



CERTIFIED NURSING ASSISTANT STUDENT INFORMATION

For more information or to register, contact us at:

Wallace State Community College
Training for Existing Business and Industry
Bailey Building
9th Floor
801 Main Street, NW
Hanceville, AL 35077
(256) 352-8238

Melinda.edwards@wallacestate.edu

Alicia.Stricklin@wallacestate.edu

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Wallace State Community College Certified Nursing Assistant

Program Summary: The Certified Nursing Assistant (CNA) program prepares men and women to give basic nursing care under the direction of a licensed nurse. This program meets the requirements for the Alabama Certified Nursing Assistant, and graduates are qualified to take the State Certification Exam.

What is a Nursing Assistant? A Nursing Assistant is a valuable member of the healthcare team. A Nursing Assistant works more closely with patients and their personal care than any other member of the healthcare team.

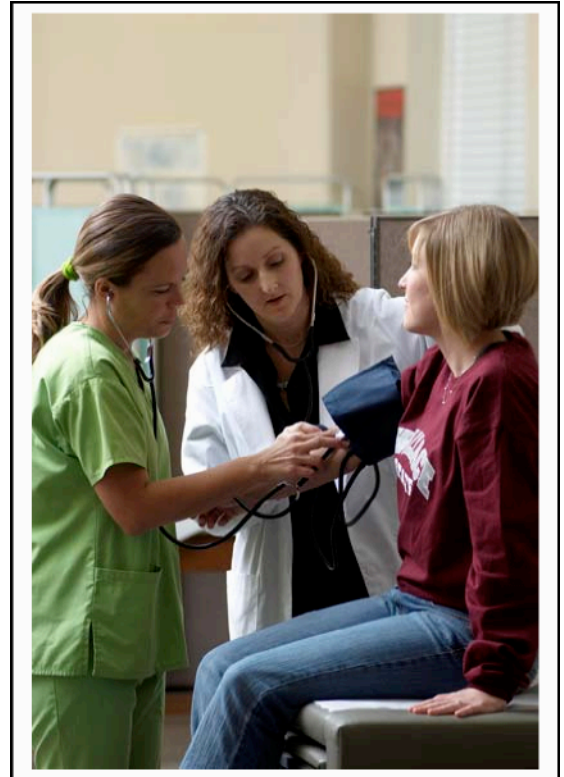
Why Choose CNA? Nursing Assistants make a difference in the quality of life for each person in their care.

Our state-approved Certified Nursing Assistant training will get you into one of the fastest growing occupations in the United States.

Course Fee: \$790 includes books, course supplies, clinical externship, and National Nurse Aide Assessment Program Examination fee.

Schedule: Training includes a total of 66 classroom hours and 26 hours of clinical training.

Nursing Assistants act as the “eyes and ears” of the Health Care team.



For more information, an application and a schedule of our courses contact:

Alicia Stricklin
(256)352-7826
alicia.stricklin@wallacestate.edu
Bailey Building, 9th Floor, Room 907

or

Melinda Edwards
(256) 352-8172
melinda.edwards@wallacestate.edu
Bailey Building, 9th Floor, Room 909
801 Main Street, NW
Hanceville, AL 35077

**Information session: Tuesday,
July 15th
5:30 pm
9th Floor Bailey Building**

Class Schedule:

August 19 – October 30th
& October 21 – December 19th
10 week course/ Meeting Tuesdays & Thursdays
5:00-9:00 pm
Location: Nursing Building Room 202

Certified Nursing Assistant Estimated Costs

> Tuition	\$790.00
> Insurance*	\$15.00
> Background Check	\$69.00
> Drug Screening*	\$37.00
> Uniform**	\$37.43/set
> Stethoscope**	\$80.00
> Sphygmomanometer (Blood Pressure Cuff)**	\$36.50
> Physical*	\$25.00
> 2-Part TB	\$0.00
> Hep B*	\$180.00
> MMR	\$5.00
> Chicken Pox Titer*	\$29.00
TOTAL	\$1,303.93

*Malpractice Insurance will be paid to WSCC at time of tuition.

Uniforms may be purchased at:

The Uniform Place, 300 2nd Ave SW Cullman, AL 35055 256-734-0662

Cost of plus size uniforms are extra.

At least one uniform must be Landau brand V-neck top and matching pants in Navy blue.

Background Check should be completed online at:

www.wallacestate-hanceville.com. Follow directions on website.

Estimated costs based on student living in Alabama for past seven years.

Background checks from other sources will not be accepted. Background checks must be completed prior to the first day of class unless you are a WIA student

Drug Screen must be conducted with:

Professional Medical Services, Inc., Dr. James Thomas, 1908 Cherokee Ave SW, Cullman, AL 35055 256-736-1460

Drug Screen from other sources will not be accepted. Drug Screens must be completed prior to the first day of class unless you are a WIA student

Physical/Immunizations estimations were taken from Professional Medical Services, Inc. You may go to another facility such as your family doctor for these services. If you have had a physical or immunizations within the last year, you should not have to repeat. Have your physician complete the required forms. **Contact your primary physician for ALL vaccinations** (Including your 2-Part TB and MMR)

WIA students must receive authorization from Ms. Joyce Cordes prior to receiving any WIA covered products or services.

Joyce Cordes, Financial Aid, 256-352-8255, joyce.cordes@wallacestate.edu

Financial Information

Non-Credit courses are not eligible for Pell Grant or Loans through Wallace State.

Student Loans

Student loans are available through certain financial institutions. These loans are not affiliated with Wallace State, but are direct to the student.

Workforce Investment Act (WIA)

Certain individuals may be eligible for a WIA scholarship for tuition and associated course costs.

- Must be in need of training services to re-enter labor force. One must also have skills that are no longer in demand; have low wage job skills; or little or no work history.
- Must be able to enter labor force quickly through short-term training (104 weeks or less).
- Must register for work at local Employment Service and actively pursue work with assistance from the Career Center.
- Must complete an Initial Assessment of Reading Skills, Math Skills, Interests, Aptitudes and Employability Skills.
- Must meet WIA eligibility criteria for Youth, Adult and /or Dislocated Worker Services. Eligibility does not constitute an automatic awarding of a scholarship. It only establishes that you are eligible for consideration.

If you would like to know more about this program, contact the Career Center at (256) 352-5538.

Alabama Department of Health National Nurse Aide Assessment Program Examination

The exam is NOT a Wallace State exam and may contain questions that are not covered in classroom lecture. It is the student's responsibility to study all information in the textbook, workbook, and/or any handouts. The student should contact Pearson VUE with any questions concerning the exam.

Information concerning the exam can be found in the *Alabama Nurse Aide Candidate Handbook*. A copy of the handbook can be found online at www.pearsonvue.com/al/nurseaides.

Exam Fee

The fee for the National **Nurse Aide Assessment** Program (NNAAP) Examination is included in the Certified Nursing Assistant course tuition. The student is responsible for completing the exam at the designated date and time. If the student is unable to attend the testing session, he or she must contact Pearson VUE to reschedule and may be required to pay additional fees to Pearson VUE.

Contact Pearson VUE

Phone: 1-888-204-6185

Email: customerservice2@pearson.com.

*All information regarding the NNAAP Exam was taken from the Pearson VUE website at www.pearsonvue.com.

Certified Nursing Assistant Clinical Externship Information

What is a Clinical Externship?

A clinical externship is an important step toward becoming a Certified Nursing Assistant. It will allow you to put into practice all that you have learned in the classroom. You will be working under the guidance of a preceptor to gain actual hands-on experience. Your preceptor will provide you with an orientation to the policies and workflow of their facility. This is your chance to move from the role of student into the role of a professional.

Externships are held at Hanceville Nursing and Rehab. Completion of the CNA course requires a successful completion of 26 hours externship in addition to classroom work.

Successful Externing

Treat the externship like a job. Show up on time and in uniform.

If you are going to be absent from your externship for any reason, you must contact your instructor. Work missed due to absences must be made up.

Please remember we are guest in the facility. Make a good impression so that they will be happy to accept Wallace State students in the future.

Dress Code

Students must wear a uniform to the externship, which is consistent with the type of apparel that would be required in the field. Students are also expected to dress in a neat, clean, and professional manner.

ID Badge	Identification badge is to be worn at all times above the waist, with name visible.
Hair	Should have a clean and neat appearance. Hair that is shoulder length or longer should be pulled back. No bright colored hair. (Pink, Red)
Tattoos	Must be covered.
Headwear	Religious head cover may be worn; baseball caps are inappropriate.
Jewelry	Should be appropriate to professional wear and not present a safety hazard when working with patients or equipment.

Tops	Denim attire, tank tops, halter tops, sweatshirts, low cut necklines, or tops exposing midriff, back or chest should not be worn during externships.
Pants	No sweat pants, torn or patched pants or denim should be worn during externship.
Shoes	Clean, neat athletic shoes are acceptable. Avoid wearing open toe shoes such as flip-flops or vented cros.
Grooming	Fragrances; heavy perfume or cologne may be offensive to patients or cause an allergic reaction. Avoid during externship.
Fingernails	Nails must be clean and trimmed not to extend beyond the tips of fingers.

Rules of Conduct

Be courteous and respectful to all persons at all times, including but not limited to fellow students, classroom and externship instructors, and patients. Be on time for all classroom and externship assignments; give advance notice to the Wallace State class instructor of any absence or late arrival; be conscientious and diligent in the performance of all classroom and externship assignments and conduct yourself as a professional at all times.

Attendance

If you are unable to attend your externship due to illness or emergency, please notify your class instructor immediately. All externship time missed must be made up.

Special Considerations

Remember that patient files are confidential. Do not open or read a file for which you are not directly responsible. Do not discuss patients with anyone but the appropriate clinic staff. Remember your HIPAA rules.

Student Responsibilities-Facility shall provide emergency treatment to injury or illness while student is fulfilling program requirements. Expenses of such treatment are the responsibility of the injured individual.

APPENDIX

Certified Nursing Assistant Student Checklist

- **Register/pay tuition and malpractice insurance** at WSCC at least two weeks prior to class date. Contact Melinda Edwards at (256) 352-8172 or melinda.edwards@wallacestate.edu for more information.
 - **WIA approved students:** contact Joyce Cordes at (256) 352-8255 or joyce.cordes@wallacestate.edu when approved.
 - Read and sign WSCC **Background Check** Policy. Purchase Background Check online at www.wallacestate-hanceville.com. Background check from other sources will not be accepted.
 - Read and sign WSCC Consent to **Drug Testing**. Obtain Drug Screen with Professional Medical Services, Inc., Dr. James Thomas, 1908 Cherokee Ave SW, Cullman, AL 35055 256-736-1460.
 - Results will be sent directly to WSCC from Dr. Thomas' office. Drug Screen from other sources will **not be accepted**.
 - **MMR & 2-Part TB** (may be performed at your local Health Department).
 - **Physical Exam** to include: Chicken Pox Titer & Hepatitis B Shot series (take all immunization records including MMR and TB to physician if already completed this year).
 - Purchase required uniform, stethoscope, and sphygmomanometer (blood pressure cuff).
 - **Bring Physical Exam, TB skin test, Hepatitis B shot records, and proof of malpractice insurance on the first day of class.**
- CPR will be scheduled and announced after class starts.

[See Estimated Costs sheet for more information](#)

Wallace State Community College Application for Non-Credit Courses

Training for Existing Business and Industry
Post Office Box 2000
801 Main Street NW
Hanceville, AL 25077



Phone: (256) 352-7826
Fax: (256) 352-8039

Date: _____		Social Security Number: _____		Date of Birth: _____	
Name: Last: _____		First: _____		Middle: _____	
Address: _____					
City: _____		State: _____		Zip: _____	
Gender: <input type="checkbox"/> Male		Race: <input type="checkbox"/> Caucasian/White		<input type="checkbox"/> African American	
<input type="checkbox"/> Female		<input type="checkbox"/> Native American/Alaskan Native		<input type="checkbox"/> Asian <input type="checkbox"/> Hispanic/Latino	
		<input type="checkbox"/> Native Hawaiian/Pacific Islander		<input type="checkbox"/> Other	
Person to Contact in Case of Emergency:					
Name: _____			Phone Number: _____		
Phone:			Fax Number:		
Day: _____			Email Address: _____		
Evening: _____			Cell: _____		
Method of Payment:					
<input type="checkbox"/> Enclosed is a check for \$ _____ made payable to Wallace State Community College.					
<input type="checkbox"/> WIA Qualified					
<input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> Discover <input type="checkbox"/> American Express					
Credit Card # _____ Exp. Date: _____ Security Code (3 or 4 digit number): _____					
Name on Card: _____				Zip Code registered with Credit Card _____	
Signature of Cardholder: _____					

Course # and Name	Hours	Date	Time of Class	Location	Instructor	Cost
Certified Nursing Asst TBI			5-9:00	Nursing, 202	Ryan	\$790.00
CNAN Malpractice Insurance						15.00
						Total: \$805.00

Please return form and payment to Wallace State Community College, Box #29 Melinda Edwards,
PO Box 2000, Hanceville, AL 35077-2000 or fax to (256) 352-8039.

WALLACE STATE COMMUNITY COLLEGE
 TRAINING FOR EXISTING BUSINESS AND INDUSTRY
CNA PHYSICAL EXAMINATION FORM

THIS PHYSICAL FORM CONSISTS OF FIVE PAGES INCLUDING THE ESSENTIAL FUNCTIONS WHICH MUST BE PRESENTED TO THE PHYSICIAN AT THE TIME OF PHYSICAL.

This form is to be completed in its entirety by a physician, certified nurse practitioner, or physician assistant. Physical exam results must be current within one year of any clinical experience. **STUDENT IS TO RETURN FORM TO COURSE INSTRUCTOR- DO NOT MAIL TO WALLACE STATE.**

STUDENT NAME _____

SOCIAL SECURITY # _____

1. For each of the Essential Functions listed below, please refer to the attached explanatory document and indicate whether the student is able to perform the task by checking the appropriate box.

Essential Function	Yes	No	If no, Please Comment
1. Sensory a. Visual b. Auditory			
2. Communication/Interpersonal Relationships			
3. Cognitive/Critical Thinking			
4. Motor Function			
5. Professional Behavior			

2. Based on findings in the examination, is the student able to participate in all activities required in the indicated health education program? Yes No

3. Please identify any restrictions to be placed on this student's participation in the indicated health education program:

4. Is this student free of infectious disease? Yes No

5. Tuberculin Skin Test - Mantoux Required:

Initial Test

Second Test (if needed-see note below)

Date _____
 Results: _____ Negative _____ mm
 _____ Positive _____ mm

Date _____
 Results: _____ Negative _____ mm
 _____ Positive _____ mm

(Chest x-ray and report are required if positive)

(Chest x-ray and report are required if positive)

Note: 1 step TB skin test sufficient if student has had a TB skin test within the past year (student must provide copy of previous skin test results).

6. Immunizations - Due to clinical agency requirements, immunization history must be complete. Pregnant or lactating females should postpone vaccination until completion of pregnancy/lactation. Attach a statement of the anticipated date of immunization signed by the health care provider.

DOCUMENTATION AND/OR LAB VALUES INDICATING IMMUNITY FOR THE FOLLOWING IMMUNIZATIONS MUST BE ATTACHED

Immunization	Note	Dates of Initial Series	Dates of Last Booster	Lab Data (if indicated)
Hepatitis B	Must have received at least two of the initial series prior to beginning clinical or present lab data indicating adequate immunity			
Measles (Rubeola)	Must present documentation of immunization or lab data indicating adequate immunity.			
Mumps	Proof should be included if available, however, it is not recommended that individuals over the age of 18 receive this vaccine.			
Rubella	Must present documentation of immunization or lab data indicating adequate immunity.			
Tetanus	Must be current within 10 years			
Varicella (chickenpox)	Must present documentation of immunization or lab data indicating adequate immunity.			

General Comments:

To my knowledge, the information I have supplied on this health form is accurate and complete:

Signature (Physician/Nurse Practitioner/Physician Assistant)

Date

Printed Name (Physician/Nurse Practitioner/Physician Assistant)

Address

Office Phone Number

City, State, Zip

WALLACE STATE COMMUNITY COLLEGE TRAINING FOR EXISTING BUSINESS AND INDUSTRY

ESSENTIAL FUNCTIONS

Wallace State Community College – Training for Existing Business and Industry (TEBI) endorses the Americans with Disabilities Act. In accordance with College policy, when requested, reasonable accommodations may be provided for individuals with disabilities.

Physical, cognitive, psychomotor, affective and social abilities are required in unique combinations to provide safe and effective health care. The applicant/student must be able to meet the essential functions with or without reasonable accommodations throughout the program of learning. Admission, progression and certificate completion are contingent upon one's ability to demonstrate the essential functions delineated for the TEBI health program indicated, with or without reasonable accommodations. The TEBI department and/or its affiliated clinical agencies may identify additional essential functions. The TEBI department reserves the right to amend the essential functions as deemed necessary.

In order to be admitted to the TEBI health program indicated, one must possess a functional level of ability to perform the duties required of the particular course. Admission or progression may be denied if a student is unable to demonstrate the essential functions with or without reasonable accommodations.

The essential functions delineated are those deemed necessary by the Alabama College System. No representation regarding industrial standards is implied. Similarly, any reasonable accommodations made will be determined and applied to the respective TEBI program and may vary from reasonable accommodations made by healthcare employers.

The essential functions delineated below are necessary for TEBI program admission, progression and certificate completion and for the provision of safe and effective health care. The essential functions include but are not limited to the ability to:

1) Sensory Perception

a) Visual

- Observe and discern subtle changes in physical conditions and the environment
- Visualize different color spectrums and color changes
- Read fine print in varying levels of light
- Read for prolonged periods of time
- Read cursive writing
- Read at varying distances
- Read data/information displayed on monitors/equipment

b) Auditory

- Interpret monitoring devices
- Distinguish muffled sounds heard through a stethoscope
- Hear and discriminate high and low frequency sounds produced by the body and the environment
- Effectively hear to communicate with others

c) Tactile

- Discern tremors, vibrations, pulses, textures, temperature, shapes, size, location and other physical characteristics

d) Olfactory

- Detect body odors and odors in the environment

2) Communication/ Interpersonal Relationships

- Verbally and in writing, engage in a two-way communication and interact effectively with others, from a variety of social, emotional, cultural and intellectual backgrounds
- Work effectively in groups
- Work effectively independently
- Discern and interpret nonverbal communication
- Express one's ideas and feelings clearly
- Communicate with others accurately in a timely manner
- Obtain communications from a computer

3) Cognitive/Critical Thinking

- Effectively read, write and comprehend the English language
- Consistently and dependably engage in the process of critical thinking in order to formulate and implement safe and ethical decisions in a variety of health care settings
- Demonstrate satisfactory performance on written examinations including mathematical computations without a calculator
- Satisfactorily achieve the program objectives

4) Motor Function

- Handle small delicate equipment/objects without extraneous movement, contamination or destruction
- Move, position, turn, transfer, assist with lifting or lift and carry clients without injury to clients, self or others
- Maintain balance from any position
- Stand on both legs
- Coordinate hand/eye movements
- Push/pull heavy objects without injury to client, self or others
- Stand, bend, walk and/or sit for 6-12 hours in a clinical setting performing physical activities requiring energy without jeopardizing the safety of the client, self or others
- Walk without a cane, walker or crutches
- Function with hands free for patient care and transporting items
- Transport self and client without the use of electrical devices
- Flex, abduct and rotate all joints freely
- Respond rapidly to emergency situations
- Maneuver in small areas
- Perform daily care functions for the client
- Coordinate fine and gross motor hand movements to provide safe effective patient care
- Calibrate/use equipment
- Execute movement required to provide patient care in all health care settings
- Perform CPR and physical assessment
- Operate a computer

5) Professional Behavior

- Convey caring, respect, sensitivity, tact, compassion, empathy, tolerance and a healthy attitude toward others
- Demonstrate a mentally healthy attitude that is age appropriate in relationship to the client
- Handle multiple tasks concurrently
- Perform safe, effective patient care for clients in a caring context
- Understand and follow the policies and procedures of the College and clinical agencies
- Understand the consequences of violating the student code of conduct
- Understand that posing a direct threat to others is unacceptable and subjects one to discipline
- Not to pose a threat to self or others
- Function effectively in situations of uncertainty and stress inherent in providing patient care
- Adapt to changing environments and situations
- Remain free of chemical dependency
- Report promptly to clinicals and remain for 6-12 hours on the clinical unit
- Provide patient care in an appropriate time frame
- Accepts responsibility, accountability, and ownership of one's actions
- Seek supervision/consultation in a timely manner
- Examine and modify one's own behavior when it interferes with patient care or learning

Upon admission, an individual who discloses a disability can request reasonable accommodations.

Individuals will be asked to provide documentation of the disability in order to assist with the provision of appropriate reasonable accommodations. The Workforce Development Division will provide reasonable accommodations but is not required to substantially alter the requirements or nature of the program or provide accommodations that inflict an undue burden on the college. In order to be admitted, one must be able to perform all of the essential functions with or without reasonable accommodations. If an individual's health changes during the program of learning, so that the essential functions cannot be met with or without reasonable accommodations, the student will be withdrawn from the Workforce Development program. The Workforce Development faculty reserves the right at any time to require an additional medical examination at the student's expense in order to assist with the evaluation of the student's ability to perform the essential functions.

Requests for reasonable accommodations should be directed to: Melinda Edwards, Wallace State Community College, melinda.edwards@wallacestate.edu (256)352-8172.

Wallace State Community College
Training for Existing Business and Industry

**Policy on Drug and Alcohol Testing of Students Enrolled in
Health Professional Program**

Wallace State Community College supports the concept of a Drug Free Workplace and prohibits the unlawful manufacture, distribution possession or use of a controlled substance on any property owned, leased or controlled by the college or during any activity conducted, sponsored, authorized by or on behalf of Wallace State Community College. The college prohibits any form of on-campus (or campus affiliated) use and/or possession of illegal drugs, drug paraphernalia, or alcoholic beverage by students, which is in direct violation of local, state, and federal law. Students found to be involved in any of these activities are subject to disciplinary Action

Education of Health Professional students at Wallace State Community College requires collaboration between the college and clinical agencies. Education of these students cannot be complete without a quality clinical education component. The College shares an obligation with the clinical agency to protect the agency's patient to the extent reasonably possible from harm due to students who are under the influence of illegal drugs or alcohol while in the clinical agency.

The College wishes to ensure that the health and safety of students and patients are not compromised and that clinical affiliation agreements exist to provide students with quality clinical education experiences. Therefore, it is the policy of Wallace State Community College-Hanceville that students enrolling in health profession programs submit to drug testing. This testing can be announced or unannounced and will occur upon admission and annually thereafter, for cause or at random intervals. This policy only authorizes drug testing of students who voluntarily choose to enroll in health professional programs at the college. Any student enrolling in a health professional program will be required to submit to such testing.

GUIDELINES FOR DRUG TESTING OF HEALTH PROFESSION STUDENTS

I. PERSONS TO BE TESTED

Any student who is accepted into any Health Program at Wallace State College- Hanceville will be required to submit to annual drug testing.

II. TYPES OF TESTS TO BE PERFORMED

A. Drug testing will occur prior to clinical placement and annually thereafter. Only drug tests conducted by college authorized agencies will be accepted. Cost of drug testing will be paid by student.

B. In addition to annual drug testing, further testing may be required of the student for cause or at random intervals and may be either announced or unannounced. This testing will be required at the discretion of the college or the clinical agency.

III. DRUGS TO BE TESTED

All students will be tested for alcohol and the following ten (10) drugs: amphetamines, barbiturates, benzodiazepines, cocaine metabolites, marijuana metabolites, methadone, methaqualone, opiates, phencyclidines and propoxyphene. Testing for additional substances may occur based on clinical affiliation agreement requirements.

IV. CONSENT TO DRUG TESTING

A. The student must provide written consent to provide specimens for the purpose of analysis. If the student is under eighteen (18) years of age, the student's parent or legal guardian must sign the drug testing consent form in addition to the student. The signed consent must be returned to the instructor of the health program.

B. The signed consent form will be maintained in the student permanent record. A copy of the consent form will be maintained by the Training for Existing Business and Industry department.

C. Students have the right to refuse to consent to drug testing. However, students who decline will be refused access to clinical education facilities and will be unable to achieve the required clinical experiences and objectives of the program. Refusal to submit to drug testing will result in dismissal from the health program.

V. SPECIMEN COLLECTION

1. The collector shall be a licensed medical professional or technician who has been trained and certified for collection in accordance with chain of custody and control procedures. This person cannot be a college employee.

2. The designated collection site and specimen collection procedures must be secured in accordance with chain of custody and control procedures. Security during collection may be maintained by effective restriction of access to the collection materials and specimens.

3. When the student arrives at the collection site, the collector shall ensure that the student is positively identified as the individual selected for testing. This identification will be done through the presentation of photo identification (driver license with picture). If the student's identity cannot be established, the collector shall not proceed with the collection until such identification can be made.

4. The student will complete and sign the vendor-provided chain of custody/consent form for the collection.

5. If the student is unable to provide an adequate specimen during the collection process, another collection time will be scheduled. Students will not be allowed into the clinical setting until negative results are received by the instructor.

6. Students may be excused from announced or unannounced drug testing only under the most extreme circumstances (e.g., illness, family emergency). The student will be required to provide written verification for such absences. Approval of a verifiable absence is the responsibility of the program director. Students will have to complete the drug testing process before being allowed to attend or return to the clinical agency.

VI. DRUG TESTING LABORATORY

Drug testing for Wallace State Community College students can only be conducted by the college approved vendor.

VII. MEDICAL REVIEW OF POSITIVE DRUG TEST RESULTS

A. All specimens identified as positive on the initial test shall be confirmed by the testing laboratory. Any positive test result will be reviewed by the Medical Review Officer.

B. A Medical Review Officer (MRO), who shall be a licensed physician with knowledge of substance abuse disorders, shall review and interpret positive test results. The MRO shall:

1. Examine alternate medical explanations for any positive test results. This action may include conducting a medical interview and review of the student's medical history or review of any other relevant biomedical factors.

2. Review all medical records made available by the tested student when a confirmed positive test could have resulted from legally prescribed medication. Prior to making a final decision on the results of the confirmed positive test, the MRO shall give the student an opportunity to discuss the results. The MRO shall contact the student directly to discuss the results of the test.

VIII. REPORTING OF DRUG TEST RESULTS

A. Written notification indicating either a positive or negative drug screen shall be provided to the instructor and Training for Existing Business and Industry department. Test results will not be released to any individual who has not been authorized to receive such results. Students shall not be allowed to hand deliver any test results to college representatives. Notification of drug screening results can only be delivered in a manner that insures the integrity, accuracy and confidentiality of the information. Wallace State College may refuse to accept any test result that does not meet the requirements of the policy and guidelines.

B. Whenever possible, report of drug screening to clinical affiliates will be handled by aggregate data reporting. The clinical agency will be notified of individual student drug screening results or provided with copies of drug screening results only when required by clinical affiliation agreement.

C. Negative test results must be kept on file for one year after the student's last date of attendance at the college. Positive test results must be maintained on file for five years after the student's last date of attendance at the college.

IX. PENALTIES FOR A CONFIRMED POSITIVE DRUG TEST OR REFUSAL TO BE TESTED

A. **Positive Test** A student with a positive drug test will be dismissed from the health program.

B. **Refusal to be Tested**
A student's refusal at any point to be tested for drugs will result in permanent dismissal from the health program. The instructor shall be notified of any refusal to be tested.

C. **Failure to Appear**
A student who fails to appear for drug testing will be given an opportunity to explain the failure to appear. If the student agrees to be tested, another collection will be scheduled. If the student fails to appear for the second time, the failure to appear shall be treated as if a positive test result had occurred. The instructor shall be notified of any failure to appear.

Revised 12-14, me

WALLACE STATE COMMUNITY COLLEGE

CONSENT TO DRUG TESTING

I have received and carefully read the Drug testing policy and fully understand its contents. I understand that by enrolling in a health professional program, I will be required to submit to mandatory drug testing. I voluntarily agree to submit to specimen collection for analysis for drug use. I understand that my continued participation in the healthcare program is conditioned upon satisfaction of the drug testing requirement through the college designated vendor. **I further understand that if I have a positive drug screen that I will be dismissed from the program.**

I further agree and consent to the disclosure of results of drug testing and their release to the Training for Existing Business and Industry department, instructor and appropriate clinical representative(s) in order that my eligibility to participate in the required clinical activities can be determined.

Date

Student's Signature

Student Number

Student's Name Printed

Program Director

Parent's/Legal Guardian's Signature
(If student is a minor)

Program

Wallace State Community College
Training for Existing Business and Industry

Background Check Policy

Education of students enrolled in Training for Existing Business and Industry Courses at Wallace State Community College requires collaboration between the college and clinical affiliates. Education of these students cannot be complete without a quality clinical education component. The college shares an obligation with the clinical affiliates to protect the affiliate's patients to the extent reasonably possible from harm. The college wishes to ensure that the health and safety of students and patients are not compromised and that clinical affiliation agreements exist to provide students with quality clinical education experiences.

In establishing clinical affiliation agreements, healthcare educational programs are contractually obligated to comply with the requirements set forth by clinical affiliates. Student enrolled in health care educational program must conform to the rules, policies and procedures of the clinical affiliate in order to participate in clinical learning experiences. It is therefore the policy of Wallace State Community College that students enrolling in health profession programs submit to background checks.

Guidelines for Background Check On Health Profession Students

I. Persons to be Tested

Any student who is accepted into any Health Program at Wallace State Community College will be required to undergo a background check.

II. Types of Background Checks

Students shall received notification of the requirement for the background check prior to admission and upon admission to a health care program.

The background check may include, but is not limited to, searches, histories, and verifications as indicated below:

- **Positive Identification**
- **Maiden/AKA Name Search**
- **Social Security Number Trace** which is a verification that the number provided by the individual was issued by the Social Security Administration and is not listed in the files of the deceased. The SSN trace is also used to locate additional names and addresses.
- **Residency History**
- **Education Verification**

- **Employment Verification** which may include the reason for separation and eligibility for re-employment for each employer. The last seven years may be searched if the student is 21 years of age or older.
- **Healthcare Employment Verification Network Search**
- **Nurse Aide Registry**
- **Professional License/Certification Verification**
- **Personal References/Interviews**
- **Seven Year Criminal Search** reveals felony and misdemeanor convictions, and pending criminal cases usually including the date, nature of the offense, sentencing date, disposition, and current status. The seven-year criminal background check may occur in current and previous counties of residence and employment through a search of court records. City, state, and/or federal records may also be searched. Federal criminal cases may reveal tax evasion, fraud, drug offenses, etc.
- **Most Wanted List**
- **National Criminal Database Searches**, which includes a compilation of historical data, collected from multiple sources in multiple states by background check companies.
- **Adult and Child Abuse/Neglect Registries**
- **National Sex Offender/Predator Registry Search** which includes a search of the state or county repository for known sexual offenders.
- **Misconduct Registry Search**
- **Office of the Inspector General (OIG) List of Excluded Individuals/Entities** which identifies those individuals who have committed offenses deeming them ineligible to care for patients receiving Medicare, Medicaid and other Federal health care benefits.
- **General Services Administration (GSA) Excluded Parties List Service** identifies the List of Parties Excluded (EPLS) which identifies those excluded throughout the US Government from receiving Federal contracts and certain types of Federal financial/non-financial assistance/benefits.
- **Executive Order 13224 Terrorism Sanctions Regulations**
- **Government Suspect /Watch List**
- **Office of Foreign Assets Control (OFAC) list of Specially Designated Nationals (SDN)** which includes individuals associated with terrorism and Narcotics Trafficking.
- **FACIS Database Searches** includes OIG, GSA, OFAC and other sources.
- **National Healthcare Data Bank Search and Sanction Report** may include Medicare/Medicaid Sanction Search, OIG, GSA, and FDA Debarment Check.
- **Fingerprinting and the National Criminal Information Center** which may reveal National Wants and Warrants information
- **International Criminal**
- **Applicable State Exclusion List**
- **Any Other Public Record**

III. Consent

Students must sign the appropriate consent(s) for a background check at the time of admission to a health care program. A copy of the signed consent(s) will be maintained in the permanent student record. The student will provide applicable consent(s) to the vendor conducting the background check. If the student is under eighteen (18) years of age, the student's parent or guardian must sign the consent form in addition to the student.

IV. Background Check Procedure

The background checks will be scheduled and conducted by a college-designated vendor according to program specific deadlines. **Background checks performed by any other vendor or agency will not be accepted.** Students reinstated to a program after an absence from program coursework of one semester or more, will have to repeat background testing.

The student will be responsible for the cost of the background check. Any student failing to pay the fee in effect at the time of the background check by the published deadline and/or refusing to sign the consent form(s) will not undergo a background check and will be prohibited from attending clinical learning experiences. The student in this situation will be dismissed from the program.

If a student is experiencing extenuating circumstances that prohibit completion of the background check by the deadline, they should contact the instructor who will determine if the student will be allowed to proceed with the background check. No student will be allowed to attend the clinical experience until the full background check process is completed.

Some clinical affiliates may require an additional background check to fulfill requirements above those required by this procedure. If required, the expense of additional background checks will be the responsibility of the student.

V. Results

Results of the background check will be sent to the instructor. A copy of all results will be maintained by the Training for Existing Business and Industry department. Designees at the clinical affiliate will be provided with a copy of negative results for students assigned to that agency.

The student with a positive background check will be informed of the results by the instructor and/or background check vendor. The student will be provided with a copy of the background check if the results are positive. No copy will be provided to the student if results are negative.

Students with a positive background check will be denied assignment to a clinical facility pending resolution of the background check finding. Students will be advised to contact the background check vendor to dispute any information reported and to clear any findings of the background check.

Background checks which could render a student ineligible to obtain clinical learning experiences include, but are not limited to, certain convictions or criminal charges which

could jeopardize the health and safety of patients and sanctions or debarment. Felony or repeated misdemeanor activity within the past seven (7) years and Office of the Inspector General violations will normally prohibit the obtainment of clinical learning experiences with clinical affiliate(s). Positive findings on background checks can have licensure implications upon graduation from a health program.

Students who are unable to resolve a positive background check will be dismissed from the health care program. The student will be advised by the instructor as to their eligibility for program re-entry and the mechanisms for reapplication to the program.

Results will be securely filed in the office of the health program. The healthcare program designee will have access to the results of the background check. Designees at the assigned clinical affiliates will be provided negative results on all students.

Results of any student's background screen will be shared only on a need to know basis with the exception of legal, disciplinary or appeal actions which require access to the results.

Background Check Consent and Release Form

I have received and carefully read the Background Check policy and fully understand its contents. I understand that the healthcare program to which I am admitted requires a background check to comply with clinical affiliate contracts. By signing this document, I am indicating that I have read and understand Wallace State Community College's policy and procedure for background checks. I voluntarily and freely agree to the requirement to submit to a Background Check and to provide a negative Background Check prior to participation in clinical learning experiences. I further understand that my continued participation in the healthcare program is conditioned upon satisfaction of the requirement of the Background Check with the vendor designated by the College. **I further understand that if I have a positive Background Check and I am denied access to clinical learning experiences at the clinical affiliate(s), that I will be dismissed from the program.**

A copy of this signed and dated document will constitute my consent for release of the original results of my Background Check to the College. I direct that the vendor hereby release the results to the College. A copy of this signed and dated document will constitute my consent for the College to release the results of my background check to the clinical affiliate(s)' specifically designated person(s). I direct the College to hereby release the results to the respective clinical affiliate(s).

I agree to hold harmless the College and its officers, agents, and employees from and against any harm, claim, suit, or cause of action, which may occur as a direct or indirect result of the background check or release of the results to the College and/or the clinical affiliates.

I understand that should any legal action be taken as a result of the Background Check, that confidentiality can no longer be maintained.

I agree to abide by the aforementioned policy. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone. I hereby authorize the College's contracted agents to procure a background check on me. I further understand this signed consent hereby authorizes the College's contracted agents to conduct necessary and/or periodic background checks as required by clinical affiliates.

Student Signature

Witness Signature

Student's Printed Name

Witness' Printed Name

Parent's/Legal Guardian's Printed Name

Parent's/Legal Guardian's Signature

Date

Date