



Office of Admissions \* P.O. Box 967 \* Roseburg, Oregon 97470  
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Health Occupations Dept. \* 541-440-4613 \* [sandy.hendy@umpqua.edu](mailto:sandy.hendy@umpqua.edu)

## NRS 11 - Nursing Assistant

## 2008 - 2009 Application Packet

Nursing Assistant offered at Umpqua Community College (UCC) is a stand-alone program and does not require the applicant to enroll in additional coursework.

The Nursing Assistant Program is an Oregon State Board of Nursing (OSBN) approved course, designed to prepare students for the nursing assistant role in health care agencies. The course is a 164+ hour training course, which combines classroom, skills lab instruction, and hands-on clinical experience. The course includes instruction in basic bedside nursing skills, basic restorative skill, mental health and social service needs, personal care skills, and knowledge of clients' rights. Students will gain the knowledge and skills necessary to care for clients in long-term care and acute care facilities that are under direct care of a licensed nurse.

Following successful completion of the course, a certificate of completion is awarded to the student. The student may become certified through the OSBN by applying for certification with the OSBN and successfully completing the Oregon Nursing Assisted CNA 1 Exam.

**Course restrictions:** Conviction of a felony and/or drug use or distribution may result in the OSBN withdrawing the privilege of writing the Certified Nursing Assistant examination. If the student has been convicted of a criminal offense, other than a minor traffic violation, it is recommended that he/she check with the Board of Nursing to verify eligibility for certification.

**Criminal Background Checks:** Students are required to complete and pass an Oregon Criminal Background Check. This procedure is done by obtaining fingerprints and submitting them to the Oregon State Police. If the student has lived outside of the state of Oregon, they need to request a Federal Search. Student must produce documentation of a clear criminal history prior to starting the clinical portion of the course. For more information, contact the Nursing Program Director at 440-4613. Please refer to information provided in following pages.

**Students must show evidence that they have obtained their fingerprints and begun the process of a criminal history clearance check and immunization on the 1<sup>st</sup> day of class!**

Attendance at **every** class and clinical session is required. This is a requirement of the OSBN, and neither the instructor nor the Program Director can waive this requirement. **If you do not plan to attend every class and clinical, you should not enroll in this course because you will not pass the course and you will not receive a refund of course tuition and fees.**

The ability to read and understand English at a tenth grade level of competency is important for success in the course. All students are required to have a TB screening test and must provide an official written report of this to the instructor prior to first clinical day. Students born after 1956 must also provide, prior to first day of class, official written proof of immunity against measles (rubella and rubeola). The first injection of the three part immunization series for hepatitis "B" is required prior to the first day of class.

### Entrance Requirements

Once applicants have met program requirements as listed below; they will be accepted on a first-come, first-served basis. Therefore, it is important to follow the steps below as quickly as possible.

**Applicant must** be 16 years of age. High School students may apply with written authorization from their high school.

**Applicant must** take UCC's placement tests and score 30 or more on Reading, Writing, and Math.

The following functional abilities are considered to be essential for success in UCC Nursing Assistant Course: ***Gross Motor Skills, Fine Motor Skills, Physical Endurance, Physical Strength, Mobility, Hearing, Visual, Tactile, Smell, Reading, mathematics, Emotional Stability, Analytical Thinking, Critical Thinking Skills, Interpersonal***

***Skills, & Communication Skills.*** All students in the program are required to meet these essential functions. If you have questions about your ability to meet the program requirements, please contact the Director of Health Occupations at 440-4613 or the course instructor at 440-4614. Federal laws have been designed to prevent discrimination of person with disabilities. If you require any special arrangements or accommodations during your program of study, please contact the Disabilities Office at 440-7760 but one must understand the scope of work that the nursing assistant does requires certain physical skills.



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## Application Procedure & Checklist

To enroll in UCC's Nursing Assistant course you *MUST* follow the directions below.

1. Submit an Umpqua Community College Application for Admission with application fee of **\$25** to the UCC Admissions Office (if not already a current student).
2. Request a copy of your "**UCC Placement Scores**" or make an appointment to take the Placement Test in UCC's Counseling Center, 541-440-4610.
3. Provide **written official proof** that you have begun the criminal background check. Bring a copy of your receipt that you have obtained your fingerprints or bring your fingerprints to the first day of class.
4. Provide **written official proof (photocopies)** of the following immunizations to the first day of class.
  - a. **Hepatitis B** required.
    - Vaccine series in progress, with first dose prior to the first day of class and second dose at one month, which must be completed prior to beginning the clinical component of the course (Note: immunity cannot be established until after the third dose 6 months from first dose and therefore is not required for vaccine series in progress).
    - **OR** official documentation of results of antibody test showing immunity is mandatory. Documentation of the series of three Hepatitis B vaccination is also preferred, if available. If not available, provide estimated dates for the series. Required Hepatitis B titer documenting immunity for completed series, date of Hepatitis B Surface Antibody Titer and results if series completed more than six months ago. A copy of the Hepatitis B Titer report **must** be included in your documented records.
    - **OR** Medically exempt: People should not get Hepatitis B vaccine if they have ever had a life-threatening allergic reaction to baker's yeast (the kind used for making bread) or to a previous dose of vaccine. **A letter from your physician (on letterhead) is required to document a medical exception.**
    - Hepatitis A/B recommended.
  - b. *If born after 1956* - "**MMR**" Measles/Mumps/Rubella (Rubella & Rubeola).
    - Official documentation of two Measles, Mumps, and Rubella (MMR) vaccines, at least 4 weeks apart.
    - **Or** vaccine series in progress, with first dose prior to the first day of class and second dose at one month, which must be completed prior to beginning the clinical component of the course.
    - **Or** laboratory evidence of measles, mumps and rubella immunity [ "indeterminate" or "equivocal" level of immunity upon testing is considered non-immune ]:
      - **Required: Measles (Rubeola) Titer Documenting Immunity**
        - Date of Measles titer **and** results. A copy of the Measles Titer Report **must** be included in your documentation packet.
      - **Required: Mumps Titer Documenting Immunity**
        - Date of Mumps titer **and** results. A copy of the Mumps Titer Report **must** be included in your documentation packet.

➤ **Required: Rubella (German Measles) Titer Documenting Immunity**

- Date of Rubella titer **and** results. A copy of the Rubella Titer Report **must** be included in your documentation packet.
- **Or** birth before 1957, which is generally considered acceptable evidence of measles, mumps, and rubella immunity. It is strongly recommended that a dose of MMR be administered to unvaccinated health care providers born before 1957 if there is no laboratory evidence of immunity. Provide copy of documentation with proof of birth date.
- **Or** medically exempt:
  - People should not get MMR vaccine that have ever had a life-threatening allergic reaction to gelatin, the antibiotic neomycin, or to a previous dose of MMR vaccine.
  - Pregnant women should wait to get MMR vaccine until after they have given birth. Women should avoid getting pregnant for 4 weeks after getting MMR vaccine.
  - Some people should check with their doctor about whether they should get MMR vaccine, including anyone who:
    - Has HIV/AIDS, or another disease that affects the immune system.
    - Is being treated with drugs that affect the immune system, such as steroids, for 2 weeks or longer.
    - Has any kind of cancer.
    - Is taking cancer treatment with x-rays or drugs.
    - Has ever had a low platelet count (a blood disorder).
- People who recently had a transfusion or were given other blood products should ask their doctor when they may get MMR vaccine.
- Retrieved from the Centers for Disease Control website on 6-10-08. <http://www.cdc.gov/vaccines/vpd-vac/should-not-vacc.htm#mmr>
- **Please Note: A letter from your physician (on letterhead) is required to document a medical exception.**

c. **TB Screening Test** (must be within the last six months)

- A negative tuberculosis skin test (PPD) is required annually and **must be completed, read, and any follow up care completed prior to the first day of class**. When the PPD is done, the test must be read in 48 hours to determine if it is positive or negative. The test is to be read by the institution that administered the PPD.

If the test was positive, students are required to have a chest x-ray to determine state of health. If a student has had a positive TB test in the past, students are required to provide documentation of the positive TB test and a baseline chest x-ray. If a chest x-ray has not been done, this must be completed before the deadline.

**NOTE:** Completion of pre-requisites *does not guarantee* applicant a position in the Nursing Assistant course, nor does it guarantee applicant a position in UCC's Nursing program. All students must go through the registration and application process as defined in UCC's college catalog.

UMPQUA COMMUNITY COLLEGE

NURSING ASSISTANT / NURSING STUDENT

CRIMINAL HISTORY CLEARANCE PROCEDURE

\*NURSING ASSISTANT - Before you start the class you need to submit evidence of beginning the criminal history process. You need to bring a copy of the receipt or your fingerprints to the first day of class in order to start your class. It is now the student's responsibility to obtain a criminal history clearance and submit it to the Nursing Program Director or instructor. Nursing Assistant students cannot attend class without submitting proof that they have begun the process of the criminal history clearance.

Background checks identify issues that may keep a student from completing the clinical experience portion of their program. Being unable to complete the internship/clinical portion of a program can make it impossible to complete a program or receive a degree. A conviction or an arrest does not automatically disqualify an applicant from admission to a program or keep them from clinical experience. Considerations related to admission to a program and/or clinical experience portion of a program for applicants with convictions or arrests include, but are not limited to as per OSBN Nurse Practice Act, Division 63 Criminal Conviction History/Falsification of Application -- Denial of Certification -- 851-063-0110:

(1) The OSBN has determined that the following crimes bear a demonstrable relationship to the role of a CNA and will issue a Notice to Deny Certification to an applicant for certification, renewal of certification or for reactivation of certification as a nursing assistant, following the provisions of the Administrative Procedure Act in contested case hearings, to persons who have been convicted as an adult, or found responsible except for mental illness, or adjudicated as a juvenile for the following crimes as set forth in Oregon law or comparable law in other jurisdictions:

- (a) Aggravated murder, as in ORS 163.095 and 115;
- (b) First Degree Manslaughter, as in ORS 163.118;
- (c) Second Degree Manslaughter, as in ORS 163.125;
- (d) First Degree Assault, as in ORS 163.185;
- (e) Second Degree Assault, as in ORS 163.175;
- (f) First Degree Criminal Mistreatment, as in ORS 163.205;
- (g) Second Degree Criminal Mistreatment, as in ORS 163.200;
- (h) First Degree Kidnapping, as in ORS 163.235;
- (i) First Degree Rape, as in ORS 163.375;
- (j) Second Degree Rape, as in ORS 163.365;
- (k) Third Degree Rape, as in ORS 163.355;
- (l) First Degree Sodomy, as in ORS 163.405;
- (m) Second Degree Sodomy, as in ORS 163.395;
- (n) Third Degree Sodomy, as in ORS 163.385;
- (o) First Degree Unlawful Sexual Penetration, as in ORS 163.411;
- (p) Second Degree Unlawful Sexual Penetration, as in ORS 163.408;
- (q) First Degree Sexual Abuse, as in ORS 163.427;
- (r) Second Degree Sexual Abuse, as in ORS 163.425;
- (s) Contributing to the Sexual Delinquency of a Minor, as in ORS 163.435;
- (t) Sexual Misconduct, as in ORS 163.445;
- (u) Child Abandonment, as in ORS 165.535.

(2) Any individual who applies for certification as a nursing assistant, who has a history of arrests and convictions over an extended period of time, will be issued a Notice to Deny Certification following the provisions of the Administrative Procedure Act in contested case hearings.

(3) All other applicants with conviction histories, other than those listed above, including crimes which are drug and alcohol related, will be considered on an individual basis. The following factors will be considered by the Board:

- (a) Evidence of rehabilitation;
- (b) The length of time since the conviction to the time of application for certification as a nursing assistant;
- (c) The circumstances surrounding the commission of the crime which demonstrate that a repeat offense is not likely; and
- (d) Character references.

(4) Any individual who applies for certification as a nursing assistant, and supplies false or incomplete information to the Board on an application for certification regarding the individual's criminal conviction record, may be issued a Notice to Deny Certification under the provisions of the Oregon Administrative Procedure Act in contested case hearings.

**IF YOU HAVE QUESTIONS ABOUT PERSONAL CIRCUMSTANCES, CALL THE OSBN OFFICE AND SPEAK TO ONE OF THE PRACTICE ADVISORS. 1-971-673-0685.**

It is also advised the applicant visit Department of Human Services, Administrative Service Division web site for potentially disqualifying crimes at [http://www.oregon.gov/DHS/admin/dwssrules/adopted/407\\_007\\_a.pdf](http://www.oregon.gov/DHS/admin/dwssrules/adopted/407_007_a.pdf) and view the details of Division 7 Criminal History Check Rules.

Note: The College is not responsible for assuring you meet certification/licensure eligibility requirements. A previous criminal background may prohibit you from obtaining certification/licensure and/or employment despite successful completion of the Umpqua Community College program.

**To obtain fingerprints the student shall:**

1. Call the Douglas County Sheriff's Office (or any sheriff's department, FBI offices, local police stations, etc.), Concealed Handgun Department at 957-2021 to schedule an appointment for fingerprints.
2. Bring photo ID to fingerprint appointment.
3. Appointments are scheduled Mondays through Thursdays from 8 am – 5 pm.
4. The fee is \$15 (VISA, Check, Cash or Mastercard) payable at the time of fingerprinting.
5. If you are out of district, you may need to check with your local Oregon State Police Office to find out how to obtain a background check.

**After obtaining fingerprints:**

1. Use the attached form to order your Personal Criminal History Check. The fee is \$33. They state you should receive a response in 2-3 weeks, but it could take longer.
2. Once you obtain your clearance, make a copy and turn it into the Nursing Program Director, **"PRIOR"** to the start of clinicals.

**COPY OF OWN RECORD REQUEST**

This form is to be used **ONLY** when requesting a copy of **YOUR OWN** Oregon Criminal History information or clearance letter. This form may be copied.

NAME: \_\_\_\_\_  
Last First Middle

OTHER NAMES USED: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
month day year

SOCIAL SECURITY NUMBER: (optional) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

YOUR MAILING ADDRESS: \_\_\_\_\_  
Street or P.O. Box

\_\_\_\_\_ City State Zip Code

\_\_\_\_\_ Country

TELEPHONE (\_\_\_\_\_) \_\_\_\_\_

**MY CHECK OR MONEY ORDER, PAYABLE TO OREGON STATE POLICE, IS INCLUDED FOR THIS SERVICE AS FOLLOWS:**

COPY OF OWN RECORD (\$33.00)	\$ _____
PLEASE NOTARIZE RESPONSE (\$5.00)	\$ _____
TOTAL INCLUDED	\$ _____

\*\*Your fingerprint card will be returned with your response.

Mail this document with your fingerprints (and money) to the following address:

**Oregon State Police  
Identification Services Section  
Unit 11  
P.O. Box 4395  
Portland, OR 97208-4395**

The results, along with the fingerprint cards submitted will be returned to you. Please allow 5-10 business days to receive your response. **DUE TO THE CONFIDENTIALITY OF CRIMINAL HISTORY RECORD INFORMATION, RESULTS WILL BE MAILED ONLY TO THE REQUESTOR.** For questions or further information, please contact us at (503) 378-3070.