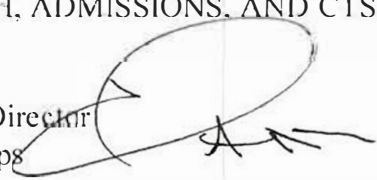




MAR 06 2020

DIRECTIVE:	JOB CORPS PROGRAM INSTRUCTION NOTICE NO. 19-12
------------	--

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: DEBRA CARR  
Acting National Director  
Office of Job Corps 

SUBJECT: Job Corps Response to a Potential Coronavirus (COVID-19) Pandemic

1. Purpose. To inform Job Corps centers of COVID-19 facts, prevention information, and resources.

2. Background. Coronavirus disease, now named COVID-19, has spread through a multitude of countries, including reported cases in the United States. The World Health Organization (WHO) has not yet labeled COVID-19 a pandemic (i.e., worldwide epidemic). However, it may be designated a pandemic should the disease continue to spread. Because this is a new, novel coronavirus caused COVID-19, the human population has little immunity against it. Thus, the virus can rapidly spread from person-to-person.

COVID-19 is an easily transmitted respiratory infection. Symptoms typically appear 2 to 14 days after exposure. The infection presents with fever, cough, and shortness of breath. The Job Corps program is in contact with Humanitas, its current contract health services provider, and continues to monitor and comply with guidance from the U.S. Department of Labor on responding to COVID-19.

3. Action. The following actions should be taken in response to a potential COVID-19 pandemic:

- a. Health and Wellness staff should develop a relationship and identify an individual contact within state and local public health departments. Follow state and local public health guidelines, including those for center lockdowns/lockouts and closures.
- b. Centers must review their pandemic influenza response plan and modify them as needed to address COVID-19 outbreaks, including pandemic COVID-19. Center plans must include details on required actions in the event of a center closure or

other containment measures. Each center must confirm the review and revision, if necessary, of its center plan. The Center Director must confirm, in writing, to the appropriate Job Corps Regional Director that the center conducted the review and made all necessary revisions.

- c. A decision to delay a student's (this also includes enrollees) arrival at a center due to COVID-19 concerns may be appropriate in some instances. A decision to delay an arrival must be justified based on the facts known at the time, well documented, and reported to the appropriate Job Corps Regional Office. Delayed arrival is not a denial of enrollment.
- d. Center operators and Outreach and Admissions (OA) staff should delay student arrival dates only when it is necessary to ensure everyone's health at the center. When deciding whether to delay a student's arrival date, center operators and OA providers should consider several key factors. At a minimum, these factors include the information available from public health agencies on the locations and numbers of reported and/or confirmed COVID-19 cases, and guidance by state and local officials on closures and travel. In addition, consider whether the student reports feeling ill or having symptoms associated with COVID-19 such as fever, cough, and shortness of breath.

Centers, when contacting a student to confirm a planned arrival date, should ask if the student is feeling unwell. The student's arrival should be delayed if the student reports having symptoms associated with COVID-19 such as fever, cough, and shortness of breath and/or the student's point of origin has reported and/or confirmed COVID-19 cases.

- e. During a student's medical file review, prior to the student's arrival at the center, Health and Wellness staff should determine whether the student reported preexisting medical conditions that compromise the student's immune system. Such conditions include, for example, respiratory conditions, lupus and other autoimmune diseases. Students with these conditions are at higher risk of contracting COVID-19 if exposed.
- f. If a center must temporarily close due to an outbreak, follow PRH Exhibit 6-1 Duty/Pay/Leave Status Chart, CIS Leave Category "Center Closure for Emergency."
- g. If any serious communicable disease is detected on center, including COVID-19, Center Directors are instructed to arrange for an immediate examination by a physician or qualified health professional of all affected students and assure that all cases are handled in accordance with current CDC and local public health department recommendations and guidelines. Center staff is encouraged to act quickly and appropriately when responding to the first case diagnosed to prevent an epidemic on center.

- h. Center management should maintain daily communication with Regional Office staff if an outbreak should occur on center.
- i. Health and Wellness Staff should review the CDC's Healthcare Professional Preparedness Checklist For Transport and Arrival of Patients With Confirmed or Possible COVID-19 and monitor updates on the CDC's Coronavirus Disease 2019 webpage.
- j. Centers should report cases of COVID-19 in Job Corps' Significant Incident Reporting System (SIRS).
- k. Given the lack of a vaccine and anti-viral medications effective against the coronavirus, non-pharmaceutical interventions (NPIs), also known as community mitigation measures, are the most effective means to slow the spread of COVID-19. Centers should employ the following:
  - Personal protective measures. Centers should always encourage the daily practice of these measures, whether or not there is a pandemic.
    - Voluntary isolation (home or Job Corps center) if an individual is ill. Encourage sick employees and non-residential students to stay home. Provide isolation in the Health and Wellness Center or designated dormitory rooms for sick students to avoid spreading illness.
    - Respiratory etiquette. When coughing and sneezing, cover mouth and nose with flexed elbow or tissue and discard tissue immediately into a closed bin, then clean hands with alcohol-based hand rub or soap and water.
    - Hand hygiene. Students and staff should be encouraged to wash their hands frequently with soap and water or use an alcohol-based hand rub.
    - Avoid touching eyes, nose and mouth with your hands. Hands touch many surfaces and these surfaces can be contaminated with the virus.
    - Avoid placing sick students on public transportation.
  - Enhanced personal protective measures during a pandemic.
    - Non-residential students and staff should stay home if they have a family member with symptoms.
    - Roommates of students with COVID-19 should be closely monitored for symptoms.
    - Use facemasks in community settings when ill. Health and Wellness staff may give students exhibiting respiratory symptoms facemasks when they enter the Health and Wellness Center. Be aware of any updated guidance by government health officials on the use and effectiveness of facemasks.

Additional Notes about facemasks:

- *Paper facemasks covering the nose and mouth are most effective in reducing transmission by individuals symptomatic with coughing and sneezing and less effective when worn to prevent infection.*

- *CDC does not recommend that well people wear a facemask to protect themselves from respiratory diseases.*
  - *N95 facemasks must be fitted and tested annually to work properly. Their use in Job Corps should be limited to health care workers.*
- Encourage students and staff who have a fever, cough, and difficulty breathing to seek medical care early.
  - Ensure personal protective equipment (PPE) including gowns, N95 respirator masks, and gloves are available for Health and Wellness staff.
  - Community measures aimed at increasing social distancing during pandemic.
    - Possible temporary closure or enrollment freeze of Job Corps centers in affected areas based upon health department recommendations.
    - Social distancing in workplaces. Employees who can work from home may be encouraged to do so.
    - Advise students and staff to maintain at least 3 feet distance from other people, particularly those who are coughing, sneezing, and have a fever.
    - Postpone or cancel mass gatherings and meetings.
  - Environmental measures.
    - Frequently touched surfaces should be routinely cleaned and sanitized.
1. Manage fears about COVID-19. In addition to providing medical facts and education on COVID-19, it may be helpful to assist students and staff to address their fears and anxieties. The simple and effective suggestions below can help staff and students maintain positive emotional and physical health while dealing with the serious nature of COVID-19 and its uncertainty:
- Provide information to students and staff on COVID-19. This includes highlighting that this virus currently poses a small risk to the U.S. population.
  - Acknowledge and accept feelings related to COVID-19 and the media coverage but keep in perspective. As education takes place for students and staff, encourage a limit on watching media coverage and the importance of not allowing worry to control their lives.
  - Focus on positive activities on and off center. This can include exercise, sports, listening to music, video games, attending a spiritual service, and other Healthy Eating and Active Lifestyles (HEALs) activities.
  - Maintain social connections with family and friends as an outlet for stress and anxiety.
  - If a student is experiencing extreme feelings of anxiety or stress, they should be referred to the Health and Wellness Center for professional assistance.

This may be important for students and staff with family in countries or cities where COVID-19 has been rampant and there is worry about family members. Identify students and staff who may be most affected and offer individualized support.

Addressees are to ensure this Information Notice is distributed to all appropriate staff.

4. Resources. For the most current information on COVID-19, visit the following resources:

*Pre-Pandemic NPI Planning Guides*

These guides are based on influenza but applicable to COVID-19. The following user-friendly Guides are to help public health departments and community settings put the 2017 Guidelines into action as part of their NPI pre-pandemic planning.

- [Get Ready for Pandemic Flu: Individuals and Households \[PDF – 16 pages\]](#)
- [Get Ready for Pandemic Flu: Educational Settings \[PDF – 16 pages\]](#)
- [Get Ready for Pandemic Flu: Workplace Settings \[PDF – 16 pages\]](#)
- [Get Ready for Pandemic Flu: Event Planners \[PDF – 16 pages\]](#)
- [Get Ready for Pandemic Flu: Community and Faith-Based Organizations Serving Vulnerable Populations \[PDF – 16 pages\]](#)
- [Get Ready for Pandemic Flu: Health Communicators \[PDF – 17 pages\]](#)

*Pandemic Flu Checklists*

The following checklists include specific action steps to help public health professionals and administrators of schools, workplaces, and mass gatherings plan and prepare for a flu pandemic and implement NPIs.

- [Pan Flu Checklist: Workplace Administrators \[PDF – 1 page\]](#)
- [Pan Flu Checklist: K-12 School Administrators \[PDF – 1 page\]](#)
- [Pan Flu Checklist: Childcare Program Administrators \[PDF – 1 page\]](#)
- [Pan Flu Checklist: Event Planners \[PDF – 1 page\]](#)

*Resources*

- World Health Organization (WHO). [Coronavirus disease \(COVID-19\) outbreak](#)
- Centers for Disease Control and Prevention (CDC). [Coronavirus 2019](#)
- Centers for Disease Control and Prevention (CDC). [Nonpharmaceutical Interventions](#)
- MMWR 66(1) [Community Mitigation Guidelines to Prevent Pandemic Influenza](#) April 21, 2017

5. Expiration Date. Until superseded.

6. Inquiries. Inquiries should be directed to your respective Regional Directors.