INFORMATION AND APPLICATION PACKET
NURSE AIDE TRAINING PROGRAM – SPRING 2014
Please read information very carefully.

REQUIRED APPLICATION DOCUMENTS:
✓ COMPLETED APPLICATION
✓ COMPLETED HEALTH HISTORY FORM
✓ COPY OF SOCIAL SECURITY CARD AND VALID PICTURE ID
   (APPLICANTS ARE RESPONSIBLE FOR ENSURING NAMES ON BOTH ID CARDS ARE IDENTICAL BEFORE
   SUBMITTING THEIR APPLICATION TO TEST FOR THE STATE EXAM)
✓ COPY OF CRIMINAL BACKGROUND CHECK CONFIRMATION PAGE THRU PRECHECK, INC.
✓ COPIES OF REQUIRED IMMUNIZATION RECORDS

Application
Interested students must apply to the Nurse Aide training program by submitting all required application documents to the Health Care Programs office at the Del Mar College Center for Economic Development, 3209 S. Staples St., Suite 115. Applicants will be notified by telephone within 1-3 business days when their application is approved. Incomplete applications will be returned to the applicant via postal mail and may delay enrollment in the program. Questions regarding application to the Nurse Aide training program should be directed to (361) 698-2122 or ce@delmar.edu.

Registration
Only applicants who have been approved for the program will be allowed to register in person, by phone, or by fax through the Business and Registration Office located at the Del Mar College Center for Economic Development, 3209 S. Staples St. The Business and Registration Office phone number is (361) 698-2122. Registration is on a first come, first serve basis. Classes may be closed or cancelled without notice; therefore, students are encouraged to register early.

Financial Aid
Financial Aid may be available for training if the student qualifies and if there is funding available. Those students who would like to inquire about and/or apply for Financial Aid information may do so through the Del Mar College Financial Aid Office located on the East Campus by calling (361) 698-1293, or at the West Campus by calling (361) 698-1726, or by accessing the college website at www.delmar.edu/finaid. However, students interested in using financial aid or any other type of funding must have their financial aid voucher or form of payment ready on the day of registration.

English Reading and Writing Proficiency
All students will be expected to be proficient in English reading, writing, and comprehension. There is no placement or entrance examination required. High School diploma or GED is not required to participate in the program but may be required for employment at various nursing and medical facilities.
Required Courses

<table>
<thead>
<tr>
<th>Course Name &amp; Number</th>
<th>Total Contact Hours</th>
<th>Tuition Cost</th>
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</thead>
<tbody>
<tr>
<td>NURA 1001: Nurse Aide for Health Care</td>
<td>(72 contact hours)</td>
<td>$310</td>
</tr>
<tr>
<td>NURA 1060: Nurse Aide Clinical</td>
<td>(72 contact hours)</td>
<td>$390</td>
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(Enrollment is required in both courses and the total $700.00 tuition and fees are due at the time of registration. Tuition and fees may change at the discretion of the department.)

Course Descriptions

NURA 1001: Nurse Aide for Health Care (Lecture and Lab Skills)
Classroom and Laboratory preparation for entry level nursing assistants to achieve a level of knowledge, skills, and abilities essential to provide basic care to residents of long-term care facilities. Topics include resident’s rights, communication, safety, observation, reporting and assisting residents in maintaining basic comfort and safety. Emphasis on effective interaction with members of the health care team. Concurrent enrollment in NURA 1060 is required.

NURA 1060: Nurse Aide Clinical
A continuation of NURA 1001 that includes a health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts for entry level nursing assistants. Direct supervision is provided by the clinical instructor and clinical training is conducted at a local long term care facility. Course cost includes the Texas Department of Aging and Disability Services registry examination fee. Concurrent enrollment in NURA 1001 is required. Prerequisites: NURA 1001

Spring 2014 Schedule

**DEL MAR COLLEGE - CENTER FOR ECONOMIC DEVELOPMENT**
Located at 3209 S. Staples St.

<table>
<thead>
<tr>
<th>COURSE #</th>
<th>COURSE TITLE</th>
<th>DAYS</th>
<th>TIMES</th>
<th>DATES</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURA 1001 11002 Nurse Aide for Health Care</td>
<td>M-F</td>
<td>8-5 p.m.</td>
<td>1/27-2/6</td>
<td></td>
</tr>
<tr>
<td>NURA 1060 11006 Nurse Aide Clinical</td>
<td>M-F</td>
<td>8-5 p.m.</td>
<td>2/7-2/19</td>
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<tr>
<th>COURSE #</th>
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<tbody>
<tr>
<td>NURA 1001 11010 Nurse Aide for Health Care</td>
<td>M-F</td>
<td>8-1 p.m.</td>
<td>2/24-3/21</td>
<td></td>
</tr>
<tr>
<td>NURA 1060 11003 Nurse Aide Clinical</td>
<td>M-F</td>
<td>8-1 p.m.</td>
<td>3/24-4/11</td>
<td></td>
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<tr>
<th>COURSE #</th>
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</thead>
<tbody>
<tr>
<td>NURA 1001 11015 Nurse Aide for Health Care</td>
<td>M-TH</td>
<td>5-9 p.m.</td>
<td>4/7-5/6</td>
<td></td>
</tr>
<tr>
<td>NURA 1060 11019 Nurse Aide Clinical</td>
<td>M-TH</td>
<td>5-9 p.m.</td>
<td>5/7-6/2</td>
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(evening clinical includes 2 Saturday clinical days, 8-5 p.m., to be announced)

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<tr>
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<tbody>
<tr>
<td>NURA 1001 11007 Nurse Aide for Health Care</td>
<td>M-F</td>
<td>8-5 p.m.</td>
<td>4/14-4/24</td>
<td></td>
</tr>
<tr>
<td>NURA 1060 11011 Nurse Aide Clinical</td>
<td>M-F</td>
<td>8-5 p.m.</td>
<td>4/25-5/7</td>
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**DEL MAR COLLEGE – NORTHWEST CENTER (CALALLEN AREA)**
13725 Northwest Blvd. (near intersection of Highway 77 and FM 624)

<table>
<thead>
<tr>
<th>COURSE #</th>
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<th>DAYS</th>
<th>TIMES</th>
<th>DATES</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURA 1001 Nurse Aide for Health Care</td>
<td>M-F</td>
<td>8-1 p.m.</td>
<td>TBA</td>
<td></td>
</tr>
<tr>
<td>NURA 1060 Nurse Aide Clinical</td>
<td>M-F</td>
<td>8-1 p.m.</td>
<td>TBA</td>
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(Term Dates are subject to change at the discretion of the department.)
Textbooks Required

_Hartman’s Nursing Assistant Care: Long-Term Care_
Hartman Publishing, 3rd Edition
ISBN: 978-1604250411

_Workbook: Hartman’s Nursing Assistant Care: Long-Term Care_
Hartman Publishing, 3rd Edition
ISBN: 978-1604250428

Textbooks may be purchased locally at one of the following bookstores:

**DEL MAR COLLEGE**
ON-CAMPUS BOOKSTORE
EAST CAMPUS – HARVIN CENTER,
BALDWIN BLVD. & AYERS ST.
(361) 884-1823

**NEEBO**
3002 AYERS ST.
(361) 881-8312

Required Supplies
- Teal colored scrubs, top and pants (scrub top with front pockets is preferred)
  (Uniforms may be purchased at any uniform shop or scrubs store)
  **STUDENTS MUST WEAR THEIR SCRUBS TO CLASS AND CLINICALS EVERYDAY.**
- Comfortable, mainly white, closed-toe shoes (Some shoes come with some color, for example on the brand logos, which is acceptable but shoes should be predominantly white in color.)
- Uniform patch positioned below the shoulder seam centered on left sleeve only
  (Patches may be purchased at Neebo Bookstore or at the Del Mar College On-Campus Bookstore.)
- Watch with a second hand
- Supply kit which consists of a blood pressure cuff, digital thermometer, stethoscope, gait belt, and pen light (Kits may be purchased at Scrub R Us, Alameda Medical Supply, or any medical store where these items may be sold.)

Immunizations

Past immunization records may be retrieved from your health care provider, the county health department, or your high school registrar. Immunizations may be updated with your health care provider, the county health department, Concentra or any other medical facility that administers vaccines. If you are unable to retrieve past immunization records, please consult with your health care provider or the county health department; there is a possibility you may have to be administered some or all of the vaccines dependent on your medical history. **Only copies of original shot records will be accepted. In addition, records submitted with the application will no longer be released at the student’s request. Therefore, it is the student’s responsibility to ensure only copies of immunization records are submitted with the application.**

Provide your health care provider with the list of immunizations below - all applicants must provide a _copy_ of official documented proof of:
- Varicella (Chicken Pox) immunity as shown by (a) physician/parent/guardian documented history of the disease (form attached) or (b) documentation of or (c) one dose of varicella (chickenpox) vaccine on or after the student's first birthday or, if the first dose was administered on or after the student's thirteenth birthday, two doses of varicella (chickenpox) vaccine are required or serum titer confirming immunity
  **AND**
- A (a) _complete_ Hepatitis B vaccination series (3 doses administered over a 6-month period) or (b) a serum titer confirming immunity
  **AND**
A (a) Measles, Mumps and Rubella Vaccination (MMR) or (b) a serum titer confirming immunity to each disease or (c) proof that the student was born prior to January 1, 1957.

AND

A (a) second Measles Vaccination (may be a part of a second MMR) or (b) a serum titer confirming immunity or (c) proof that the student was born prior to January 1, 1957.

AND

TB test with a negative reading. (PPD skin test within the last year or chest x-ray or Tuberculosis Health Questionnaire within the last year.)

AND

One dose of a tetanus-diphtheria toxoid (Td) is required within the last ten years. The booster dose may be in the form of a tetanus-diphtheria-pertussis containing vaccine (Tdap).

Criminal Background Check

All applicants must submit a criminal background history check through Precheck, Inc. Background checks may be submitted online (See attached instruction page). Print out the confirmation page or email confirmation that the report was requested and return with application to the Health Care Programs Office. The complete background report does not need to be submitted with the application, only the confirmation page. The results of the background report are sent electronically to the department. If an applicant is unable to complete the report online, please contact Precheck, Inc. at 1-800-999-9861. Police and state reports are not accepted – only background checks through Precheck, Inc. are acceptable. If a report was previously sent in another semester, please provide proof of this submission. The department will accept previously submitted background checks through Precheck, Inc. as long as the report can be retrieved electronically by the department.

Individuals that are listed as unemployable on the Texas Department of Aging and Disability Services Employee Misconduct Registry (EMR) or have been convicted of a criminal offense listed in Texas Health and Safety Code, 250.006 are not eligible for the nurse aide training program. Criminal history clearance through Del Mar College does not constitute clearance through potential employers or hiring entities.

Drug Screen

All enrolled students must submit a drug screen thru Concentra located at 4025 South Padre Island Drive. Drug screens must be within 30 days of clinical training therefore, students will be instructed when to submit for testing after the first day of class. Concentra’s phone number is 852-8255 and the fee is approximately $40.00, payable by the student.

CPR Certification

Students in the nurse aide training program must be certified in CPR before attending clinicals. CPR for the Health Care Provider certification courses will be offered on designated Saturdays at the Del Mar College Center for Economic Development. Cost of the course is $50.00 and includes First Aid certification. Students unable to attend the Saturday CPR class will be responsible for attending a CPR course on their own before the clinical start date.

Attendance

Regular and punctual attendance is critical and required at all classroom and clinical sessions. Attendance will be taken daily and due to the amount of material covered each day it is not possible to make up lost classroom/clinical time. Consequently, students will only be allowed a certain number of absences; however, the FIRST 16 HOURS OF CLASSROOM TRAINING ARE REQUIRED PER STATE CERTIFICATION REQUIREMENTS - NO EXCEPTIONS. THEREFORE, ANY STUDENT ABSENT DURING THE FIRST 16 HOURS OF CLASSROOM TRAINING WILL BE DISMISSED FROM THE PROGRAM. Any additional absences after the allowable absences will constitute an automatic dismissal from the program therefore, it is advised students use absences for emergency situations only.
Dress Code

- Students will be expected to attend classroom and clinical sessions clean and neatly dressed in required scrubs to present a professional appearance. Students not conforming to the dress code may be sent home at the instructor’s discretion. Repeat violations may result in dismissal from the program at the discretion of the Program Director.
- Hair must be clean, neat and pulled back away from the face. Male students must either shave regularly or keep a clean and well groomed mustache and/or beard.
- Students should bathe everyday and are expected to refrain from excessive use of perfume, cologne, or aftershave lotion due to the close working proximity with residents and other individuals in the classroom/lab/clinical environment.
- Fingernails must be kept clean and short (1/8” above the fingertips). Artificial nails are NOT permitted due to infection control issues. Only clear nail polish will be allowed on fingernails.
- Jewelry should be conservative and limited to only a wedding ring, wrist watch, necklace kept close to skin and not dangling, and one pair of earlobe earrings not extending ½ inch below the earlobe. No visible tattoos, body or face piercings are allowed. Other articles of clothing such as hats, hair accessories, etc. that may present a safety issue or be disruptive to the learning process will not be allowed.
- All electronic devices, including cell phones and pagers, must be turned off or muted. Absolutely no use of cell phones, including text messaging, during classroom or clinical time is allowed.
- An undershirt discreetly hidden underneath the scrub top may have to be worn to avoid revealing undergarments, exposing the skin, or visible tattoos. Scrub pants should be the right length and hems should not be dragging or touching the floor.
- Please ensure scrub top and pants fit comfortably and provide appropriate cover during any type of physical movement such as bending down, bending over, kneeling, lifting, reaching, etc.
So What is a Nurse Aide?

Nurse Aides help care for physically or mentally ill, injured, disabled, or infirmed individuals confined to hospitals, long term care nursing facilities, and mental health settings. Aides perform routine tasks under the supervision of nursing and medical staff. Duties may include:

- Serving meals
- Making beds
- Helping patients to eat, dress, and bathe
- Answering patients’ call lights
- Providing skin care to patients
- Taking the patient’s temperature, pulse rate, respiration rate, and blood pressure
- Assisting patients in getting into and out of bed and walking
- Keeping patients’ rooms neat
- Observing/monitoring patients’ physical, mental, emotional conditions; reporting changes to the nurse

The Del Mar College Nurse Aide certification program will prepare students for entry-level positions as nurse aides and in achieving a level of knowledge, skills, and abilities essential to provide basic care to residents of long-term care facilities. Topics will include resident’s rights, communication, safety, observation, reporting and assisting residents in maintaining basic comfort as well as emphasizing effective interaction with members of the health care team. Classroom instruction will include lecture, discussions, demonstrations and active student participation. Clinical training will be held at a nursing home where students will have an opportunity to train and practice their nurse aide skills with residents. Upon successful completion of the program, students will be eligible for the Texas Nurse Aide Registry examination which includes an evaluation of skills and written comprehension competencies.
HEALTH CARE PROGRAMS
NURSE AIDE TRAINING PROGRAM APPLICATION – SPRING 2014

Last Name ______________________ First Name ______________________ Middle Initial ______

Address ________________________________________________________________

City ______________________ State ___________ Zip ______

Home Telephone # ___________________________ Alternate or Cell # ___________________________

Social Security # ___________________________ Date of birth ___________________________

Email Address ______________________________________________________________

PLEASE ✓ CHECKMARK BELOW AND ATTACH THE FOLLOWING DOCUMENTS BEFORE SUBMITTING TO THE HEALTH CARE PROGRAMS OFFICE:

_______ COMPLETED APPLICATION

_______ HEALTH HISTORY FORM

_______ COPY OF SOCIAL SECURITY CARD AND VALID PICTURE ID
(NAMES ON BOTH IDENTIFICATION CARDS MUST BE IDENTICAL)

_______ COPY OF CRIMINAL BACKGROUND CHECK CONFIRMATION PAGE THRU PRECHECK, INC. (DOES NOT HAVE TO BE THE ENTIRE REPORT, JUST THE CONFIRMATION PAGE OR EMAIL THAT THE REPORT WAS REQUESTED.)

_______ COPIES OF COMPLETE REQUIRED IMMUNIZATION RECORDS

STUDENT SIGNATURE: ___________________________ DATE: ______________________

NOTES (FOR DEPARTMENT USE ONLY):

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________
HEALTH HISTORY
(Please fill out completely)

Name_______________________________________________Date of Birth________________

Address ___________________________________ City/St ___________________________ Zip _____

SS# or DMC ID# _______________________ E-mail ______________________________________

Phone (Home) ______________________(Cell)____________________ (Other) _____________

Person to be contacted in the event of an emergency:
Name ____________________________________________
Relationship to you __________________________________
Address _____________________________________ City _________________________________
Phone (Home) ______________ (Cell) ______________ (Other) ______________

Doctor ____________________________________________ Doctor’s Phone _______________

Hospital Preference ________________________________ Medical Insurance ____________

Medications you are currently taking (prescribed and over the counter)
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Check the following as it applies to your health history:

_____ High blood pressure ______ Allergies
_____ Elevated blood cholesterol _____ Respiratory problems
_____ Smoking ___ packs per day _____ Previous or current hernia
_____ Family history of heart disease _____ Muscle, joint or back disorder
_____ Sedentary lifestyle (inactivity) _____ Seizures
_____ Diabetes ______ Currently pregnant

Explanation of the above items (continue on back if needed)
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

I understand there are risks inherent in participating in any physical activity and will seek the advice of my physician, if appropriate. Del Mar College assumes no liability for any injury or illness I may sustain while participating in classroom, lab, or clinical activities. I will inform my instructor of any health changes. I understand that I am participating at my own risk.

Signature of Student: ______________________________________ Date ______________

Signature of Parent: ______________________________________ Date ______________
(If applicable)
INSTRUCTIONS FOR OBTAINING YOUR BACKGROUND CHECK
FOR A CLINICAL EDUCATION PROGRAM

Del Mar College Nurse Aide Program

Background checks are required on incoming students to insure the safety of the patients treated by students in the clinical education program. You will be required to order your background check in sufficient time for it to be reviewed by the program coordinator or associated hospital prior to starting your clinical rotation. A background check typically takes 3-5 normal business days to complete. The background checks are conducted by PreCheck, Inc., a firm specializing in background checks for healthcare workers. Your order must be placed online through StudentCheck.

Go to www.mystudentcheck.com and select your School and Program from the drop down menus for School and Program. It is important that you select your school worded as Del Mar College Nurse Aide Program.

Complete all required fields as prompted and hit Continue to enter your payment information. The payment can be made securely online with a credit or debit card. You can also pay by money order, but that will delay processing your background check until the money order is received by mail at the PreCheck office. Texas residents will pay $53.58 and New Mexico residents will pay $53.09. Residents in all other states will pay $49.50. For your records, you will be provided a receipt and confirmation page of the background check performed through PreCheck, Inc.

PreCheck will not use your information for any other purposes other than the services ordered. Your credit will not be investigated, and your name will not be given out to any businesses.

FREQUENTLY ASKED QUESTIONS:

- Does PreCheck need every street address where I have lived over the past 7 years? No. Just the city and state.
- I selected the wrong school, program, or need to correct some other information entered, what do I do? Please email StudentCheck@PreCheck.com, with the details.
- How long does the background check take to complete? Most reports are completed within 3-5 business weekdays.
- Do I get a copy of the background report? Yes. Log into www.mystudentcheck.com and click on “Check Status”, and enter your SSN and DOB. If your report is complete, you may click on the application number to download and print a copy. This feature is good for 90 days after submittal. After 90 days, you will be charged $14.95 for a copy of your report, and will need to contact PreCheck directly to request this.
- I have been advised that I am being denied entry into the program because of information on my report and that I should contact PreCheck. Where should I call? Call PreCheck’s Adverse Action hotline at 800-203-1654. Adverse Action is the procedure established by the Fair Credit Reporting Act that allows you to see the report and to dispute anything reported.

If you need further assistance, please contact PreCheck at StudentCheck@PreCheck.com.
DOCUMENTING HISTORY OF ILLNESS: VARICELLA (CHICKENPOX)

Amendment to §97.67

“All histories of varicella illness must be supported by a written statement from a physician or the student’s parent or guardian containing wording such as: “This is to verify that (name of student) had varicella disease (chickenpox) on or about (date) and does not need varicella vaccine.” or by serologic confirmation of varicella immunity. The school shall accurately record the existence of any statements attesting to previous varicella illness or the results of any serologic tests supplies as proof of immunity. If student is unable to submit such a statement or serologic evidence, varicella vaccine is required.”

Documentation of prior varicella illness can be provided by the following methods:

1. A serologic confirmation of varicella immunity (positive varicella IgG result).

2. A written statement from a physician, or student’s parent or guardian containing wording such as:

   “This is to verify that ____________________ had varicella disease (chickenpox)
   (Name of student)

   on or about ____________________ and does not need the varicella vaccine.”
   (Approximate month/day/year)

   ________________________________
   (Signature)

   ________________________________
   (Relationship to student)

   ________________________________
   (Date)