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SUBJ: MEDICAL SUPPORT OF COAST GUARD CHILD DEVELOPMENT CENTERS A. Civilian Employee Health Care and Occupational Health Program, COMDTINST M12792.3 (series) B. Food Service Sanitation Manual, COMDTINST M6240.4 (series) C. Child Development Services Manual, COMDTINST M1754.15 (series) 1. The partnership between a local Coast Guard (CG) medical clinic and a CG Child Development Center (CDC) is critical in assuring the daily and long term health and safety of young children in care. As with other CG proponent agencies (e.g., fire and safety), the medical clinic acts as a support service to the CDC when a medical or health related issue arises. Medical support services include, but are not limited to, consultation on local standard operating procedures (SOP) related to medical practices within the CDC, providing CDC employee specialty screenings and/or examinations, conducting bi-monthly health inspections and monthly food service inspections and participating on the Special Needs Resource Team (SNRT) when it is convened by the SNRT Chairperson.

2. In a medical emergency, it is the responsibility of the CDC Director, or the most senior CDC personnel present in the absence of the Director, to take charge of the situation. This includes, assessing the severity of the medical emergency, dialing 911 and requesting immediate assistance on-site, stabilizing the child within the scope of their medical training, contacting the parent/guardian/emergency contact, contacting base security and finally notifying the local medical clinic of the situation for their situational awareness. A Child Development Services Medical Consent Authorization, Form CG-5484H shall be available to accompany the child if the child needs to be medically transported to an off-site medical facility.

3. As a medical support service to a Coast Guard CDC, the local medical clinic will provide subject matter expertise in reviewing CDC SOP that addresses medical/health related issues. These local procedures include, but are not limited to, the care of children and staff who are ill, communicable disease notification, child and adult medical immunizations, exclusion of ill children, medication dispensation, sanitation practices, oral health and urgent care procedures.

4. In accordance with REF A, local medical clinics will provide pre-placement/initial/new hire, periodic and termination screenings and/or examinations for all CDC employees appropriated and nonappropriated funded personnel. CDC related examinations can only be performed by CG health care providers (physicians, physician assistants or nurse practitioners). CDC related screenings can be performed by health care providers and independent duty health service technicians. Pre-placement/initial/new hire specialty screenings and/or examinations must be completed before the CDC employee begins working. It is the responsibility of the supervisor and/or cognizant Command Staff Advisor to define the functional requirements of the job. Part A of the Certificate of Medical Examination, Form OF-178 will be completed by the employee, Part B will be completed by the Human Resource Office (HRO) prior to the examination, and Part E will also be completed by the HRO after the examination has been

completed. Part C and D are completed by the examining physician and/or medical officer. Specialty screenings shall be performed every two years.

5. In accordance with REF B, medical personnel will conduct CDC sanitation inspections at least twice per month with an emphasis on all food service establishments, to include all food preparation, serving, cleaning and storage spaces. Whenever an inspection is conducted, the findings will be documented on the Food Service Establishment Inspection Report, Form CG-5145. One copy of the report will be given to the CDC Director for corrective action.

6. In accordance with REF C, medical personnel will conduct health inspections of a CDC on an every other month basis. The inspection format is at the discretion of the local medical clinic, but the areas of compliance will mirror those areas identified on the Health, Safety, and Work Life Service Center (HSWL SC) CDC Preventive Medicine and Sanitation Quality Assurance Checklist. Whenever an inspection is conducted, the findings will be documented and the results presented in writing to the CDC management for corrective action.

7. In accordance with REF C and the SNRT SOP, a CG health care provider will participate on a CDC Pre-Admission SNRT meeting for any child identified with a special medical/physical/psychological care need. They will review the medical documentation of each child, recommend program modifications/adaptations as appropriate, make recommendations for training that addresses specific issues of children with special needs and provide, as requested, individual or group training for CDC staff.

8. The policy changes noted above will be reflected in an upcoming revision of REF C.

9. POCs:

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11. Internet release is authorized.

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