Job Corps.
- (c) Students who tested negative on entry but test positive on suspicion of drug use any time after entry shall be given a 45-day suspicion-intervention period, which shall begin on the day of collection of the specimen.

To remain in the program, such students must have a negative drug test result within the 45-day suspicion-intervention period.

Students who test positive within the 45-day suspicion-intervention period shall be separated in accordance with the ZT policy specified in Chapter 3. During the 45-day suspicion-intervention period, students in the driver's education program and student drivers who fall under DOT regulations are not permitted to drive. A second positive suspicion-of-drug-use test at any time thereafter will result in immediate separation in accordance with the ZT policy. (Students who tested positive on entry but tested negative at the end of the initial 45-day intervention period are not eligible for suspicion-intervention services and will be separated under the ZT policy for a positive suspicion-of-drug-use test.)

- (d) Students who test positive for drug use by an off-center facility shall be retested on center using the Job Corps nationally contracted laboratory as soon as possible, to include:
 - (1) Work-based learning students who tested positive on a drug test administered by experience sites, union trades, or potential employers;
 - (2) Students who tested positive on a drug test administered at a referral health facility (e.g., hospital emergency department, urgent care facility).

This retest by the Job Corps nationally contracted laboratory shall be classified as a suspicion-of-drug-use test. For students who test positive for drug use on this retest, centers shall follow the same procedures outlined in (c) above.

- (e) Student drivers who test positive for drug use under 49 CFR Part 391 DOT Federal Motor Carriers Safety Administration shall follow the same procedures outlined in (c) above for positive suspicion tests. In addition, during the 45-day suspicion-intervention period, student drivers who fall under DOT regulations are not permitted to drive.
 - (f) 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.
4. Student notification of drug or alcohol test results
- (a) Students who test positive for drug use shall be informed of their results by the TEAP specialist, center physician, or designee within 24 hours of receipt of positive result, or as soon as possible, given staff and student availability. Minor student's parent/guardian shall be notified of positive test results as required by applicable state laws for the state in which the center is located.
 - (b) The results of the entrance drug test shall be provided to the student by the 45th day after enrollment.
 - (c) Alcohol test results shall be provided to the student by the person administering the test.
 - (d) Drug and alcohol test results shall be shared only with center personnel who have a need to know for purposes of discipline, counseling, administration, and delivery of services (in accordance with 42 CFR, Part 2).
 - (e) If a student questions the validity of a confirmed positive drug test, he or she shall be referred to the center physician or designee for counseling.
5. Medical Separations with Reinstatement Rights (MSWR) for substance use conditions

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

(22) Revised 6.12, R1 (b) to include TEAP and changed "Regional Health Consultants" to "Regional Health Specialists."

(23) Revised 6.12, R5 (a) to read, "Maintaining a copy of current provider's license, DEA registration, and proof of liability insurance, if applicable, in center health facility."

(24) Revised 6.12, R6 (c-f). In all instances changed "Class" to "Schedule" and "dispensing" to "dispensing or administering."

g. Exhibit 6-4: Job Corps Basic Health Care Responsibilities

- (1) Changes made to reflect PRH changes addressed above. See revised Exhibit 6-4.

h. Exhibit 6-5: Center Health Services Staffing Requirements

- (1) Edited introductory paragraph to include prior approval from the Regional Office in consultation with Regional Health Specialists for all physicians, dentists, dental hygienists, TEAP specialists, Health and Wellness

Managers, and mental health professionals. Added reference to 5.2, R4 regarding waivers.

- (2) Revised Physician:
 - i. Decreased physician hours from 4 hours/100 students/week to 2 hours/100 students/week;
 - ii. Removed requirements regarding centers with a capacity of greater than 2,000 students;
 - iii. Removed paragraph that read: “Up to two hours/100 students/week of required physician hours can be assumed by a physician assistant/nurse practitioner to provide routine medical services within the licensee’s scope of practice. Centers cannot use nurse practitioners/physician assistants for services that are required by Chapter 6 to be provided solely by a physician (e.g., medical evaluation of HIV positive students). Primary physician hours must be provided in accordance with Table 1.”
 - iv. Removed Table 1 and related sentence.
- (3) Added Nurse Practitioner/Physician Assistant (NP/PA). Position description reads: “Two hours/100 students/week is the minimum required level of nurse practitioner/physician assistant coverage by a qualified licensed NP/PA. The NP/PA may not serve as both the NP/PA and the Health and Wellness Manager.”
- (4) Revised Nursing Staff entry to read, “Centers with 200 or more slots must have the minimum of a registered nurse in the health and wellness manager position. The Health and Wellness Manager may not serve as both the Health and Wellness Manager and the NP/PA.”
- (5) Revised Dentist:
 - i. Decreased dentist hours from 4 hours/100 students/week to 3 hours/100 students/week;
 - ii. Removed requirements regarding centers with a capacity greater than 1,300 students.
- (6) Revised Dental Assistant:
 - i. Decreased dental assistant hours from 6 hours/100 students/week to 4 hours/100 students/week;

- ii. Removed requirements regarding centers with a capacity greater than 1,300 students.
- (7) Revised Dental Hygienist:
- i. Decreased dental hygienist hours from 4 hours/100 students/week to 3 hours/100 students/week.
 - ii. Revised requirements to “Three hours/100 students/week is the minimum required level of dental hygiene coverage by a qualified licensed dental hygienist or dentist;”
 - iii. Removed requirements regarding centers with a capacity greater than 2,000 students.
- (8) Revised Center Mental Health Consultant (formerly Mental Health Professional):
- i. Increased hours from 5 hours/100 students/week to 6 hours/100 students/week;
 - ii. Added mental health promotion, prevention, and education for students and staff and consultation with the Center Director to the list of required consultation activities;
 - iii. Added reference to PRH Exhibit 6-4;
 - iv. Added language surrounding use of interns, externs, and practicum students.
- (9) Optometrist: Added “optometric” prior to “services;”
- (10) Reproductive Health Coordinator, changed “health services staff” to “Health and Wellness staff.”
- (11) Revised Trainee Employee Assistance Program (TEAP) Specialist:
- i. Decreased staffing from a full-time staff position, with adjustments according to center size, to 6 hours/100 students/week.
 - ii. Added “Of the minimum required coverage per week, 50 percent must be used for a combination of the following activities: prevention and education for students and staff, consultation to center director, CMHC, and other staff, and annual trainings. All TEAP services defined as basic health services in PRH Exhibit 6-4 must be provided on center by the TEAP Specialist;”

- (12) Tobacco Use Prevention Program (TUPP) Coordinator: changed “health services staff” to “Health and Wellness staff;”
- (13) Health Services Administrator: Changed reference to nursing coverage to reflect revised numbering;
- (14) Laboratory Personnel: Changed “general nursing hours” to “nursing staff hours,” and changed reference to nursing coverage to reflect revised numbering;
- (15) Minimized Staffing Requirements by Center Size: Revised table to reflect new requirements.

5. Action Required. Addressees are to ensure this PRH Change Notice is distributed to all appropriate staff.

6. Effective Date. January 14, 2013.

7. Inquiries. Inquiries should be directed to Carol Abnathy at (202) 693-3283, or abnathy.carol@dol.gov, or Johnetta Davis at (202) 693-8010, or davis.johnetta@dol.gov.

Attachments:

- A – Chapter 5
- B – Exhibit 5-1
- C – Exhibit 5-2
- D – Exhibit 5-3
- E – Exhibit 5-4
- F – Chapter 6
- G – Exhibit 6-4
- H – Exhibit 6-5