

**DALLAS-FORT WORTH HOSPITAL COUNCIL FOUNDATION**  
**Community Standards for Drug Screening,**  
**Background Checks & Immunizations**  
**(Effective as of January 1, 2013)**

These community standards are general guidelines for drug screenings, background checks, and immunizations in the North Texas region for schools and hospitals/healthcare agencies. These requirements will be effective for any students being admitted to programs after January 1, 2013.

**GENERAL GUIDELINES**

Prescreening requirements have been introduced into clinical student affiliation agreements. These prescreening requirements are the same as those required of employees (background checks, drug screens, and immunizations). The rationale for extending these requirements to clinical students and faculty was the concept of due diligence and competency assessment of all individuals whose assignments bring them in contact with patients or employees. Competency extends beyond technical skills to an individual's criminal history and drug free status. This approach ensures uniform compliance with Joint Commission standards pertaining to human resource management. Moreover, the public is now demanding greater diligence in light of the national reports of deaths resulting from medical errors and patient safety events.

**Timing of Prescreening Requirements:**

Drug screens and background checks must be conducted within 30 days prior to the start of a person's first clinical rotation following enrollment in the college/school or after a break in enrollment. Verification of the satisfactory results/compliance must be received by the participating hospital/agency prior to the student's rotation start date. Drug screen and background checks will be honored by all hospitals/agencies for the duration of the student's enrollment in the clinical program if the participating student has not had a break in the enrollment at the college/school. A break in enrollment is defined as nonattendance of one full semester (Fall or Spring) or more. The above information must be verifiable through the college/school. Drug screen and background checks of faculty will be honored for the duration of the employment of the faculty member at the college/school. Immunizations must be current prior to a person's first clinical rotation and must be maintained in current status during all clinical rotations.

**Reciprocity:**

Students whose schools follow these standards need only meet these requirements prior to the start of their first clinical rotation. Other DFW Hospital Council members that follow these standards will honor the initial test results, provided that these results can be verified with the college/school.

**Allocation of Cost:**

Each institution/school must bear the cost of these requirements or pass them along to their students/faculty as they see fit.

**Verification of Compliance & Recordkeeping:**

Verification of the compliance with these standards should be sent to the designated representative of the clinical agency prior to the clinical rotation start date. Verification is

accomplished by sending a letter from the institution on letterhead stating that these standards have been met by the student/faculty, listing the student's/faculty's full name and clinical rotation start date. If more than one student is attending a clinical rotation, a comprehensive list with all the students/faculty names may be submitted. It is the responsibility of each college/school to inform these persons of our requirements prior to enrollment in this curriculum. This will give students/faculty prior notice and an opportunity to decline the clinical training before investing their time and money in the class.

**Participating Hospitals/Schools:**

North Texas Hospitals who have provided input in review of these guidelines and come to agreement on these standards for the region include: Baylor Health Care System, Children's Medical Center Dallas, Cook Children's Health Care System, HCA – North Texas Division, JPS Health Network, Methodist Health System, Parkland Health & Hospital System, Tenet Healthcare, and Texas Health Resources. Schools that provided input include: Collin College, El Centro College, and Tarrant County College.

**Questions regarding the Community Standards can be directed to the DFWHC Foundation Workforce Center.** Contact information can be found at [www.dfwhcfoundation.org](http://www.dfwhcfoundation.org)

**DRUG SCREENING**

**Pre-Assignment Drug Screening:**

Drug Screening can have up to four steps –

- Collection Process
- Laboratory
- GC/MS Confirmation on all Non-Negatives
- Medical Review Officer on all Non-Negatives

By following these steps you are holding “everyone” to the same standards.

**Collection Process:**

Method by Urinalysis - we prescribe an unobserved collection of urine for initial screening. Reasonable suspicion situations will be observed as determined by faculty. The collection process is to be done in a consistent manner with consistent notice given. Collection can be done as a group either at the campus or at a designated collection site during the same time period. Alternatively, students (whether on-campus, distance learning, or late admission) will be given a specific time-limited period to present themselves to the appointed/approved collection facility. By taking these steps, students/faculty will be held to the same legal standards as it relates to the collection process.

The discovery process is covered in detail when the students are together for the group meeting prior to the collection. They are told that the only person they will discuss their medications with is the independent Medical Review Officer (MRO) who will contact them if needed.

The pre-collection group meeting will cover the community standards, the legal statements on the Non-Federal Chain of Custody that they will be signing, the time and quantity requirements for specimen collection, privacy information and give students the opportunity to ask questions.

**Laboratory:**

All tests will be processed at a certified SAMHSA (Substance Abuse & Mental Health Services Administration) laboratory. The minimum standard drug screen panel is a **Healthcare Professional 10-panel** with integrity checks for Creatinine and PH levels, acceptable and unacceptable test ranges will follow the 49 CFR Part 40 Federal Standards.

URN CREATININE		20.0 – 300.0		
Test	Screen	GC/MS	Units	
COCAINE METABOLITES	300	150	ng/ml	
AMPHETAMINES (CLASS)	1000	500	ng/ml	
BARBITURATES	300	300	ng/ml	
BENZODIAZEPINES	300	300	ng/ml	
MARIJUANA METABOLITE	50	15	ng/ml	
OPIATES	2000	2000	ng/ml	
PHENCYCLIDINE	25	25	ng/ml	
PROPOXYPHENE/METABOLITE	300	300	ng/ml	
METHADONE	300	300	ng/ml	
SYNTHETIC OPIATES (includes Oxycontin, Oxycodone, Hydrocodone and Morphine)	100	100	ng/ml	

SAMHSA laboratories are certified and regulated by the federal government assuring the highest standards. **All Non-Negative Specimens** are frozen and maintained in a secure area, with limited access, for one year in the event that a retest is required. Using the same SAMHSA laboratory for all tests within the group assures adherence to the same legal standards.

**GC/MS Confirmation on all Non-Negatives:**

All Non-Negative specimens will be confirmed via GC/MS confirmation. This step is performed at the SAMHSA laboratory. The result of the GC/MS confirmation is sent to an independent Medical Review Officer, along with a copy of the Chain of Custody.

**Medical Review Officer (MRO) on all Non-Negatives:**

The independent MRO is the impartial "quality assurance" component who advocates for the accuracy and integrity of the drug testing process. The quality assurance review of the drug testing process for the specimens, determines if there is a legitimate medical explanation for laboratory confirmed positive GC/MS, adulterated, substituted and invalid drug test results, ensure the timely flow of test result and other information to school / college and protect the confidentiality of the drug testing information. The MRO reviews all GC/MS results from the SAMHSA laboratory. If the result remains positive, the MRO contact the student to determine if there is a valid prescription for the drug in question. If a valid prescription exists and specimen is within prescribed limits, the test result is deemed to be "negative" and acceptable. The MRO is a medical doctor who specializes in the interpretation of drug screen results. Medical Review Officers do not make placement decisions; they simply pass along information regarding legal versus illegal drug use or consumption. Medical Review Officers are not required, but are beneficial in making placement decisions. If follow up with MRO is needed, students are expected to do so within the MRO's or school's specified time limit.

The MRO is completely independent of all parties in the testing process, including the collection, the SAMHSA laboratory, the school/college and the individual student/faculty. This is the defacto gold standard in drug testing. The MRO is the ONLY person who can make a final decision about a non-negative drug screen.

An agency reserves the right to remove a student/faculty from the facility for suspicion of substance use or abuse (including alcohol.) The agency will immediately notify the instructor/college/school to facilitate immediate removal and drug testing of the individual. The student/faculty will be required to consent to a drug test at a site identified by the instructor/college/school and the student/faculty or school will be responsible for the cost. Given the issue of safety and impairment, all reasonable attempts shall be made to contact the student's/faculty's family, friends, or police to provide transportation. Testing must be completed on the same business day. In all instances, the agency will provide written documentation of the student's/faculty's behavior(s) by two or more agency representatives to the college/school. Regardless of testing or test results, the agency reserves the right to remove from the facility any student or faculty member. A student/faculty may have drug testing "for cause" at the discretion of the clinical agency. Failure to comply will result in immediate expulsion from the clinical agency.

An individual with a positive drug screen or who refuses to submit to a reasonable suspicion drug screen will not be allowed to attend any clinical agency/rotation for a minimum of 12 months. Prior to returning to the clinical agency/rotation, a student must provide proof of a negative drug screen, acceptable background check and required immunizations as verified by the college/school.

**NICOTINE TESTING - BAYLOR HEALTH CARE SYSTEM INFORMATION** - As a health care system committed to improving the health of those we serve, we are asking our employees to model the same behaviors we promote to our patients. Beginning January 1, 2012, Baylor will no longer hire individuals who use nicotine products. Applicants who profess to use nicotine will not have their applications processed. Anyone who is offered and accepts a position with BHCS will be tested for nicotine during our regular post-offer pre-employment testing. Applicants who test positive for nicotine will be eliminated from consideration and pending job offers will be rescinded. At this time, testing for nicotine will not apply to clinical students or faculty.

## **CRIMINAL BACKGROUND CHECK**

Criminal background checks should review a person's criminal history. The check should include the cities and counties of all known residences, not just the DFW area. The following criminal histories are examples of actions that may disqualify an individual from consideration for the clinical rotation. This list is for example purposes and is not an exhaustive list. (Each criminal record or individual will be assessed according to EEOC requirements):

- Felony convictions/deferred adjudications
- Misdemeanor convictions or felony deferred adjudications involving crimes against persons (physical or sexual abuse), illegal use or distribution of drugs
- Misdemeanor convictions or deferred adjudications related to moral turpitude (prostitution, public lewdness/exposure, theft under \$1,500, computer crimes of fraud, etc.)
- Felony deferred adjudications for the sale, possession, distribution, or transfer of narcotics or controlled substances

- Registered sex offenders
- OIG, GSA and Medicaid Sanctions
- Terrorist Suspect List
- Pending charges and warrants for arrest

For more detailed information, please reference the following:

- Texas Health & Safety Code Section 250.006  
(<http://www.statutes.legis.state.tx.us/Docs/HS/htm/HS.250.htm>)
- Texas Occupation Code Section 301.4535  
(<http://www.statutes.legis.state.tx.us/Docs/OC/htm/OC.301.htm>)
- Texas Admin Code: Section 213.28  
([http://info.sos.state.tx.us/pls/pub/readtac\\$ext.TacPage?sl=T&app=9&p\\_dir=F&p\\_rlo\\_c=137017&p\\_tloc=14910&p\\_ploc=1&pg=6&p\\_tac=&ti=22&pt=11&ch=213&rl=28](http://info.sos.state.tx.us/pls/pub/readtac$ext.TacPage?sl=T&app=9&p_dir=F&p_rlo_c=137017&p_tloc=14910&p_ploc=1&pg=6&p_tac=&ti=22&pt=11&ch=213&rl=28))

NOTES: (1) If a licensing/registry body approves the individual to take the licensing/credentialing exam, the individual may participate in the clinical rotation.

(2) A school/college may request an exception from the first clinical rotation/agency for a student with a felony deferred adjudication and no alternative recourse through a licensing/registry authority, i.e. Board of Nurse Examiners of Texas. Following approval from the agencies, the student may progress as stated above.

## IMMUNIZATIONS

Participating hospitals/agencies require that the following immunizations be current for students/faculty prior to their first clinical rotation following enrollment in the college/school or after a break in enrollment. Not all immunizations listed below are required at all facilities. Where there is an exception, it is noted. Immunization requirements are reviewed periodically by participating hospitals and are subject to change based on hospital standards, CDC recommendations or Texas Administrative Code rules. Verification of current immunizations must be received by the participating hospital/agency prior to the student's rotation start date. Immunizations must be maintained in current status during all clinical rotations. The information must be verifiable through the college/school.

Here is the list of required immunizations as of September 1, 2012:

- Full **Hepatitis B** Series and/or immunity to Hepatitis B.
- **MMR (Rubeola/Measles, Mumps, Rubella/German Measles)** documentation of 2 doses or positive titers.

- **TDaP (Tetanus, Diphtheria & Pertussis) Booster** (one dose as adult) within the last 10 years.
- **Varicella** vaccination or titer.
- **Influenza/Seasonal Flu Immunization** (required annually during flu season usually from September through March or April). Exceptions made for medical and religious reasons, but must adhere to hospital policies.
- **Negative Tuberculin (TB) Test** (Annual requirement) (can be either TST or QFT) and/or negative CXR. If history of positive PPD test or having had TB, must provide documentation of negative chest x-ray or completed treatment.
- **Meningitis** – Only needed for Childrens Medical Center for lab techs who handle cultures for meningococcal meningitis.
- **Hepatitis A** – Only needed for Texas Health Resources for child care workers, nutrition, & psychiatric depts.