

**BEVILL STATE COMMUNITY COLLEGE  
DIVISION OF HEALTH SCIENCES**

**STUDENT DRUG AND ALCOHOL SCREEN POLICY**

As stipulated by the health care agencies with which Bevill State Community College Health Science Programs contracts for clinical experience, students must abide by the policies established by these agencies relative to drug and alcohol screening and any subsequent revisions to the policy in order to participate in clinical experiences at the agency. This includes pre-clinical drug and alcohol screening and random drug and alcohol screening throughout the student's curriculum, as well as, should the student exhibit behaviors indicative of substance abuse during a clinical experience. Fees for all drug and alcohol screening must be paid by the student.

1. Pre-clinical Screening

1. Health Science students will receive notice of the drug screening procedure prior to testing.
2. Health Science Programs will maintain signed consent forms for drug and alcohol screening from each student.
3. Drug screening will be scheduled and conducted by a certified laboratory selected by Bevill State Community College. Students will be assessed a drug testing fee.
4. Any student absent from screening at the randomly selected time must complete testing with the certified laboratory within 24 hours of the randomly selected time.
5. Failure to complete the drug screening as required by Bevill State Community College Health Science Programs shall prohibit the student from continuing in the program in which they are enrolled.
6. Positive drug screens will be confirmed by Gas Chromatography/Mass Spectrometry (GCMS). No sample is reported as positive before it has been tested at least twice.
7. Results of drug screening must be sent directly to the Associate Dean of Health Sciences or designee.
8. Positive drug confirmation will result in the student being immediately withdrawn from the Health Science course in which they are enrolled, by the Division Chair.
9. A student who is unable to complete the clinical component of required courses due to a positive drug screen will be ineligible for re-admission.
10. If the student contests a positive drug screen, a retest of the initial samples will be performed at the student's expense, by a reference laboratory approved by Bevill State Community College.

## II. Reasonable Suspicion Screening

Students may also be required to submit to reasonable suspicion testing as stipulated in the drug screen policy of the clinical agency while participating in clinical experiences. The definition of reasonable suspicion as stated in the substance abuse policies of the clinical agencies may include the following:

1. Observable phenomena, such as direct observation of drug use and/or the physical symptoms or manifestations of being under the influence of a drug;
2. Presence of an odor of alcohol;
3. Abnormal conduct or erratic behavior while in the clinical agency, absenteeism, tardiness or deterioration in performance;
4. A workplace accident;
5. Evidence of tampering with a drug test;
6. Suspected theft of medications including controlled substances while in the agency;
7. Information that the individual has caused or contributed to an incident in the clinical agency;
8. Evidence of involvement in the use, possession, sale, solicitation or transfer of illegal or illicit drugs or alcohol while enrolled in any Health Science Program.

## III. Student Drug Screen Procedure

1. All students will be screened for drug and alcohol prior to clinical placement and randomly thereafter.
2. Students must submit a photo ID and social security number at the time of specimen collection.
3. The Collector will explain the collection.
4. Students must remove unnecessary outer garments (coats, sweaters, etc.) And remove items from pockets when entering the collection site.
5. The collector will obtain a monitored specimen.
6. Temperature, Adulterant and drug testing will be performed on site and referred for confirmation, if indicated.
7. **The following drugs are considered disallowed in the Health Science Programs and are thus, screened: Amphetamines, Barbiturates, Benzodiazepines, Cocaine, Marijuana, Methaqualone, Opiates, PCP, Propoxyphene, Methadone, Ethanol, &/ other scheduled or controlled substances. Testing for additional substances may occur based on clinical affiliation agreement requirements.**

8. Positive screens will be confirmed by Gas Chromatography/Mass Spectrophotometry.
9. The student will be informed of the screening results by the Associate Dean of Health Sciences or designee within seven (7) days of receiving the results.

#### IV. Confidentiality

The Associate Dean of Health Sciences will receive all test results which will be secured by Bevill State Community College. Confidentiality of test results will be maintained with only the Associate Dean or designee, and the student having access to the results with the exception of legal actions that require access to test results.

#### V. Program/Clinical Agency Requirements

Drug screen programs suggested or required by Bevill State Community College and/or various institutions with which the college contracts may vary from time to time in any or all of their aspects. Students will be required to comply with screening which will satisfy any program or requirement established by any health care facility with whom the college contracts for clinical experience, whether preclinical drug screening, random drug screening, or incident related to screening.

**Some of the classes of drugs for which screening will be conducted are available by prescription from health care practitioners. Prescription drugs prescribed to a student by an appropriate health care practitioner may nevertheless be subject to abuse and may give rise to reasonable suspicion testing or incident testing. The fact that a student has a prescription for one or more of the classes of drugs which are legally prescribed by a healthcare practitioner does not necessarily, in and of itself, excuse the student from the effect of this policy.**

**BEVILL STATE COMMUNITY COLLEGE  
DIVISION OF HEALTH SCIENCES**

**ACKNOWLEDGMENT OF STUDENT DRUG AND ALCOHOL SCREEN POLICY**

I certify that I have received a copy of the Bevill State Community College Division of Health Sciences Student Drug Screen Policy. I have read, understand, and agree to the requirements of these drug and alcohol screen guidelines.

I hereby release Walker Baptist Occupational Health, Kroll Laboratory Specialists, Bevill State Community College, and the Bevill State Faculty, Staff and Associates from any claim in connection with the Drug Screen Policy.

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

\_\_\_\_\_  
**Student's Signature**

\_\_\_\_\_  
**Witness' Signature**

\_\_\_\_\_  
**Student's Printed Name**

\_\_\_\_\_  
**Witness' Printed Name**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Date**

**BEVILL STATE COMMUNITY COLLEGE  
DIVISION OF HEALTH SCIENCES**

**STUDENT DRUG AND ALCOHOL SCREEN POLICY PARTICIPATION FORM**

**I understand that Bevill State Community College Health Science Programs has a required component of clinical rotations.**

**I also understand that certain health care agencies require that, because I am participating in the clinical rotation at these facilities, I will be subject to the same rules as the employees. I understand that these agencies require all employees to have a drug screen which shows negative results for selected classes of drugs and for alcohol. Because of this, I understand that prior to or during participation in the clinical rotations, I must submit to a drug screen and provide a certified negative result from that screen to the Associate Dean of Health Sciences. I also understand that random or incident testing may be required during participation in the program.**

**\* I further understand that if I fail to provide an Adulterant Free certified negative drug result, either on initial pre-clinical screening or on random or incident related screening, I will be unable to continue in the Health Science Program.**

**BY SIGNING THIS DOCUMENT, I AM INDICATING THAT I HAVE READ, UNDERSTAND AND VOLUNTARILY AGREE TO THE BEVILL STATE COMMUNITY COLLEGE HEALTH SCIENCES REQUIREMENT TO SUBMIT TO A BEVILL STATE COMMUNITY COLLEGE ARRANGED DRUG SCREEN AND TO PROVIDE A CERTIFIED NEGATIVE DRUG RESULT.**

**A COPY OF THIS SIGNED AND DATED DOCUMENT WILL CONSTITUTE MY CONSENT FOR THE CERTIFIED LABORATORY PERFORMING THE DRUG SCREEN TO RELEASE THE ORIGINAL RESULTS OF ANY DRUG SCREEN TO THE BEVILL STATE COMMUNITY COLLEGE ASSOCIATE DEAN OF HEALTH SCIENCES, OR DESIGNEE.**

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**Student's Signature**

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**Witness's Signature**

\_\_\_\_\_  
**Student's Printed Name**

\_\_\_\_\_  
**Witness's Printed Name**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Date**

**BEVILL STATE COMMUNITY COLLEGE  
HEALTH SCIENCE DIVISION  
PROGRAM COPY**

**Background Screening / Affidavit Policy**

Healthcare educational programs within the Alabama College System are contractually obligated to comply with the requirements set forth by clinical affiliates. Students enrolled in healthcare educational programs must conform to the rules, policies, and procedures of the clinical affiliates in order to participate in clinical learning experiences, which include background checks. **Certain clinical facilities utilized by the BSCC Health Science programs require criminal background checks / affidavit declaring that the student has no criminal history.**

**BSCC is contractually obligated to comply with requirements set forth by agencies used for clinical rotations. All Health Science students are required to have background checks completed to meet the requirements of clinical agencies in accord with the Joint Commission Accreditation of Healthcare Organizations (JCAHO) standards. Background checks will be conducted by one private vendor approved by school officials. Background checks done by any vendor or agency that is not approved will not be accepted. Background check results will be completed before newly admitted or returning nursing students will be allowed to register for courses. Failure to participate in clinical learning experiences for courses containing a clinical component results in failure of the course(s). A student denied clinical access by any clinical affiliate will be dismissed from the program.**

**Students contract directly with the approved vendor and results are confidential. The clinical agency/agencies will make the decision to approve or deny the student for clinical privileges. Students must correct any problems or issues found with the clinical agency. The Associate Dean of Health Science will have access to an approved/denied list. Refusal of an agency to accept a student will prevent a student from completing the Health Science program in which he/she is enrolled. The student/s will be responsible for clearing any denials reported with the clinical agency. Students who are unable to resolve any denials will be withdrawn from their enrolled Health Science program. Some clinical settings may continue to require a separate background check, including fingerprints. The costs of the background checks are the responsibility of the student. Students may be subject to more than one criminal background during their education experience. At any time the student fails to clear a criminal background check with a clinical agency he/ she will be withdrawn from the college. Students who have been out of a health science course for more than one semester must repeat the criminal background check.**

## Licensure Implications

Students enrolled in healthcare educational programs should be aware that positive findings on background checks can have licensure implications

## II. Guidelines

Background checks will be conducted according to the following guidelines:

1. A signed affidavit or background check will be required prior to or during enrollment in the health science program.
2. The cost of the background check / affidavit will be the responsibility of the student.
3. The Health Science Program the student is enrolled in will maintain signed consent forms for background screening / affidavit from each student.
4. Failure to pay appropriate fees and to consent to the background screening / affidavit by the published deadline will prohibit the student from continuing in any Health Science program.
5. Students enrolled in healthcare educational programs must conform to the rules, policies, and procedures of the clinical affiliates in order to participate in clinical learning experiences, which includes background checks. **Failure to participate in clinical learning experiences for courses containing a clinical component results in failure of the course(s). A student denied clinical access by any clinical affiliate will be dismissed from the program.**
6. The background checks will be scheduled and conducted by a designated vendor determined by the College. Background checks performed by any other vendor or agency that is not approved by the healthcare program designee will not be accepted. Results of the background check will be sent to the healthcare program designee(s) and/or the applicable clinical affiliate(s). **Some clinical affiliates may continue to require an additional background check, which may include fingerprinting.**
7. If the student has a positive background check and is not allowed by the clinical affiliate(s) to participate in clinical learning experiences, **the student will receive an "F" for the course & will be ineligible for admission or readmission to any Health Science program @ BSCC.**
8. The background check includes, but is not limited to:
  - a. **Positive Identification**
  - b. **Maiden/AKA Name Search**
  - c. **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.

- d. Residency History**
- e. Driving License/Driving History/Motor Vehicle Records** including any traffic citations.
- f. Education Verification**
- g. 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.
- h. Healthcare Employment Verification Network Search**
- i. Nurse Aide Registry**
- j. Professional License/Certification Verification**
- k. Personal References/Interviews**
- l. Seven Year Criminal and Civil Record Search** reveals felony and misdemeanor convictions, and pending 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.
- m. Most Wanted List**
- n. National Criminal Database Searches**, which includes a compilation of historical data, collected from multiple sources in multiple states by background check companies.
- o. Adult and Child Abuse/Neglect Registries**
- p. National Sex Offender/Predator Registry Search** which includes a search of the state or county repository for known sexual offenders.
- q. Misconduct Registry Search**
- r. 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.
- s. 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.
- t. Executive Order 13224 Terrorism Sanctions Regulations**
- u. Government Suspect /Watch List**
- v. Office of Foreign Assets Control (OFAC) list of Specially Designated Nationals (SDN)** which includes individuals associated with terrorism and Narcotics Trafficking.
- w. FACIS Database Searches** includes OIG, GSA, OFAC and other sources.
- x. National Healthcare Data Bank Search and Sanction Report** may include Medicare/Medicaid Sanction Search, OIG, GSA, and FDA Debarment Check.

y. **Fingerprinting and the National Criminal Information Center** which may reveal National Wants and Warrants information

z. **International Criminal**

aa. **Applicable State Exclusion List**

bb. **Any Other Public Record**

- The student with a positive background check will be informed of the results by the healthcare program designee and/or by the background check vendor.
- Positive background checks will be reported to the individual(s) at the respective clinical affiliate(s) that is specifically designated by the clinical affiliate(s), which often is the Director of Human Resources. The individual(s) will be responsible for determining whether or not the student will be allowed to participate in clinical learning experiences with the respective clinical affiliate(s) according to the rules, policies, and procedures of the clinical affiliate(s). Students will sign consent(s) prior to disclosure of a positive background check to clinical affiliate(s).
- The student will be provided a copy of background check results, if positive. Students should contact the vendor for the background checks to see a copy of the report.
- Background checks which could render a student ineligible to participate in 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 participation in clinical learning experiences with clinical affiliate(s), but each positive background check will be reviewed individually by the clinical affiliate(s). **In certain circumstances, for example, repeated behaviors, the vendor may conduct a background check further back than the past seven years; findings on such a background check can also render an individual ineligible to participate in clinical learning experiences.**

IV. **Confidentiality**

The healthcare program designee(s) will have access to the results of the background check as will the clinical affiliate(s) designee(s). The results will be shared only on a need to know basis.

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**STUDENT SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**CAMPUS DIVISION CHAIR**

\_\_\_\_\_  
**DATE**

**Revised: 09-09-08**



**Dear Student:**

*Bevill State Community College* now requires background checks for all students applying to the Health Sciences Program. This is to ensure a safe environment for both students and the public.

*Bevill State Community College* has worked with Verified Credentials, Inc. to establish an acceptable screening procedure. The price of your background check will be \$45.00. **Students who fail to submit a background check will not be considered for the Health Sciences Program or if already enrolled in a Health Science program will be immediately terminated/dismissed.**

Please follow the directions below for submitting your application to Verified Credentials:

- Go to <http://www.myvci.com/bevillsc>
- Select your program from the drop down menu.
- Complete and sign disclosure.
- Complete information page.
- Step 3 allows payment by Credit Card, Prepaid Credit Cards (make sure prepaid card includes the cost of the card and the background screening package), Bank Transfer or Money Order. *If utilizing Money Order, your order will not be placed until your payment has been received.* Make selection and place order.

Note: To pay by credit or debit card, the name entered on Step 2 must match exactly what appears on the credit or debit card, otherwise payment will not be processed.

Upon completion, the results of the background screening will be sent to you and to *Bevill State Community College* via email. If any information is found that would negatively affect your eligibility for the Health Sciences Program or is inaccurate, you have the right to challenge the information through the Adverse Action process associated with Verified Credentials. If you have any questions, please contact Client Services at 888-938-6090.

It is important that you submit information in a timely fashion. **The deadline for submitting your information is Friday, October 17<sup>th</sup>, 2008.** Thank you for your prompt attention to this request.

College Contact: Ms. Patricia Reeves, Interim Associate Dean of Health Science

Program Name: Health Science Division

College or University Name: Bevill State Community College

To begin ordering your background check report, <http://www.myvci.com/bevillsc>