

ROXBOROUGH MEMORIAL HOSPITAL SCHOOL OF NURSING



Student Handbook

**Day Option
Evening- Weekend Option**

2023-2024

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NON-DISCRIMINATION STATEMENT

The Roxborough Memorial Hospital School of Nursing does not discriminate on the basis of race, color, religion, sex, sexual orientation, national origin, age, disability, or any characteristic protected by law.

POLICY STATEMENT

The Student Handbook provides an overview of the Roxborough Memorial Hospital School of Nursing policies and procedures. Its purpose is to serve as a guide for the student body.

Roxborough Memorial Hospital School of Nursing reserves the right to amend or change the educational policies, regulations, fees, condition, class and/or clinical format and courses as circumstances may require. The provisions of this HANDBOOK are **not** to be regarded as an irrevocable contract between Roxborough Memorial Hospital School of Nursing and the students.

Policies contained herein were current at the time of printing and are subject to change. Students will be apprised of these changes verbally and via the communication platform. Updated policies will also be documented in specific Course Syllabi.



A L M A M A T E R

**MEMORIAL TO THEE WE SING - OUR SONG OF PRAISE SO TRUE AND MAY OUR
HEARTS BE MINDFUL OF - YOUR COLORS WHITE AND BLUE.
LET EVERYTHING AND EVERYONE - BY US - THROUGH YOU BE LED.
WITH JOYOUS HEARTS AND SPIRITS HIGH AS O'ER LIFE'S WAY WE TREAD.**

"R E F R A I N"

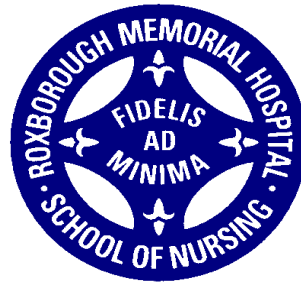
**MEMORIAL TO THEE WE SING - OUR SONG OF PRAISE SO TRUE AND MAY OUR
HEARTS BE MINDFUL OF - YOUR COLORS WHITE AND BLUE.**

By: Ella Guilfoil, Graduate, Class of 1919



**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

SCHOOL OF NURSING PIN



The solid blue provides the background for the white of the (geometrical) star, looking toward the heavens for Divine Guidance.

The tiny gold "Fleur de Lis" in each point of this star, (a conventional form of lily) refers particularly to the suggestion of Purity, and the three petals representing the Trinity.

The complete outline of the pin in gold represents service. The gold lettering -

"FIDELIS AD MINIMA"

Represents the theme and motif of the hospital -

"FAITHFUL IN SMALL THINGS"



ROXBOROUGH MEMORIAL HOSPITAL

MISSION

To deliver compassionate, quality care to patients and better healthcare to communities.

VALUES

Quality:

We are committed to always providing exceptional care and performance.

Compassion:

We deliver patient-centered healthcare with compassion, dignity and respect for every patient and their family.

Community:

We are honored to be trusted partners who serve, give back and grow with our communities.

Physician Led:

We are uniquely physician-founded and physician-led organization that allows doctors and clinicians to direct healthcare at every level.

ROXBOROUGH MEMORIAL HOSPITAL SCHOOL OF NURSING

MISSION OF THE SCHOOL OF NURSING

The mission, philosophy and goals of the Roxborough Memorial Hospital School of Nursing are consistent with those of Roxborough Memorial Hospital. The nursing faculty are committed to the education of students, application of nursing knowledge, and the promotion of health and provision of quality health services.

The mission of the School of Nursing is to educate qualified individuals for nursing practice.

Graduates are prepared to function as entry-level professional nurses, to meet the health care needs of society in a dynamic health care environment including acute, intermediate, long term, ambulatory and home care settings in accordance with the Pennsylvania Professional Nursing Law. The mission is carried out in an atmosphere that promotes learning, teaching excellence, scholarship, and community service. The School of Nursing's mission is supported through collaboration with Roxborough Memorial Hospital, Prime Healthcare Services, the Department of Nursing Services, and other healthcare affiliates in the metropolitan area.

Roxborough Memorial Hospital's commitment is to organize its unique, rich and varied resources to provide educational opportunities for students pursuing a career in nursing. As a leader in healthcare delivery, Roxborough Memorial Hospital places a high priority on providing exemplary health services as a basis for clinical education. The nursing faculty's emphasis on clinical excellence is consistent with the mission, values, and vision of Roxborough Memorial Hospital to pursue its purposes with distinction. The faculty instills in the graduates the responsibility to maintain personal growth and professional competency.

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

PHILOSOPHY OF THE SCHOOL OF NURSING

The faculty believes:

People, the central focus of nursing, are complex beings who have a variety of needs: physiological, psychological, social, cultural, and spiritual. People must be considered as individuals, but also within the contexts of their families and communities. As dynamic beings, people interact with constantly changing internal and external environments. Health and illness have different meanings for each person, and people respond differently to changing levels of health with varying health care needs throughout their lifespans.

The primary goal of nursing is to assist individuals, families, groups, and communities in a variety of settings to achieve optimal levels of health within their unique capabilities. Nurses must be cognitively, technically, interpersonally, ethically, and legally skilled. Nurses apply a broad base of knowledge, critical thinking abilities and clinical judgement skills within the framework of the nursing process to develop strategies for health promotion, risk reduction, disease prevention and alleviation of suffering. They intervene at all points on the health-illness continuum and at all developmental stages. Integral to nursing activities are communication, collaboration and use of existing and emerging technologies and skills. Nurses work as part of a multidisciplinary team with the patient at its center. They engage in caring and compassionate relationships which allow people to express their needs and to grow. Nurses recognize all people as diverse individuals worthy of respect. They strive to provide cost-effective, safe, quality care which is based on evidence and incorporates nationally recognized standards of practice. Nursing is a profession with a defined field of study and laws that regulate its members and practice.

Nursing education is a cooperative, dynamic process involving mutual teaching and learning that promotes the continuing development of both students and faculty. It is structured to enhance critical thinking in complex nursing situations, to enable students to identify changing needs of the individual, family, and community, and to intervene to meet those needs. The nursing education program provides opportunities for students to build nursing knowledge and skills, to test out critical thinking abilities and clinical judgement skills, and to give care in a variety of settings which provide diverse populations and clinical situations. Effective learning occurs in environments that satisfy student needs for recognition, acceptance, and self-realization. A close relationship exists between the cognitive and operational aspects of nursing, so correlation of classroom learning with selected clinical experiences is emphasized.

Faculty assist students to apply previously learned knowledge to new situations. They use a variety of teaching methods that promote active student involvement, and partner with students to evaluate learning needs and learning outcomes. Faculty endeavor to meet the learning needs of a diverse student population in an atmosphere of mutual respect. Learners are afforded the opportunity to analyze and question knowledge and value systems through experience in diverse situations. Faculty are facilitators and role models who provide guidance and direction to students while enhancing individual growth. Faculty engender self-esteem by providing challenging educational experiences, constructive feedback, and positive reinforcement.

The growth of each student is enhanced through mentoring, counseling, and guidance as the individual experiences a variety of situations. The potential for personal and professional growth is fostered through peer interaction, curricular and extra-curricular activities, and participation in Student Government and School committees.

The school is an integral part of the community. Faculty recognize their responsibility to that community to prepare accountable, professional graduate nurses capable of providing compassionate, high quality, cost-effective care.

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

PROGRAM PURPOSE & END-OF-PROGRAM STUDENT LEARNING OUTCOMES

Purpose: The purpose of the nursing program at Roxborough Memorial Hospital School of Nursing is to educate individuals who will be prepared to enter professional nursing practice as competent and efficient practitioners. Graduates of the School have a broad understanding of population-based health care and have been afforded the opportunity to care for individuals, families, and communities in a variety of clinical settings. Graduates possess contemporary clinical skills and knowledge based on the latest nursing research.

End-of-program Student Learning Outcomes:

At the completion of the educational program, the graduate will be able to:

1. Design patient-centered care that meets the needs of diverse individuals, families, groups and communities at all points on the health-illness continuum and at all developmental stages.
2. Employ critical thinking and clinical judgement skills to provide comprehensive, evidence-based care within the framework of the nursing process.
3. Use effective communication techniques to collaborate with individuals, families and all members of the health care team, and to advocate for individuals and families.
4. Devise effective educational strategies designed to empower individuals, families, groups and communities to achieve optimal levels of health.
5. Effect optimal patient outcomes through the practice of safe, high-quality care that incorporates use of emerging and existing technologies and adheres to current standards of practice.
6. Integrate the professional role into nursing practice.

Program Outcomes

The governing organization and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified program outcomes.

1. First time pass rate on the licensure examination.
2. Program completion rate
3. Achievement in job placement within the first year after graduation.

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING
CURRICULUM PLAN
DAY OPTION**

First Year

Second Year

College Prerequisites for the 16-month option	Semester I 16 weeks	Semester II 16 weeks	Semester III 16 weeks	Semester IV 16 weeks
Introduction to Psychology (3 credits) English Composition (3 credits) College Algebra/Higher level Math/Statistics (3 credits) Anatomy & Physiology I (4 credits) Anatomy & Physiology II (4 credits) Chemistry (If not completed in high school with a grade of "C" or above) Microbiology (4 credits) Nutrition (3 credits) Developmental Psych. (3 credits) Sociology (3 credits)	Nursing 100 – Foundations of Nursing 360 hours (12 credits) Theory hours: 90 Clinical hours: 270 • 1:3 Pre-requisites: College Pre-requisites listed in the left-hand column.	Nursing 200 – Medical/Surgical Nursing I & Mental Health Nursing 360 hours (12 credits) Theory hours: 90 Clinical hours: 270 • 1:3 Pre-requisite: N100	Nursing 300 – Medical-Surgical Nursing II 360 hours (12 credits) Theory hours: 90 Clinical hours: 270 • 1:3 Pre-requisites: N100, N200	Nursing 400 – Management of Care 420 hours (14 credits) Theory hours: 105 Clinical hours: 315 • 1:3 Pre-requisites: N100, N200, N300

Please note: Each credit hour is equal to 30 clock hours

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING
CURRICULUM PLAN
EVENING WEEKEND OPTION**

First Year

Second Year

College Prerequisites for the 22-month option	Semester I 22 weeks	Semester II 22 weeks	Semester III 22 weeks	Semester IV 22 weeks
Introduction to Psychology (3 credits) English Composition (3 credits) College Algebra/Higher level Math/Statistics (3 credits) Anatomy & Physiology I (4 credits) Anatomy & Physiology II (4 credits) Chemistry (If not completed in high school with a grade of "C" or above) Microbiology (4 credits) Nutrition (3 credits) Developmental Psych. (3 credits) Sociology (3 credits)	Nursing 100 – Foundations of Nursing 360 hours (12 credits) Theory hours: 90 Clinical hours: 270 • 1:3 Pre-requisites: College Pre-requisites listed in the left-hand column.	Nursing 200 – Medical/Surgical Nursing I & Mental Health Nursing 360 hours (12 credits) Theory hours: 90 Clinical hours: 270 • 1:3 Pre-requisite: N100	Nursing 300 – Medical-Surgical Nursing II 360 hours (12 credits) Theory hours: 90 Clinical hours: 270 • 1:3 Pre-requisites: N100, N200	Nursing 400 – Management of Care 420 hours (14 credits) Theory hours: 105 Clinical hours: 315 • 1:3 Pre-requisites: N100, N200, N300

Please note: Each credit hour is equal to 30 clock hours.

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

ACCREDITATION

Accredited by:

Accreditation Commission for Education in Nursing
For information regarding accreditation contact the:

Accreditation Commission for Education in Nursing (ACEN)
3390 Peachtree Road NE, Suite 1400, Atlanta, GA 30326
Phone: 404-975-5000 Fax: 404-975-5020

The School of Nursing is accredited by the Accreditation Commission for Education in Nursing (ACEN) through 2030. Information regarding accreditation can be obtained by contacting the ACEN at the above address.

Approved by:

The Pennsylvania State Board of Nursing
P.O. Box 2649
Harrisburg, PA 17105-2649
Phone: 717-783-7142

Hospital Accredited by:

The Joint Commission (TJC)
One Renaissance Boulevard
Oakbridge Terrace, IL 60181
Phone: 630- 792-5800

GENERAL INFORMATION & POLICIES

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING
Day Option**

CALENDAR ~ 2023-2024

2023

July 6 *9AM-1PM	Welcome & brief program orientation
August 17 &18	Year I Orientation “Class of 2025”
August 21	Fall Semester begins
September 4	Labor Day -closed
November 23	Thanksgiving Holiday–school closed
November 24	Personal Day–school closed
November 27	Classes Resume
December 8	Fall Semester Ends

2024

January 15	Spring Semester Begins
March 11-15	Spring Break
March 18	Classes Resume
May 10	Spring Semester ends
May 13, 14, & 15	ATI Live Review
May 20	Practice & Senior Brunch
May 21	Pinning & Graduation (tentative)

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING
Evening Weekend Option**

CALENDAR ~ 2023-2024

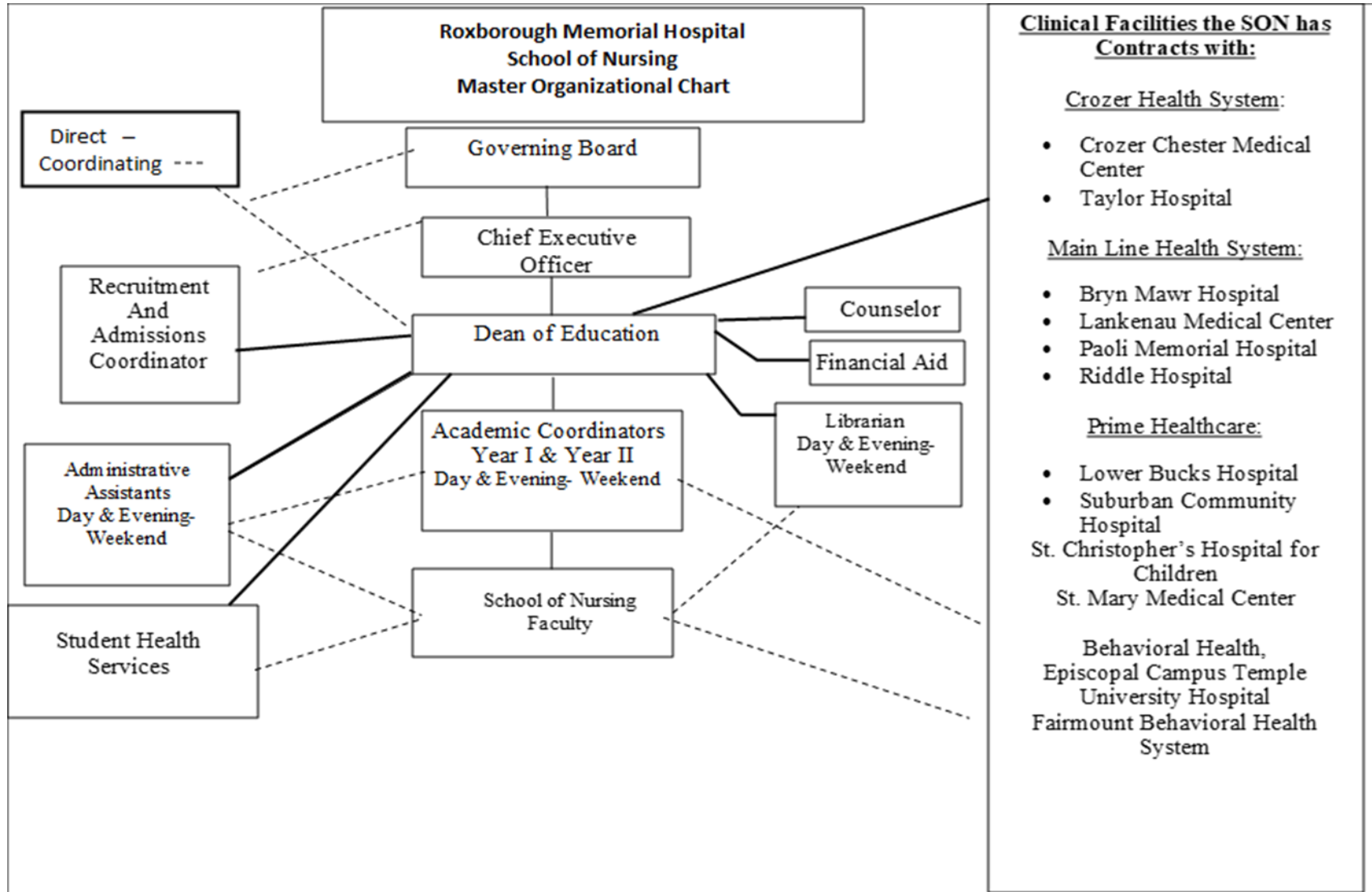
2023

July 18	Fall Semester Begins
November 24-27	Thanksgiving Holiday–school closed
December 17	Fall Semester Ends
December 27	Graduation Rehearsal and dinner
December 28	Pinning & Graduation (Class of 2023)

2024

January 5 & 6	Year 1 Orientation “Class of 2025”
January 16	Spring Semester begins
June 16	Spring Semester ends
June 24 – July 22	Break
July 23	Fall Semester begins
November 28 – December 1	Thanksgiving break – school closed
December 15	Fall Semester ends
December 26	Graduation rehearsal and dinner
December 27	Pinning and graduation (tentative) (Class of 202

**ROXBOROUGH MEMORIAL HOSPITAL SCHOOL OF NURSING
MASTER ORGANIZATIONAL CHART**



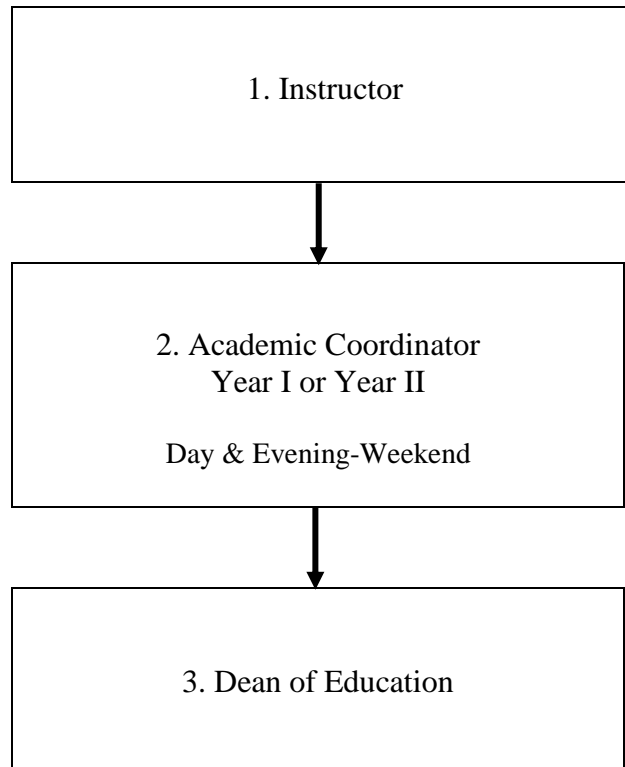
CHAIN OF COMMAND

PURPOSE: Provides guidance and direction for students to communicate concerns through the chain of command.

POLICY: Communication

If issues arise during a course, please follow the chain of command to attempt to resolve concerns. For clinical concerns, see the clinical instructor first. For class concerns, see the instructor who taught the lecture. If the issue is not resolved, see the Coordinator for Year I or Year II for the appropriate program option. If issue is still unresolved, make an appointment with the Dean of Education by contacting the Administrative Secretary.

CHAIN OF COMMAND



**** In courses that there is no Academic Coordinator, there will be a Course Lead****

COMMUNICATION POLICY

PURPOSE: To inform students of the proper ways in which they must communicate with School personnel, and ways in which they will be communicated with by School personnel.

POLICY:

Any relationship is enhanced by good communication, and the relationship between students and School personnel is no different. It is essential that School administration, faculty and staff be able to reach students in both non-emergency and emergency situations. It is equally essential that students be able to reach School employees. To that end:

1. Students must provide the school with a working telephone number and e-mail address, which must be kept current. Please provide an update to the School Receptionist with any changes.
2. Students are provided with a list of School contact numbers.
3. Students will be issued a Prime email account. This account must be utilized for School related communication. It is the student's responsibility to check this email daily. School personnel will use this account for all email communications with students. Faculty will also make every attempt to check school email daily.
 - a. Students are expected to communicate respectfully with Faculty and Staff. Appropriate salutation, message and closing is expected with each communication.
4. General announcements may be posted via the SONIS System and/or Microsoft Teams. Students will receive instructions in each course as to where general announcements will be posted. Students should check this site daily.
5. Students may give miscellaneous communication/documents to the Receptionist for placement in faculty mailboxes.

Troubleshooting:

Should technical or other difficulties be experienced, the student's first call should be to the provider involved. For difficulty with Prime Healthcare e-mail access or Office 365, please call the HELP desk at 215-487-4357. For difficulty accessing SONIS, please call Christine Johnson or Nicholas Perilli at 215-487-4345 during normal business hours. For difficulty accessing any of the publishing platforms, please call the numbers provided on their websites.

Only after making this initial call should ongoing difficulties be reported to faculty members or to the Academic Coordinators.

It is the student's responsibility to check phone messages, email and general platforms EVERY DAY and to inform the school of any changes in contact information including email, mailing address, and cell phone numbers. The student is therefore held responsible for any information missed due to neglect of this responsibility.

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING
CONTACT INFORMATION**

Dean of Education

Kerri Austin MSN, RN 215-509-3758
Kaustin2@primehealthcare.com

Recruitment and Admissions Coordinator

Jacquelyn Ahern (Guarracino) 215-487-4459
jahern1@primehealthcare.com

Student Health Services

Kelly Rodrigues, BSN, RN
Krodrigues@primehealthcare.com

Financial Aid Officer

Corinne Beaton 215-487-4286
Cbeaton@primehealthcare.com

Counselor

Dr. Jana B. Mallis, Ph.D. 215-284-3646 (C)

Administrative Assistants

Day Option

Mrs. Lisa Seserko 215-487-4294
LSeserko@primehealthcare.com

Evening-Weekend Option

Ms. Michelene Hayse 215-487-4296
MHayse@primehealthcare.com

Main Number

215-487-4344

Library

Day Option

Ms. Christine Johnson, MLS 215-487-4345
Christine.Johnson@primehealthcare.com

Evening-Weekend Option

Mr. Nicholas Perilli, MLS 215-487-4345
NPerilli@primehealthcare.com

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

**CONTACT INFORMATION
ACADEMIC COORDINATORS AND FACULTY**

Room Office and Telephone

Academic Coordinators and Faculty

Year II Academic Coordinator Evening/Weekend Option 224 215-487- 4716
Ms. Regina Wright MSN, RN, CEN, CNE, CPEN
RWright7@primehealthcare.com

Faculty

Dr. Elizabeth Blake, Ed.D., MSN, RN 230 215-487-4358
EBlake@primehealthcare.com

Mrs. Nicole Houser MSN, RN 218 215-487-4353
Nhouser@primehealthcare.com

Mrs. Carol Patanovich, MSN, RN 216 215-487-4457
CPatanovich@primehealthcare.com

Mrs. Claudia Reiser, MSN, RN, WCC 225 215-509-6802
CReiser@primehealthcare.com

Mr. Kyle Raczynski MSN, RN 217 215-487-4784
KRaczynski@primehealthcare.com

Mrs. Andrea Schapire, MSN, RN 214 215-487-4633
ASchapire@primehealthcare.com

Ms. Marjorie Shragher, MSN, RN, PCCN 223 215-509-6875
MShragher@primehealthcare.com

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

DRESS CODE- CLASSROOM, CLINICAL/LAB, AND SCHOOL RELATED EVENTS

PURPOSE: Provides guidance and direction for students regarding professional attire.

POLICY:

Student's dress must comply with the Roxborough Memorial Hospital School of Nursing dress code policy. By wearing proper attire, students respect themselves as beginning professionals as well as upholding the dignity of the school, hospital, and affiliating agencies.

Standards of cleanliness, personal hygiene and appearance must be maintained.

A Roxborough I. D. badge must be worn at all times in the School of Nursing, Roxborough Memorial Hospital, and all clinical areas.

Attire for the Physical and/or Virtual Classroom

Students are encouraged to dress comfortably but appropriately in the classroom. Religious attire is permitted. The length of skirts and shorts must not be higher than mid-thigh. Tight fitting or low-cut tops, halter tops, crop-tops and see-through garments are prohibited.

In addition, clothing shall not convey messages that are: crude, vulgar/profane, violent/death oriented, gang-related, political in nature, sexually suggestive or promote alcohol, drugs, or tobacco. Clothing that displays symbols of intolerance is prohibited.

Body art or tattoos that are crude, vulgar/profane, violent/death oriented, gang-related, political in nature, sexually suggestive or promote alcohol, drugs, or tobacco must be covered in the classroom setting.

Perfumes, colognes, aftershaves, or body sprays are to be worn in moderation as the fragrance affects people with allergies.

Final dress code decisions are at the discretion of the instructor. The school reserves the right to determine the appropriateness of your attire and appearance. Students may be asked to leave the classroom if they are in violation of the dress code. The request to leave the classroom area will affect classroom attendance.

Attire for the Clinical Area

Clinical Uniform

When student activities require a uniform, the uniform must be complete. When in the clinical/lab area, students are to be in full uniform.

The designated uniform includes a royal blue scrub top with the school emblem on left shoulder, royal blue scrub pants, student name pin, and ID badge. A lab coat with the school emblem affixed to the left shoulder is required. The uniform and lab coat must be purchased from the official uniform company/store. Appropriate undergarments must be worn. **White, non-fabric, closed-toe shoes** must be worn with socks. Socks must be above the ankle. Only a plain white shirt can be worn under the uniform top. Uniforms must be properly fitted, cleaned, and pressed. Hoodies and jackets with or without the Roxborough logo are not part of the uniform.

A stethoscope, scissors, hemostat, penlight, sharpie, and a watch with a second hand are considered part of the professional uniform unless otherwise specified by the clinical faculty member.

The only jewelry permitted is a watch with second hand and a plain wedding band. No personal wearable electronic devices are permitted in the clinical area.

One pair of post earrings are acceptable in the clinical area. Several post earrings on each lobe are not permitted. Hoop, dangling, or gauge styles of earrings are not permitted. No facial or tongue piercings are permitted. Pre-existing facial piercings must be covered.

Scrub gowns, masks, and caps used in various hospital departments are not to be worn outside of the unit unless the student is accompanying a patient. These articles are not to be taken from these areas.

Hair must be neat, clean, restrained and not in an extreme style or unnatural color. If hair is shoulder length or longer it must be worn up and off the collar or fastened back. Plain, solid-colored headbands only. Religious headwear in a solid white, navy, royal blue, or black color is permitted.

If a surgical mask is required in the clinical area, students can wear a plain, solid colored headband or surgical cap with buttons for comfort.

Cosmetics may be used in moderation. **Perfumes, colognes, aftershaves, or body sprays are not permitted as the fragrance affect patients and people with allergies.**

Beards should be neat, clean, and well managed, not of extreme length, and should not interfere with the performance of duties.

Body art or tattoos need to be covered for clinical/lab. A plain, white long sleeve shirt will be required to cover visible body art or tattoos.

Artificial nails, nail tips, and nail polish are prohibited. Nails may be no longer than ¼ inch.

Gum chewing while at clinical/lab is prohibited.

For safety, and professional reasons, final dress code decisions are at the discretion of the Clinical Instructor. Exceptions to the uniform will be noted on the course syllabus.

If the student fails to follow the personal appearance and hygiene guidelines for clinical experience, the student will be sent home and the missed day will be treated as a clinical absence. The day must be made up and a fee will be charged as detailed in the Clinical Experience Lateness & Absence Policy. **The school reserves the right to determine the appropriateness of the student's attire and appearance.** Continued failure to comply with

this policy will result in corrective action up to and including separation from the school. (For noncompliance ramifications see consequences listed after Failure to comply in the Professional Conduct Policy).

Attire for School-Related Events

Business casual attire is required for School-related events including but not limited to Graduation and Events with the National Student Nurses' Association/ Student Nurses' Association of Pennsylvania (NSNA/SNAP).

Business casual attire for women includes a combination of skirt or dress slacks, blouse, sweater, twinset, and hosiery with closed toe shoes. Skirts must be no shorter than mid-thigh and need to be worn with hosiery. Jeans or shorts are not acceptable.

Business casual attire for men includes dress slacks or chinos (neatly pressed), cotton long-sleeved button-down shirts, pressed. A shirt with a tie may be required for some events. Dark socks and dress shoes are required. Jeans or shorts are not acceptable. Boots or athletic shoes are not acceptable.

School Lab Coats may be required.

Students attending the pinning ceremony must wear a properly fitted, cleaned, pressed uniform and lab coat with clean white uniform shoes.

Results of Noncompliance with Dress Code in Classroom, Clinical/Lab, and School Related Events

Continued failure to comply with this policy will result in corrective action up to and including separation from the school (see Professional Conduct Policy).

PLEASE NOTE: This dress code is only a guideline. If an affiliating clinical agency or School of Nursing faculty/administrative staff suggests a more stringent interpretation of this guideline or alteration in this dress code, it is expected that students adhere to the request.

IDENTIFICATION POLICY

PURPOSE: To provide guidance and direction regarding clear identification as a student.

POLICY:

1. All students will be issued a picture identification badge.
 - a. There is a cash deposit required for the identification badge.
2. **A Roxborough I. D. badge must be worn at all times in the School of Nursing, on the Roxborough Memorial Hospital campus, and all the clinical areas.**
3. The Facility identification badge is to be worn at all times and it shall be above the waist with the picture and name displayed. Name tags on lab coats or uniforms are not substitutes for identification badges
4. If lost, a replacement badge may be obtained through the Recruitment and Admissions Coordinator with RMH Security.
 - a. The student will be charged for the replacement of the badge.
5. Non-compliance with this policy may result in the student being required to leave the Facility premises.
6. Identification badges must be returned to RMH SON upon separation from program. The cash deposit will be returned to the student when both the identification badge and parking hang tag are surrendered upon separation from the program (see Facility Policy).
7. Students must follow the Identification Policy for each clinical site.

LIBRARY POLICY

PURPOSE: To control access to and use of Library resources.

POLICY

1. Access

- A. The primary population served includes the following persons who may use the library whenever it is open and who may borrow any materials that circulate:
 - 1. Students currently enrolled in the school
 - 2. Faculty and staff of the school
 - 3. Medical and nursing staff of the Hospital
 - 4. Other Hospital employees
- B. Graduates of the School, persons from the local community and, personnel from Roxborough Memorial Hospital, including individuals from contracted educational programs may use the library for reference only during posted library hours.

2. Hours

- A. When the School of Nursing is in session, the library is open as posted.
- B. There are times when the library will not be available, these include when the computers are needed for testing.
- C. The library is always closed when the building is closed.

3. Behavior

- A. **There is no smoking, eating, or drinking in the library. Children are not allowed in the library (see Facility Policy).**
- B. Individuals are requested to remember that the library is a place of study for themselves and for others. The library is a **QUIET ZONE**. Loud conversations are not permitted.
- C. Any individual who intentionally defaces or damages Library material or removes any that has not been properly checked out, will be required to make restitution.

4. Circulation

- A. Journals, books, and items marked reference or reserve or do not remove (DNR) from Library, or in some other similar fashion, do not circulate and may be used only in the library.
- B. Circulating items may be borrowed for a specified time period, after which they are to be returned so others may have access. Failure to return books in a timely fashion will result in suspension of borrowing privileges. The loan period is two weeks unless otherwise noted on the item or its card. An item's usual loan period may be modified by the librarian as needed regarding graduation, holidays, etc. Students may renew a loan unless the item is overdue or has been placed on hold for use by someone else; the renewal must be arranged for directly with and documented by Library Staff. Upon their return, items on hold are set aside for at most one week on behalf of the requesting

party; overdue items must be returned, processed, and made available to others for at least one day before being borrowed again by the same person.

- C. Material not properly checked out will set off the security alarm. When signing the library card, you **must** print your name and year of graduation.
- D. Borrowed items must be placed in the (locked) book return box, or given to the Librarian or the Receptionist, in order to ensure proper documentation of the return.

5. Overdue Library Materials

- A. Students who are unable to return borrowed items for reasons beyond their control, or who believe that there are other extenuating circumstances, should discuss this matter with the Librarian at the earliest opportunity.
- B. Grades will be withheld if library items are not returned by the end of each semester.
- C. Shortly before graduation, the Librarian will send to the Dean of Education a list of all students who have not returned Library items. **Students must return or replace lost library materials in order to graduate.**

6. Computerized Resources and Literature Searches

- A. R2 digital library is available for student use. The library maintains a subscription to a collection of nursing e-books through Rittenhouse's R2 Digital Library. The R2 Digital Library is a web-based database. It offers fully integrated and searchable nursing source book content from key health science publishers.
 - 1. Each student is assigned a username and password to access Roxborough School of Nursing's e-book collection.
 - 2. Go to www.R2library.com
 - 3. Enter USERNAME and Password.
 - 4. HINT: The easiest way to search the R2 Library is by clicking on Browse Titles. You can also "Browse by Discipline" and search using keywords.
- B. Upon request, the Librarian may agree to perform a computerized literature search of such databases as Medline, CINAHL and the online public access catalogs of selected medical and academic libraries, as well as the Free Library of Philadelphia or the Internet. For requests related to current patient care, the results are usually available within one workday.

7. Interlibrary Loans

- A. Information not available here may, with some exceptions, be obtained from another library via interlibrary loan. Under the fair use provisions of the federal copyright law, libraries are permitted to deliver a photocopy of an article (or up to a chapter of a book) in lieu of lending the original (the photocopy becomes the property of the requester and is for personal use only).
- B. Students of the School of Nursing may request interlibrary loans for purposes that support their class assignments.

- C. Routine requests involve a turnaround time of about five workdays. They are directed to reciprocating libraries unless prepaid by the requester. There may be some instances that requests take longer than five workdays.
- D. Delivery by fax requires the approval of a member of the faculty.
- E. Books are not normally borrowed in the original because of cost and liability issues; however, the librarian can identify outside locations if the requester wants direct access to the material (as can be done for journal articles). Those wishing to visit outside libraries are responsible for determining access hours and for making any necessary advance arrangements.

8. Additional Information

- A. The library has a photocopier that students may use for school purposes only.
- B. A list of the journals the library subscribes to is on the index table closest to the back of the library. Journals are listed in alphabetical order. Volume numbers and dates held by the library are listed after each title. Journals are kept on the shelves in alphabetical order, beginning in the back room of the library. Current issues, including the most recent issue and current year, are kept on the large rack against the wall in the back room of the library. Bound volumes are kept several years back. Please ask the librarian if you need a volume of a bound journal that is not available on the library shelves.

FACILITY POLICY

PURPOSE: To provide guidance and direction for students.

POLICY:

The following information summarizes the major policies and regulations applicable to student conduct in the School of Nursing building.

1. General Information

- A. Possession and/or use of any illegal drug or substance by a student will result in immediate dismissal from the school. (See Drug Free School Policy)
- B. No alcoholic beverages are permitted in the school or on hospital property. Possession of alcohol will result in dismissal from the school.
- C. Damage to public areas will be handled on an individual basis.

2. Health and Safety

- A. Students are required to wash hands frequently using alcohol-based hand rub or soap and water to prevent the spread of infection.
- B. An Automated External Defibrillator (AED) is located outside of the men's bathroom on the first floor and outside classroom #2 on the ground floor.

3. Smoking Information

- A. The School of Nursing building and its grounds are a smoke-free environment. (See No Smoking Policy)

4. Kitchen, Cooking and Meals

- A. Students will assume the cost of their meals.
- B. Meal hours in the Hospital Cafeteria are as posted on the hospital intranet.
- C. Food should be kept in airtight containers in the school kitchen. Food stored in School refrigerator or kitchen are to be labeled with name and date. Students are asked to respect the personal property of others. Students are expected to keep School refrigerator clean. Food will be disposed of every 48 hours. NO INSULATED LUNCHBAGS are to be put in the refrigerator.
- D. The kitchen is to be kept clean after use. Students are responsible for cleaning up after themselves.
- E. Microwave ovens are provided in the first-floor kitchen. Please follow instructions for use.

5. Commuter Rooms, Student Lounge, and Computer Rooms

- A. **No food or drink is permitted in the Computer Rooms.**
- B. The pool table in the Living Room is not to be used at any time. **No exceptions to this policy.**
- C. No student is permitted to be in the computer room during class hours unless assigned by an instructor.
- D. No student is allowed to stay beyond scheduled times without prior permission from the Dean of Education.

6. Parking

- A. There is a student parking lot on the corner of Jamestown and Houghton Streets.
- B. Students may also park in the hospital's main parking lot on the corner of Jamestown Street and Ridge Avenue. Students are asked to park in the back section of the parking lot (toward Walnut Lane).
- C. Hang tags are required to utilize the student parking lot. There is a cash deposit that is required to receive a hang tag. Hang tags must be displayed on the rearview mirror of vehicle. Hang tags must be returned upon completion of the program or separation from the program (see Identification Policy regarding return of deposit).
- D. When parking in the parking lot, students must be courteous to other drivers and may not block lot entrance, lot exit or parked vehicles.
- E. **No students are permitted in the Doctors/Directors lot before 3pm.**
- F. The School is located in a residential area. Students must be mindful when utilizing street parking. Students must be respectful and not block residential driveways of area homes.

TELEPHONE USE IN CLASS OR CLINICAL/LAB

PURPOSE: To provide direction to all students.

POLICY:

Cell phones and smart devices are to be used only for educational purposes in class, lab or clinical settings. Emergency calls are to be directed to RMH SON at (215) 487-4344 where a message may be left. Every effort will be made to deliver the emergency message to the student.

RMH SON is not responsible for lost, stolen or damaged personal property.

NO SMOKING POLICY

PURPOSE: To provide regulations prohibiting smoking on the Roxborough Memorial Hospital campus in order to ensure a safe and healthy smoke free environment and to prevent hazardous conditions, discomfort and distress.

POLICY:

1. Smoking is defined as holding, carrying, or using a lighted cigarette, cigar, pipe or any kind of similar item or emitting or exhaling smoke of any kind.
2. Smoking of any kind (cigarette, cigar, pipe, or e-cigarettes.) by any person is prohibited in any of the Hospital buildings as well as in the School of Nursing and its surrounding campus. Facility grounds and properties include all buildings, including the School of Nursing, parking lots, grounds, and walkways that are owned, leased, or maintained by Prime Healthcare Services.
3. Individuals governed by this policy will refrain from the use, sale, or littering of all tobacco products, including but not limited to cigarettes, cigars, pipes, and smokeless tobacco inside or outside the facility or its property.
4. Failure to abide by this policy may result in disciplinary action, up to and including dismissal.
5. Students must stay within the hospital building during clinical experiences. This includes breaks and lunch. Smoking is not permitted prior to clinical. Students are not permitted to go to their cars during breaks or lunch to smoke. Standards of cleanliness and personal hygiene must be maintained.
6. The affiliated hospitals are smoke-free.
7. Any violations of this policy will result in the student being dismissed from the clinical site. The student will need to make-up the day and pay the required fee.

FIRE POLICY

PURPOSE: To provide safety for all students and School personnel.

POLICY:

1. The Hospital Fire Marshal and the Dean of Education will oversee the Fire Policy and the student body compliance to the policy.
2. All students are to review the fire evacuation policies and procedures including the locations of pull stations, fire extinguishers and evacuation route maps at least annually.
3. All students must attend a fire safety in-service. This in-service is done during orientation.
4. Corridor doors must not be propped or tied open.
5. No open flames, such as candles, are permitted.
6. When students are on the clinical unit, they will follow all fire safety rules as directed in the Hospital Fire Plan.
7. The Maintenance Department of the Hospital will check and maintain fire extinguishers and smoke detectors.
8. Upon hearing the fire alarm or receiving notification of a fire, all students are to proceed with evacuation in an orderly manner to the nearest exit.
9. All students, faculty and School personnel should report to the student parking lot on Jamestown Street and await further instructions from the Fire Marshal or Fire Department.
10. If the fire involves the Wolcott Auditorium, all students, faculty, and School personnel should proceed to the student parking lot on Jamestown Street.
11. Faculty, dean or designee will take a roll call to determine if all students have left the building.
12. If possible, inform the Fire Department of the location of the fire.
13. If the fire occurs in the SON and students are having class in the Wolcott Auditorium, the facility receptionist or designee will notify instructors & students to evacuate the auditorium and proceed to the student parking lot on Jamestown Street.
14. DO NOT reenter the school under any circumstances, until directed by the Hospital Fire Marshal or the Fire Department.
15. If a fire or smoke is discovered, pull the nearest alarm box. The alarm in the school is a coded system and will notify the operator in the main hospital building that there is a fire in the School of Nursing.

Follow the R-A-C-E-E plan:

Rescue life from danger area.

Alert others, including telephone operators by giving the fire's location (CODE RED & Room #).

Contain the fire by closing doors and windows.

Evacuate to a safe area.

Extinguish if possible, using proper equipment and common sense.

LOCATION OF FIRE ALARM PULL BOXES

(2) Ground Floor – East & West End

(3) 1st Floor = 1 East End, 1 West End & 1 by Front door

(2) 2nd Floor – 1 East & 1 West

(2) 3rd Floor – 1 East & 1 West

(2) Basement Mechanical Room West Wall and by entrance

(2) Wolcoff Auditorium- East wall by Fire exit & West Entrance alcove

LOCATION OF FIRE EXTINGUISHERS

(4) Ground Floor – East End, & West End

(4) 1st Floor -Front Desk, Outside Men's Room, Kitchen, East End

(5) 2nd Floor - Kitchen, File Room, East End, West End, Wall outside Nursing Lab

(4) 3rd Floor- Kitchen, Laundry Room, East End, West End

(3) Basement – Wall on stair landing and 2 in Mechanical Room

(2) Wolcoff Auditorium- East wall by Fire exit and West wall

SNOW/EMERGENCY SCHOOL CLOSING POLICY

PURPOSE: To provide guidance and direction to students, faculty, and staff.

POLICY:

1. School and clinical cancellation will be determined by the School of Nursing Administrator.
2. Students will be contacted by TEAMS and/or email by the faculty with changes to class and/or clinical format.
3. DO NOT call the school, as there will be no one there to answer your call.

ADMISSION & PROGRESSION POLICIES

ELIGIBILITY FOR LICENSURE POLICY

PURPOSE: It is the policy of Roxborough Memorial Hospital School of Nursing to advise all applicants of certain licensure considerations in Pennsylvania.

POLICY:

1. Students must meet all graduation requirements for the School of Nursing to be eligible for licensure.
2. Admission to the School of Nursing does not guarantee an applicant RN licensure in the Commonwealth of Pennsylvania.
3. The Pennsylvania State Board of Nursing may refuse, suspend or revoke any license in any case where the Board shall find that the applicant:
 - Has been convicted or has pleaded guilty or entered a plea of nolo contendere or has been found guilty by a judge or jury of a felony or a crime of moral turpitude, or has received probation without verdict, disposition in lieu of trial or an Accelerated Rehabilitative Disposition in the disposition of felony charges, in the courts of this Commonwealth, the United States, or any other state, territory or country.
 - Has committed fraud or deceit in securing his or her admission to the practice of nursing or to nursing school; or
 - Is unable to practice professional nursing with reasonable skill and safety to patients by reason of mental or physical illness or condition or physiological or psychological dependence upon alcohol, hallucinogenic or narcotic drugs or other drugs which tend to impair judgment or coordination, so long as such dependence shall continue.

Refer to the PA State Board of Nursing's website and the following links:

Professional Nursing Law (RN LAW) at

<https://www.dos.pa.gov/ProfessionalLicensing/BoardsCommissions/Nursing/Pages/General-Information.aspx>

The FREQUENTLY ASKED QUESTIONS for student/graduate nurses at

https://www.dos.pa.gov/ProfessionalLicensing/BoardsCommissions/Nursing/Documents/Applications%20and%20Forms/FAQ-tpp_exam.pdf

These give further details for an applicant who has been convicted of (1) a felonious act under "The Controlled Substance, Drug, Device & Cosmetic Act" or (2) a felony relating to a controlled substance in a court of law of the United States or other state, territory or country.

Applicants with questions relating to licensure are strongly encouraged to contact the Commonwealth of Pennsylvania State Board of Nursing (see Accreditation Information).

Reference

Licensure Considerations. (2021). St. Luke's School of Nursing Catalog/Student Handbook. Retrieved from <https://www.slhn.org/son/academics>

CORE PERFORMANCE STANDARDS

PURPOSE: To provide information to students on the functions of professional nurses.

POLICY: All students accepted into the School of Nursing are expected to have the capability of completing the entire nursing curriculum. The nursing curriculum requires demonstrated proficiency in a variety of nursing skills. All students should be able to complete each activity, with or without reasonable accommodation.

Requirements	Standards	Examples of Necessary Activities (not all-inclusive)
Critical Thinking	Critical thinking ability for effective clinical reasoning and clinical judgement consistent with level of educational preparation	<ul style="list-style-type: none"> ▪ Identification of cause/effect relationships in clinical situations ▪ Use of the scientific method in the development of patient care plans ▪ Evaluation of the effectiveness of nursing interventions
Professional Relationships	Interpersonal skills sufficient for professional interactions with a diverse population of individuals, families and groups	<ul style="list-style-type: none"> ▪ Establishment of rapport with patients/clients and colleagues ▪ Capacity to engage in successful conflict resolution ▪ Peer accountability
Communication	Communication adeptness sufficient for verbal and written professional interactions	<ul style="list-style-type: none"> ▪ Explanation of treatment procedures, initiation of health teaching ▪ Documentation and interpretation of nursing actions and patient/client responses
Mobility	Physical abilities sufficient for movement from room to room and in small spaces	<ul style="list-style-type: none"> ▪ Movement about patient's room, workspaces and treatment areas ▪ Administration of rescue procedures- cardiopulmonary resuscitation

Issue	Standard	Examples of Necessary Activities (not all-inclusive)
Motor skills	Gross and fine motor abilities sufficient for providing safe, effective nursing care	<ul style="list-style-type: none"> ▪ Calibration and use of equipment ▪ Therapeutic positioning of patients
Hearing	Auditory ability sufficient for monitoring and assessing health needs	<ul style="list-style-type: none"> ▪ Ability to hear monitoring device alarm and other emergency signals ▪ Ability to discern auscultatory sounds and cries for help
Visual	Visual ability sufficient for observation and assessment necessary in-patient care	<ul style="list-style-type: none"> ▪ Ability to observe patient's condition and responses to treatments
Tactile Sense	Tactile ability sufficient for physical assessment	<ul style="list-style-type: none"> ▪ Ability to palpate in physical examinations and various therapeutic interventions

Reference

Southern Regional Education Board (2020). *The Americans with disabilities act: Implications for nursing education*. Retrieved July 7, 2021, <https://www.sreb.org/publication/americans-disabilities-act>

SPECIAL ACCOMMODATIONS FOR DISABILITIES ACT

PURPOSE: The purpose of this policy is to communicate Roxborough Memorial Hospital School of Nursing's intent to support students with documented disabilities, to delineate the procedure for requesting accommodation for those disabilities, and to outline the Core Performance Standards that are the basis for determining the appropriateness of the requested accommodation.

POLICY: Roxborough Memorial Hospital School of Nursing is committed to supporting students with documented disabilities in their pursuit of an education. The school will attempt to address all reasonable accommodation requested by the student. "Reasonable Accommodations" as stipulated by the American Disability Act (ADA), are determined through formal assessment.

PROCEDURE:

1. All students applying for admission to the Program will be informed of the Special Accommodations for Disabilities Policy.
2. The Recruitment and Admissions Coordinator will act as the information person and liaison between the school and the student.
3. Students requesting accommodative services must submit written diagnostic/assessment information identifying the disability, recommendations for accommodation, and a stated rationale as to why the recommended accommodation is necessary and appropriate.
 - A. The Documentation of Disability and Request for Accommodative Services Form must be completed by a qualified, licensed professional and sent to the Recruitment and Admissions Coordinator.
- 4. The evaluation information must be current, within 3 years, and relevant to the request.**
5. The assessment documentation must include:
 - A. For learning disabilities:
 - i. A cognitive evaluation
 - ii. Achievement battery
 - iii. Assessment instrument's name
 - iv. Quantitative and qualitative information
 - v. The severity of the condition
 - vi. The area of educational impact
 - vii. The current level of functioning
 - viii. Additional observations
 - ix. The name of the evaluator, credentials, address and phone numbers
 - x. Date of testing
 - B. For physical disabilities:
 - i. A description of the condition
 - ii. The severity of the condition
 - iii. The area of physical limitation
 - iv. The current level of functioning
 - v. Additional observations
 - vi. The name of the evaluator, credentials, address and phone numbers.

- C. For psychological/psychiatric disabilities/diagnosis
 - i. A description of the condition
 - ii. The severity of the condition
 - iii. The area of psychological/psychiatric limitation
 - iv. The current level of functioning
 - v. Additional observations
 - vi. The name of the evaluator, credentials, address, and phone numbers
- 6. Students with a history of disability (learning, physical, and/or psychological) who are requesting accommodation must submit all appropriate documentation during the admission process and/or prior to the start of classes.
 - A. If the student requires updated testing and has received accommodation at another postsecondary institution within the last 10 years, those accommodations will be honored for one semester to allow for updated testing.
 - i. The Documentation of Disability Form and a copy of the expired testing must be submitted for review to provide accommodation.
 - ii. The student must provide updated documentation based on new testing to the Recruitment and Admissions Coordinator before the beginning of next semester for review.
 - iii. If the student fails to provide updated required documentation based on the new testing by the beginning of the next semester, their accommodation plan may not be honored.
- 7. Requests for accommodation may take at least seven business days for review and/or approval.
- 8. The school respects students' rights to privacy in disclosing information. Communication will be shared with the faculty to the extent that is required for accomplishing the accommodation plan.
- 9. The student is responsible for:
 - A. Scheduling a meeting with the Recruitment and Admissions Coordinator to complete the Accommodation Plan prior to the start of the semester or when new accommodation is requested.
 - B. Communicating the details of the Accommodation plan with the Academic Coordinator.
 - C. Notifying the Academic Coordinator immediately regarding any concerns related to fulfillment of Accommodations.
- 10. The Recruitment and Admissions Coordinator will notify the student if accommodation can or cannot be provided.

References

- Association on Higher Education and Disability, (2021). *Supporting Accommodations Requests: Guidance on Documentation Practices*. Retrieved July 7, 2021, <https://www.ahead.org/professional-resources/accommodations/documentation>
- Pennsylvania State Board of Nursing (2017). *Request Form for Testing Accommodations* Retrieved July 7, 2021 <https://www.dos.pa.gov/ProfessionalLicensing/BoardsCommissions/Nursing/Documents/Applications%20and%20Forms/RequestFormorAccommodations.pdf>
- Southern Regional Education Board (2020). *The Americans with disabilities act: Implications for nursing education*. Retrieved July 7, 2021, <https://www.sreb.org/publication/americans-disabilities-act>
- U.S. Department of Justice, (2020). *A Guide to Disability Rights Laws*. Retrieved July 7, 2021, <https://www.ada.gov/cguide.htm>
- U.S. Department of Education, (2020). *Protecting Students with Disabilities*. Retrieved July 7, 2021 <https://www2.ed.gov/about/offices/list/ocr/504faq.html>

STUDENT RECORDS POLICY

PURPOSE: To ensure that student educational and financial records are established, and that confidentiality is maintained.

POLICY: Student records are maintained in compliance with the Family Educational Rights and Privacy Act (FERPA) of 1974 (see Appendix B), Accreditation Commission for Education in Nursing (ACEN), the Pennsylvania State Board of Nursing, and State and Federal agencies. Roxborough School of Nursing notifies students of this policy by including it in the Student Handbook.

Maintenance and Location of Student Records:

1. Applicant records are collected and assembled by the Recruitment and Admissions Coordinator and support staff. They are kept in a locked file cabinet in that office until a student is officially accepted into the nursing program.
2. Educational records of enrolled students are assembled and kept in a locked fireproof file cabinet on the first floor of the nursing school facility.
3. Student health records of current students are kept in a locked file cabinet located on the first floor of the nursing school facility and are maintained for five years beyond the year of graduation or separation from the program. At the end of the five-year period, all documents are shredded.
4. All students' financial aid records are compiled and maintained for four years beyond the current award year by the Financial Aid Officer. All financial aid records are kept in locked file cabinets, located on the first floor of the nursing school facility. At the end of the four-year period, all old files are shredded.

Access and Use of Student Records

1. The school must allow students to inspect and review all their records.
2. The School of Nursing has the right to maintain the confidentiality of certain records. Students are entitled to copies of their records, except those records that are deemed confidential.
3. The cost for copies of record contents (excluding all confidential records and School of Nursing transcripts) is \$1.00 per page. A written request must be submitted. Requests can take up to 30 days for processing. Copies of documents will not be mailed or e-mailed; they must be collected at the School of Nursing by the individual requesting the documents. Identification and payment must be presented at the time of collection.

Disclosure Policy

1. The following individuals will be granted permission to see student's records without written consent:
 - A. School employees who have a need-to-know.
 - B. Any agency in furtherance of School licensure, accreditation, or similar approval process.
 - C. Any agency that the school is obligated to provide such information pursuant to state or federal law.
 - D. Individuals who have obtained court orders or subpoenas.
 - E. Persons who need to know in cases of health or safety emergencies.

2. The following individuals will be granted permission to see student's records with written consent. The school shall disclose Student Records only with the written consent of the student as follows:
 - A. Other Schools to which a student is requesting a transfer.
 - B. Certain government officials who need-to-know to carry out lawful functions.
 - C. Sponsors of financial aid to a student.
 - D. Organizations doing certain studies for the school.

Procedure of Inspection

1. Students or others must notify the Dean of Education in writing of desire to inspect the records.
2. The Dean or appointee will contact the eligible student and set up an appointment.
3. If it is impossible to inspect records personally for reasons such as illness or distance, a copy of material in the educational records will be provided on written request. A fee of \$10 will be charged for copies.
4. A list of disclosures of information to those other than students will be maintained in each student's educational file.

Duration of Records

1. The final transcript is kept ad infinitum.
2. Health records are kept for a period of five years.
3. The Consumer Information disclosure form (see Appendix) is kept for a period of three years.

CPR REQUIREMENT POLICY

PURPOSE: To maintain proficiency in CPR

POLICY:

1. All nursing students must show documentation of satisfactory performance in cardiopulmonary resuscitation (CPR).
2. Roxborough Memorial Hospital accepts only the American Heart Association as a valid provider for CPR.
3. Students will need to complete a Basic Life Support (BLS) Course for Health Care Providers.
4. A current BLS course completion card will serve as documentation of competency in CPR
5. BLS certification is a requirement for admission and must be valid until after graduation. Cards will be checked at the beginning of every school year during orientation.
6. Students must have a current CPR card, or they will not be permitted to attend clinical experiences. Students will be required to complete clinical makeup and pay the required fee (see Clinical Experience Lateness & Absence Policy).

STUDENT HEALTH AND CLEARANCE POLICY

PURPOSE: To ensure that all students have completed the health care requirements and health clearances before the start of the school year. To ensure the proper maintenance of student health records.

POLICY: The student is responsible for ensuring all required health documentation is completed before the academic year starts. No student will enter the class or clinical area without all health clearance requirements completed.

Required health documentation must be uploaded to the Castle Branch Document Management System (Castle Branch). Student Health Services will access these documents through Castle Branch. **It is required that all documentation be received prior to the start of classes.**

All official documentation of the request for Special Accommodations for Disabilities per the ADA guidelines (including testing and reports) must be submitted to the Recruitment and Admissions Coordinator (see Special Accommodations for Disabilities policy).

Year I Health Care Requirements:

1. Physical examination by designated health care provider at required Roxborough Facility.
2. Required immunizations:
 - a. Tdap/Td within the last 8 years
 - b. Others as indicated
3. Required laboratory studies:
 - a. Varicella Zoster IgG Antibody
 - b. Hepatitis B Surface Antibody
 - c. Rubeola (Measles) IgG Antibody
 - d. Rubella IgG Antibody
 - e. Mumps IgG Antibody
 - f. Others as indicated

If the Varicella, Hepatitis B, Rubeola, Rubella, or Mumps titers are low or equivocal, students will be required to obtain the appropriate immunizations/boosters.

4. Quantiferon TB Gold at required Roxborough Facility.
5. Laboratory Drug Screening at required Roxborough Facility.
6. Notification of latex allergy
7. Proof of current medical insurance

Year II Health Care Requirements:

1. Quantiferon TB Gold at Roxborough Facility.
2. Laboratory Drug Screening at Roxborough Facility.
3. Proof of current medical insurance

Years I & II Annual Requirement- Influenza Vaccination:

Influenza Vaccination is required annually of all students. Students will receive Influenza Vaccinations at Roxborough Memorial Hospital School of Nursing unless otherwise directed by the Student Health Services. Personal or philosophical reasons for not getting vaccinated are insufficient and requests of this nature will be denied.

COVID-19 Vaccination:

The COVID-19 Vaccination series is required for all students. Personal or philosophical reasons for not getting vaccinated are insufficient and requests of this nature will be denied.

Insurance:

1. Students are to have health and hospitalization coverage during their enrollment.
2. Students are responsible for financial debts incurred by an illness or injury.

Injuries/Exposures:

In the event that an injury or exposure does occur during a clinical rotation, it is critical that the student follows the proper procedure. The assigned Clinical Instructor must be notified immediately. The instructor will then direct the student to the appropriate health care provider according to the hospital policy where the injury and/or exposure occurred if treatment is necessary. In case of an emergency, the student should be sent to the Emergency Department, not Employee Health. Documentation regarding injury and/or exposure must be submitted to Student Health Services via email within 24 hours after an incident occurs (please see the Event Report Form).

Pregnancy:

In the event that a student becomes pregnant while enrolled in the program, the student is required to notify Student Health Services no later than the 13th week of pregnancy. The student must provide medical clearance from her licensed Obstetrical provider indicating that she can perform the expected duties of a student nurse and continue to participate in nursing experiences (see Medical Clearance Form for Physical Injury/Condition). **For the safety and well-being of the student and the pregnancy, students will not be able to participate in clinical experiences without the above-mentioned medical clearance.**

If changes occur during the pregnancy, it is the responsibility of the student to inform Student Health Services and submit a new Medical Clearance Form for Physical Injury/Condition reflecting the change immediately.

Recommendations or restrictions submitted by the licensed Obstetrical provider may result in the student's inability to complete the course and may result in withdrawal from the program.

It is the student's responsibility to be aware of the Center for Disease Control and Prevention (CDC) recommended guidelines for pregnant women.

After birth, students must submit a Medical Clearance Form for Physical Injury/Condition completed by their licensed Obstetrical provider to resume classes and clinical experiences. This form must be submitted to Student Health Services as stated (see Medical Clearance Form for Physical Injury/Condition).

Pregnant students in good academic standing who choose to take a leave of absence or withdraw from the program must follow the Students Reentering the Program Policy after obtaining medical clearance.

Class and/or Clinical Absence:

1. Students with suspected or known transmissible diseases are encouraged to limit exposure. Please notify Student Health Services as soon as possible to prevent the spread of infection.
2. Students will report hospitalization to Student Health Services and the Academic Coordinator. If hospitalization occurs during clinical time, the Clinical Instructor must be notified. This will be done in a timely manner for the purpose of communication to the Dean of Education and for record keeping.
3. Refer to the appropriate policies for directions on how to make arrangements for learning experiences missed due to illness.

Clearance Forms

1. If students are injured or inpatient hospitalization, clearance forms are required for return to classes and/or clinical experiences.
 - a. The school form must be submitted for clearance.
 - b. Additional documentation may be required
 - c. Forms can be found in the Appendices of the Student Handbook and on the school website.
2. If students are injured or inpatient hospitalization, students must be cleared by a physician or physician extender to return to classes and/or clinical experiences. Students must be cleared without restrictions.
3. All clearance forms must be submitted to Student Health Services by **2 PM** on the day before the anticipated return.
 - a. If Student Health Services is not available, forms must be submitted to the approved designee.
4. Student Health Services must verify and approve documentation **prior** to the student's return to classes and/or clinical experiences.
 - a. If Student Health Services are not available, forms must be submitted to the approved designee.

Failure to disclose known health conditions and/or changes in health status to Student Health Services may result in disciplinary action.

The school is not responsible for negative sequela related to undisclosed health conditions and/or changes in health status.

MANDATORY CRIMINAL BACKGROUND CHECK

PURPOSE: To ensure that all students have completed mandatory clearances before the start of the school year. To ensure the proper maintenance of student records.

POLICY:

1. Year I Clearance Requirements
 - A. Child Abuse Clearance
 - B. Pennsylvania Criminal Background Check
 - C. FBI Criminal Background Check (Fingerprint based)
 - D. Office of Inspector General (OIG) Exclusions Search (conducted by the School of Nursing)

2. Clinical agencies require the SON to provide a criminal background check, child abuse check, OIG, and FBI fingerprinting on all students in order to permit participation in the clinical experience.
 - A. Participation in clinical experiences is a required part of the curriculum and a requirement for graduation.

 - B. Certain clinical agencies will deny a student's participation in the clinical experience because of a felony or misdemeanor conviction, failure of a required drug test, or inability to produce an appropriate health clearance, which would result in delayed graduation or in the inability to graduate from the program.

 - C. Individuals who have been convicted of a felony or misdemeanor may be denied licensure as a health professional by the State Board of Nursing.

 - D. Information regarding any pending court cases must be immediately communicated to Recruitment and Admissions Coordinator prior to entry into the program, and thereafter as they occur.

3. Students are required to submit a confirmation form related to any criminal charges at the beginning of each academic year (see Appendix).

4. Any felony that occurs while enrolled in the program will result in dismissal.

PROFESSIONAL STANDARDS

PURPOSE: To provide guidance and direction to students regarding professionalism.

POLICY:

Each student is expected to act as a professional person. A professional person is characterized by their behavior. Professional standards identify the kind of behavior that is expected of a student studying to become a professional. Therefore, these standards must be met by all students in order for the student to be retained, promoted and graduated.

Standards of Nursing Conduct

A student nurse shall:

- Undertake a specific practice only if the student nurse has the necessary knowledge, preparation, experience, and competency to properly execute the practice.
- Respect and consider, while providing nursing care, the individual's right to freedom from psychological and physical abuse.
- Act to safeguard the patient from the incompetent, abusive or illegal practice of any individual.
- Safeguard the patient's dignity, right to privacy, confidentiality and abide by all HIPAA regulations.

A nursing student may not:

- Knowingly aid, abet, or assist another person to violate or circumvent a law or Nursing Board regulation.
- Discriminate, while providing nursing services, on the basis of age, marital status, gender identity, sexual orientation, race, religion, diagnosis, socioeconomic status or disability.
- Misappropriate equipment, materials, property, drugs or money from an agency or patient.
- Solicit, borrow, or misappropriate money, materials or property from a patient or the patient's family.
- Leave a nursing assignment prior to the proper reporting and notification to the appropriate personnel of such an action.
- Knowingly abandon a patient in need of nursing care. Abandonment is defined as the intentional deserting of a patient for whom the nurse is responsible.
- Falsify or knowingly make incorrect entries into the patient's record or other related documents.
- Engage in conduct defined as a sexual violation or sexual impropriety in the course of a professional relationship.

Unprofessional behavior can result in a censure, restitution, leave of absence, or dismissal.

A single incident of dishonesty, inappropriate conduct, or failure to adhere to policies may result in disciplinary actions.

A pattern indicative of abuse of the attendance policy will result in the steps so stipulated in that policy.

Progress in regard to professional standards will be communicated to students by their instructor at the end of each term and recorded on the clinical evaluation.

PROFESSIONAL CONDUCT

PURPOSE: To provide guidance and direction to students regarding professionalism.

POLICY:

Student conduct is also guided by goals found in the Mission section of the Student Handbook. These goals focus on the ethical behavior expected of a professional. Students are expected to conduct themselves professionally on campus, in the virtual environment and at clinical sites.

Respectful communication, both verbal and non-verbal, is expected between students and fellow students, staff, faculty, and administration. Faculty and staff are to be addressed by surname or title. Students are ambassadors of the school and any concerns about RMH/SON in general should be addressed with the appropriate person at the school. Comments which reflect negatively on the reputation of the school should **not** be made in clinical sites or to the public, including social media and the virtual environment.

Students should **not** discuss other students'/classmates' private business or personal information in School areas, classrooms, through social media, through text messaging, on clinical sites, or when out in the community.

Professional Conduct

The Student Handbook and Curriculum content provide guidelines for professional conduct expected of students.

Students are evaluated on professional behavior. References are given not only for competence in practice, but also behaviors that are an asset in working with the healthcare team. Consequences for failure to conduct oneself professionally will be based on the severity of the infraction up to and including dismissal from the program.

STUDENT CIVILITY POLICY

PURPOSE: To provide a safe environment conducive to teaching/learning and to provide guidelines for student conduct and behavior in both the physical and virtual environment.

POLICY:

Evidence suggests that uncivil behavior among students and faculty nationwide in higher education is a serious problem.

Incivility is defined as the intentional behavior of students to disrupt and interfere with the teaching and learning process of others. It may range from verbal abuse to explosive, violent behavior.

1. Uncivil student behavior can disrupt and negatively impact the overall learning environment for students who are uninvolved in the disruptive or inappropriate behavior.
2. Although expecting to attend a course with the intention of meeting the stated learning objectives, students are short-changed when lectures are needlessly derailed by disruptive and inappropriate behavior.
3. Inappropriate behavior that disrupts the learning process is a blatant violation of student rights.
4. Disruptive students purposefully interrupt the teaching process and interfere with student learning.
5. Although uncivil student behavior is rare, appropriate intervention will be implemented when faculty well-being and student learning are jeopardized.
6. Specific examples of class conduct which may be considered uncivil behavior under this policy include, but are not limited to the following:
 - using electronic devices during class or clinical experiences for non-educational purposes
 - holding conversations that distract faculty or other students
 - making sarcastic remarks or gestures, and disrespectful comments
 - dominating class discussions
 - using the hospital computers for purposes not related to School
 - challenging faculty knowledge/credibility
 - vulgarity directed at other students or faculty in and out of class
 - violation of dress code policy
 - inappropriate e-mails to other students and faculty
 - inappropriate use of social media
 - inappropriate use of chat function in virtual learning environment
 - sleeping in class
 - habitual lateness

7. Specific examples of conduct out of class which may be considered uncivil behavior under this policy include, but are not limited to the following:
- verbally discrediting faculty
 - turning in late assignments
 - sending inappropriate e-mails or remarks via social media or text messaging
 - not keeping scheduled appointments
 - complaining about constructive feedback from faculty
 - harassing comments directed at other students and faculty
 - making veiled threats toward other students
 - making veiled threats toward faculty
 - stealing
8. American society is experiencing episodes of anger and rage in daily life. Stress, disrespect, and a sense of student entitlement contribute to incivility in nursing education.
9. Faculty and students collaborate to address uncivil behavior by enforcing the ANA Codes of Ethics and Professional Nursing Standards that exist to define the nursing profession and ensure that qualified, ethical nurses are graduated from Roxborough Memorial Hospital School of Nursing.
10. Respectful communication, both verbal and non-verbal, is expected between students and fellow students, staff, faculty, and administration. Students are ambassadors of the school and any concerns about RMH/SON in general should be addressed with the appropriate personnel at the school. Comments which reflect negatively on the reputation of the school should not be made in clinical sites or to the public.
11. Students should not discuss other students'/classmates' private business or personal information in School areas, classrooms, on clinical sites or when out in the community.
12. Students are held accountable to uphold these standards and to conduct themselves in an ethical, professional manner. Consequences for uncivil behavior will be based upon severity of the infraction/offense up to and including dismissal from the program
13. Administrators, faculty, and students must engage in dialogue about incivility and develop strategies to improve the academic milieu to produce a healthy teaching-learning environment and improve relationships between students and faculty.

EVALUATION AND PROMOTION POLICY

PURPOSE: To provide guidance and direction to students on dismissal, promotion, and graduation policies and to recognize academic and clinical excellence.

POLICY:

DISMISSAL:

The Evaluation and Promotion Committee makes recommendations to the Faculty Organization for dismissal of a student at any time if, in the opinion of the faculty, the student fails to comply with the school's standards in theory, clinical practice, or in personal behavior as stated in the Philosophy, learning outcomes, and policies of the School and the Practice policies of Affiliating Agencies.

Dismissal also occurs for, but is not limited to:

- Failure to satisfactorily complete all course prerequisites
- A course failure
- A cumulative grade point average below 2.0
- Cheating
- Illegal possession and/or abuse of a controlled substance or a failed drug screen
- Violation of the Prime Healthcare Services Harassment policy
- A felony conviction
- Misrepresenting critical information on financial aid or other School documents

PROMOTION:

Students who have met the course learning outcomes are promoted to the next course by the Evaluation and Promotion Committee at the end of each semester.

Each student must maintain at least a "C" (2.0 GPA) in each nursing course and a cumulative grade point average of 2.0 prior to the beginning of the next academic year (See Grading Policy).

Students are expected to satisfactorily complete the following:

- All courses offered within the semester
- All prerequisites for the semester
- All financial obligations

NOTE: The student is expected to maintain continuous enrollment in the nursing program. A student has a maximum of 3 years in which to complete the nursing program.

MEETING OF STUDENTS WITH THE COMMITTEE

Students who are not meeting the clinical learning outcomes or passing in the theory component of the curriculum will meet with the Evaluation and Promotion Committee.

The purpose of this meeting is to assist the student in areas of time management, study skills or whatever is creating the problem and have the student develop an action plan for improvement.

The student will be informed by the Academic Coordinator of the time and place for the meeting.

The committee will consist of the faculty involved and the Academic Coordinator.

STUDENT COUNSELING AND GUIDANCE POLICY

PURPOSE: To facilitate students' successful progression through the curriculum.

POLICY:

Guidance and counseling are an integral part of the comprehensive program offered to students during the school year.

- A. All faculty members may make a referral to the school counselor. Faculty members will discuss the referral with the student. Faculty members will call and discuss the reason for referral with the school counselor. Students are expected to follow up with the counselor when a referral is made. Documentation of the referral will be placed in the student's file.
- B. The school counselor is available for telephone consultation and by appointment. Students are encouraged and supported in contacting the counselor by telephone and/or in person.

Jana Mallis, PhD
Professional Counselor
Roxborough Memorial Hospital School of Nursing
215-284-3646

- C. All sessions with the counselor are confidential. Records of counseling sessions will be kept in a secure file by the counselor.
- D. It is understood that counseling is on a voluntary basis. However, there may be occasions when the faculty and/or administration may deem it necessary for a particular student to have counseling in order to remain in the program and/or return to the program after a leave of absence.
- E. The school counselor is to be viewed as a resource to help the student begin to problem solve. The counselor can assist in referring students to extended services that are to be provided by licensed therapists outside the School of Nursing setting, at the student's expense.

WITHDRAWAL POLICY

PURPOSE: To provide guidance and direction to students who are withdrawing from the program.

POLICY:

A student may withdraw or be asked to withdraw from the nursing program at any time.

1. The student should submit a letter of withdrawal to the Dean of Education.
2. A student who has not appeared in class or clinical and has not given appropriate notice of such for two occurrences may be withdrawn from the program.
3. All refunds will be made as listed in the Financial Aid policies in the student handbook. Students are in compliance with federal guidelines if they verbally communicate to the school officials or faculty their intent to withdraw.
4. If the student who is withdrawing is a class officer or other school representative, all membership materials or other School materials must be returned to designee.
5. Identification badge, parking pass and any other appropriate materials must be returned to designee
6. All library materials must be returned, or a bill will be sent for the replacement materials.
7. A conference with the School Counselor is suggested.
8. A conference with the Financial Aid Officer must be scheduled.

SAMPLE: LETTER OF WITHDRAWAL

I, (student's name), do hereby formally withdraw from the Roxborough Memorial Hospital School of Nursing. My last day of attendance was (date).

Signed: _____ Date: _____

Printed name: _____

*Copies must be submitted to the Dean of Education, Recruitment and Admissions Coordinator, and Financial Aid Officer.

LEAVE OF ABSENCE POLICY

PURPOSE: To provide guidance and direction to students who are requesting a temporary leave of absence from the program.

POLICY:

A leave of absence may be granted up to one year to students who have short term, temporary health-related issues, including but not limited to conditions requiring medical and/or surgical interventions, pregnancies, and childbirths. Students' requests for a temporary leave of absence are considered on an individual basis.

When a health-related issue or pregnancy is confirmed, written confirmation from the attending physician is required.

1. The student should submit a letter requesting a leave of absence to the Dean of Education.
2. All refunds will be made as listed in the Financial Aid policies in the Student Handbook. Students are in compliance with federal guidelines if they verbally communicate to the school officials or faculty their intent to take a leave of absence.
3. If the student requesting a leave of absence is a class officer or other School representative, all membership materials or other School materials must be returned.
4. Identification badge, parking pass and any other appropriate materials must be returned to designee.
5. All library materials must be returned, or a bill will be sent for the replacement materials.
6. A conference with the Financial Aid Officer must be scheduled.
7. Please see the Students Reentering the Program Policy for information on returning to the program.

SAMPLE: LETTER REQUESTING A LEAVE OF ABSENCE

I, (student's name), do hereby formally request a leave of absence from the Roxborough Memorial Hospital School of Nursing. My last day of attendance was (date).

Signed: _____

Date: _____

Printed name: _____

*Copies must be submitted to the Dean of Education, Recruitment and Admissions, and Financial Aid Officer.

STUDENTS REENTERING THE PROGRAM POLICY

PURPOSE: To facilitate students' reentry into the program.

POLICY:

1. Any student who failed a nursing course or withdraws failing from the program may only petition for reentry to the program once and only once when the following criteria occurs:

- A. No violation of academic integrity or professional conduct during their time in the program.
- B. No clinical failure.
- C. A grade between 75.0 to 76.4 in **school created exams only**. This includes math exams.
 - i. This excludes all homework assignments and any standardized testing.
 - ii. Please note, **math exams and course exams are weighted differently**.
- D. If a student failed a previous nursing program, they are not eligible for reentry.
- E. Students that do not complete the Virtual ATI program will not be eligible for reentry (See NCLEX Success Plan Policy)
- F. Include in the request to return:
 - i. A written statement that the original circumstances requiring the withdrawal have been resolved.
 - ii. Indications of readiness to return and factors which may influence the student's success in completing the program.
- G. Requests for return received beyond the designated period will be reviewed at the discretion of the Faculty Organization Committee.

2. Requirements for readmission of a student who withdrew passing the course:

- A. The student must be in good standing
 - i. Good standing is defined as no violation of academic integrity or professional conduct during their time in the program.
- B. If withdrawal was for any reason other than a medical cause, the letter requesting to return must be submitted to the Recruitment and Admissions Coordinator at least eight weeks prior to the start of the course.
- C. Include in the request to return:
 - i. A written statement that the original circumstances requiring the withdrawal have been resolved.
 - ii. Indications of readiness to return and factors which may influence the student's success in completing the program.
- D. Requests for return received beyond the designated period will be reviewed at the discretion of the Faculty Organization Committee.
- E. Students that withdrew passing the course in good standing must return in the beginning of the course in which they did not complete.
- F.

3. Requirements for readmission of a student who is granted a Leave of Absence:

- A. A letter requesting to return stating desire must be submitted to the Recruitment and Admissions Coordinator, along with medical clearance, at least six weeks prior to the course's start.

- B. Include in the request to return:
 - i. A written statement that the original circumstances requiring the leave of absence have been resolved.
 - ii. Indications of readiness to return and factors which may influence the student's success in completing the program
 - C. Requests for return received beyond the designated period will be reviewed at the discretion of the Faculty Organization Committee.
 - D. Students that are granted a Leave of Absence must return at the beginning of the course in which they did not complete.
- 4. The following requirements for all students who are readmitted into the program include, but are not limited to:**
- A. Successful demonstration of clinical competencies from the previous course(s) in the Skills Lab.
 - B. Health requirements (see Student Health Policy)
 - C. All previous financial obligations are met.
 - D. CPR certification or re-certification (date not to expire prior to graduation)
- 5. In addition to above, the requirements which are to be completed for all students who are readmitted due to course failure include, but are not limited to:**
- A. Completion of entire Anatomy and Physiology review.
 - B. Auditing of course lectures for the previous semester as determined by the Academic Coordinators.
- 6. Students who do not complete reentry requirements by the designated due date will not be permitted to reenter the program. Students cannot reapply for readmission if these requirements are not fulfilled.**
- 7. Students who fail a nursing course, withdraw, or take a Leave of Absence in a nursing course, will only have one opportunity to reapply during the program based on the stated criteria.**
- A. Students must complete the program within three years.

GRIEVANCE PROCEDURE POLICY

To provide due process to students, to ensure that students have the opportunity to present grievances to Roxborough Memorial Hospital's School of Nursing when academic or professional matters of conflict arise, and that the school has a consistent way of resolving those grievances in a fair and just manner.

POLICY:

The faculty has autonomy to make reasonable demands and decisions as long as they are in accordance with the Student Bill of Rights and stated policy, and students have been informed of expected behavior.

A violation of these standards by the faculty may warrant a grievance. Actions that students may grieve range from a single grading incident up to, and including, dismissal from the Program.

The student holds the burden of proof and must be prepared to substantiate reasons for appealing the faculty action. The student will have the opportunity to review all the material pertinent to the case from his/her academic file so that he/she can provide documentation to support his/her position. (The student must make an appointment with the Academic Coordinator to review his/her academic file.) The appeal request must be made in writing. The student may seek the assistance of the Academic Coordinator to provide further explanation of the appeal process.

GOAL:

The objective of the Grievance Policy is to provide a prompt, non-discriminatory, and impartial process for resolving disputes that arise between a student and the faculty. A grievance may be characterized as an academic grievance or a nonacademic grievance and will be processed similarly in accordance with the grievance procedure.

PROCEDURE:

Each step of the appeal process must be completed sequentially and as specified below in order to proceed with the appeal. The steps of the procedure may differ slightly based on the nature of the grievance.

1. The appeal period begins on the day the student receives written notice of the faculty action. (i.e.: grade, dismissal, clinical evaluation)
2. Within five (5) business days of this written notice, the student wishing to appeal the action must file a written letter with the Academic Coordinator of his/her intention to appeal and the grounds for the appeal.
3. Within five (5) business days after receipt of the student's detailed statement, the Academic Coordinator shall review all documentation submitted by the student as well as any additional material furnished by the faculty member. Within five (5) business days, after receipt of the student's detailed statement, the Academic Coordinator will notify the student of his/her appeal decision.
4. Within five (5) business days, if the student is not satisfied with the Academic Coordinator's appeal decision, the student may proceed with a second appeal by completing the following three (3) steps as indicated below:
 - a. The student must file a letter setting forth the grounds for a second appeal with the Chairperson of the Grievance Committee.

- b. The student must submit all evidence compiled to date to support the grounds for a second appeal to the Chairperson of the Grievance Committee.
 - c. The student must supply a list of all witnesses expected to give testimony, a brief description of their testimony, and explain the relevance of their testimony to the action to the Chairperson of the Grievance Committee.
5. Within five (5) business days of receiving the student's letter setting forth the grounds for his/her second appeal, the Academic Coordinator must submit the following to the Chairperson of the Grievance Committee:
 - a. Supporting evidence from the faculty.
 - b. A chronological accounting of the events that led to the decision.
 - c. A list of all witnesses the school plans to produce and explain their relevance to the case.
6. Documentation from the student and the faculty will be circulated to the members of the Grievance Committee for review. The Committee members will review the evidence and may request new evidence to clarify any issue pertinent to the case. The Grievance Committee will meet within five (5) business days of receipt of the documents described in items four and five (4 and 5) of this policy to determine if the evidence justifies a hearing. The Chairperson of the Grievance Committee will notify the student and the Academic Coordinator of the Committee's decision. If the Committee decides to hold a hearing, the Chairperson of the Grievance Committee will also notify the student, the Academic Coordinator, and the faculty member of the hearing's time and place. In addition, the Grievance Committee will render a decision on which proposed witnesses may testify at the hearing. Only those witnesses whose testimony is determined by the Grievance Committee to be relevant to the action may attend and testify at the hearing.
7. The Grievance Committee will conduct a hearing within five (5) business days of its decision. Attendance at the hearing is required by the following individuals and closed to all others:
 - a. All Faculty members assigned to the Grievance Committee or alternate must be present unless such Faculty member was a decision maker.
 - b. All Student members or Student alternates assigned to the Grievance Committee must be present. If a Student Committee member is involved in the case, he/she will be excused from the proceedings and an alternate will take the place of the original member.
 - c. An appointed Committee member will take minutes of the proceedings and act as a recorder.
 - d. The faculty member and the student must be present at the hearing. (In certain circumstances, a faculty member may not be involved.) If either party is unable to attend due to extraordinary circumstances, the Chairperson of the Grievance Committee must be notified immediately. The hearing will be rescheduled within five (5) business days.
 - e. Witnesses whose testimony is determined by the Grievance Committee to be relevant to the action must be available to attend.
8. The hearing shall be conducted in the following manner:
 - a. The faculty member and the student must represent themselves. Other representatives, such as family members or attorneys, may not be present at the hearing.

- b. The faculty member will have the opportunity to state the nature of the grievance in detail.
 - c. The student will be given the opportunity to respond to the faculty member's statement and present supporting evidence for his/her position.
 - d. Committee members may ask questions to the faculty member and the student.
 - e. The faculty member and the student shall then be excused.
 - f. The Committee will make a decision following a period of closed deliberation. The period of closed deliberation may require the Committee to reconvene in particularly difficult cases. Once the deliberation is concluded, the decision of the Committee will be determined by a simple majority vote. Written notification of the decision will be sent to both parties no later than five (5) business days after the decision is reached. The decision will be sent to the student via certified mail.
9. If the decision of the Grievance Committee is not acceptable to either party, the faculty member or the student may file a written notice of appeal, stating specific grounds, with the Dean of Education within three (3) business days of receipt of such decision.

Please note: In the event that the Dean of Education has had significant involvement in the case, he/she should be recused, and this appeal will be directed to the Chief Executive Officer of Roxborough Memorial Hospital.

10. The Dean of Education will meet with the faculty member and the student to try to resolve the situation. In advance of the appeal meeting, the Dean of Education may request any additional records or documentation that the Dean of Education believes are relevant to the case.
11. The written decision of the Dean of Education shall be sent to both parties, the Academic Coordinator, and Chairperson of the Grievance Committee. The decision of the Dean of Education shall be final and binding.

Please Note:

1. For final course grade appeals only: if the faculty member recommends that the student not continue in the academic program, he/she must clearly document facts to support the decision. The Academic Coordinator will decide if the student may continue attending class during the appeal period.
2. If the appeal process occurs during the end of the course and course failure is likely, a meeting will be held to remind the student that clinical completion, including any necessary clinical make-up, is part of the requirements for course completion. Should the appeal be decided in the student's favor, the course will be deemed completed.

GRADUATION AWARDS

PURPOSE: To recognize outstanding achievements by individuals.

POLICY: All students must demonstrate professional and personal responsibility to be eligible for an award.

1. Marion Knoelke Award

Presented to the graduating student who demonstrates outstanding academic and clinical performance

Criteria for Selection:

1. Student must have a ninety or above academic average in nursing and above-average clinical performance
2. Student must be loyal to the school and self
3. Student must demonstrate leadership qualities

Eligible to Vote: All Faculty

2. Mr. and Mrs. William M. Martin Sr. Award for Clinical Excellence

Presented to the graduating student who demonstrates excellence in performance of clinical responsibilities

Criteria for Selection:

1. Above-average clinical performance
2. Demonstrated leadership skills
3. Positive, effective interaction with members of the health care team

Eligible to Vote: Clinical Faculty

3. The Debra Spencer “Heart of Nursing” Alumni Award

Presented to the graduating student who best exemplifies commitment to patient advocacy and promotes giving compassionate care to all patients

Criteria for selection:

1. Possesses the ability to connect with their patients and deliver kind, compassionate, empathetic care, which was demonstrated during their clinical experience.
2. Is committed to delivering extraordinary patient care and is a strong patient advocate.
3. Is selected by the faculty who witnessed these acts of caring during clinical rotations.

Eligible to vote: Clinical Faculty

4. Academic Proficiency Award

Given by the Medical Staff and presented to the graduating student who has achieved the highest-grade point average in the class

Criteria for Selection:

Highest GPA in graduating class

5. Samuel L. McClennen Memorial Award

Presented to the graduating student who best exemplifies the self-motivation, work ethic and steadfast commitment to the Roxborough Memorial Hospital School of Nursing

Eligible to Vote: All Full-time Faculty

6. LaVerne L. Dunlap McClennen Memorial Award

Presented to the graduating student who demonstrated dedication and commitment towards helping others, both in school and volunteering beyond the nursing programs requirements.

Eligible to Vote: All Full-time Faculty

7. Dr. Patricia T. Nelson Leadership Award

Presented to the graduating student who best represents the School of Nursing through his or her ongoing enthusiasm, respectful demeanor, professionalism, and support for his/her peers throughout the program

Criteria for Selection:

- A. Demonstrates intellectual curiosity
- B. Uses critical thinking in the application of principles of the nursing arts and science
- C. Active member of the student body
- D. Displays positive, respectful interactions with peers, faculty, and staff

Eligible to Vote: All Full-time Faculty

COMMENCEMENT POLICY

In order to receive a signed, official School diploma, a student must have completed the following requirements:

1. Successfully complete all academic and clinical requirements.
2. Meet all financial and financial aid obligations, as well as return all School materials.
3. ID badges and parking passes must be returned prior to Commencement, as instructed.
4. Complete all exit interviews for financial aid.
5. The students may participate in the graduation ceremony prior to achieving the expected benchmark on all standardized testing.
6. The diploma will be dated at the time of completion of the above requirements.
7. Diplomas will not be available at graduation. Students will receive the diploma cover at graduation and the actual diplomas will be available after completion of requirements.
8. Attendance at graduation events (Pinning Ceremony, Graduate Breakfast and Graduation Ceremony) is expected. Written notification should be submitted to the Dean of Education requesting permission to be excused.

STATE BOARD REGULATIONS AND NATIONAL COUNCIL LICENSING EXAM POLICY

PURPOSE: To provide direction and information for students.

POLICY:

The Dean of Education will assist the prospective graduate to prepare the application for the licensure examination, the application for state licensure, and the application for a temporary practice permit upon satisfactory completion of the program. The School of Nursing has no control over the scheduling of the licensure examination. Students wishing to take examinations in other states should discuss the matter with the Dean of Education.

The National Council Licensing Examination (NCLEX) is to be individually scheduled by the candidate. Information regarding this process will be given to graduating students.

NCLEX Applications

National Council Licensure Examination (NCLEX) directions for registration are provided to all graduating senior pre-licensure students approximately 1 month prior to graduation. The fee for the National Council of State Board Examination is currently \$200*.

Eligibility for Licensure in Pennsylvania

Successful completion of NCLEX will result in the right to use the title of Registered Nurse. The State Board of Nursing in Pennsylvania does not issue a license or a certificate to applicants who have been convicted of a felony or a felonious act unless at least 10 years have elapsed from the date of conviction. This pertains to all individuals who may have graduated in good standing from state approved Schools of nursing who meet all other criteria for licensure.

There is an additional \$22* fee for the Pennsylvania State Police's Access to Criminal History (PATCH) that is added to the new license application fee. Please review all instructions on the PA State Board of Nursing's website for applying for the NCLEX for more details on other Criminal History Check requirements.

Graduate Employment

In the state of Pennsylvania, a temporary practice permit is required prior to taking the licensing examination for graduate employment. The State Board of Nursing reminds all graduates that if they choose to be employed, they may not be employed as a registered nurse, assume the job responsibilities of Registered Nurse, or call themselves a Registered Nurse until they are licensed as a Registered Nurse. Students must complete all requirements for graduation to be eligible for the temporary practice permit. The fee for the temporary practice permit is currently \$70*.

The State Board of Nursing of Pennsylvania is located in Harrisburg, PA. You may contact them either by phone at (717) 783-7142 or by email, nursing@pados.dos.state.pa.us. The application fee for licensure in Pennsylvania is currently \$95*.

For any other state, you must contact the State Board of Nursing to find out the requirements.

* All fees are subject to change.

CAREER ASSISTANCE POLICY

PURPOSE:

1. To assist graduating nurses in obtaining a beginning nurse position.
2. To facilitate the process of obtaining references in a professional manner.

POLICY:

The Roxborough Memorial Hospital School of Nursing provides information to students and alumni regarding job availability. Faculty advises current students in preparing resumes and interviewing skills.

Students are required to submit a "Request for Reference" form to the instructor from whom they are seeking a reference (see form).

1. Career Opportunities

- A. Current students and alumni are kept informed of various career opportunities via social media, flyers, and electronic communication.

2. Request for Reference

A. The student requesting a reference shall:

- i. Put the request in writing (see form).
 - a. Include information on the course(s) in which instruction was provided by this faculty member, either in class or preferably, clinical
 - b. Requests via email can be accepted, as long as the required information is provided.
 - c. Note: The employer will be looking for a reference from an instructor in the area that you are applying. (ex: For an ICU position, request a reference from your instructor in Advanced Med-Surg, not Maternity)
- ii. Be gracious if refused.
- iii. Provide a minimum of 2 weeks' time for completion.
- iv. Include a current resume.
- v. Provide name, title, credentials, and address of the person to whom the letter should be sent in a stamped, addressed envelope.
- vi. Follow up with a written thank you note.

REQUEST FOR TRANSCRIPT POLICY

PURPOSE: To provide guidance to students in the process of obtaining transcripts.

POLICY:

Your academic transcript is composed of all credit-bearing coursework you attempted or completed at Roxborough Memorial Hospital School of Nursing.

Unofficial Transcript:

This transcript is signed by the Dean of Education but does not contain the embossed School seal.

Official Transcript:

Contains all courses and grades, signed by the Dean of Education, dated, embossed with the school seal, and mailed directly to a third party, i.e., employers or other Schools. Some exceptions may apply where there is a need for the transcript to be hand delivered or attached to an application. In this case, the transcript is placed in a sealed envelope and given to the student.

Beginning in August 2021, official transcripts can now be ordered through Parchment and sent electronically. A processing fee will be charged by Parchment at the time of the request. Transcripts will not be sent electronically by the school nor faxed or emailed. Electronic copies must be ordered through Parchment. For urgent requests, the turnaround time using this method of delivery is recommended.

Enrolled students are entitled to free copies of their transcript.

1. Requests for an official or unofficial transcript (paper copies) are generally processed within 48 hours of request, except during the registration or final grading periods of each semester and may take between 10-14 days to be processed.
2. All transcripts must be requested in writing utilizing the Transcript Request Form. Requests not utilizing this form will not be accepted. Some exceptions may be made at the discretion of the school.
3. Telephone requests will not be accepted.
4. Transcripts will be sent via USPS mail.
5. Unofficial transcripts can be printed by the student directly from the SONIS System.
6. All financial obligations to the school must be met within two weeks from the time of the request.

ACADEMIC POLICIES

ACADEMIC ADVISORS

PURPOSE: To facilitate student progression through the curriculum

POLICY:

Each student is assigned an Academic Advisor to assist the student in their educational endeavors. The assignments will be posted electronically.

All students are required to attend the Advisor/Advisee Event, if scheduled. If the student is unable to attend the Advisor/Advisee Event, they are required to contact their Academic Advisor to schedule an appointment.

ACADEMIC INTEGRITY POLICY

PURPOSE: To provide guidance to students in both the physical and virtual environment.

POLICY:

Roxborough Memorial Hospital School of Nursing believes that each student is responsible to uphold the highest standards of academic integrity. Academic dishonesty is defined by the School of Nursing as:

- a. cheating
- b. plagiarizing
- c. academic misconduct
- d. forging another's signature

These terms can be defined as follows:

1. Cheating is an act or attempted act of deception by which a student seeks to misrepresent that he or she has mastered information on an academic exercise that he or she has not mastered.

Examples: During an examination, examples of cheating may include, but are not limited to, a student looking at another student's test paper, students voicing or discussing test questions and answers during an examination, or to students who have not yet taken the examination, students tapping pencils or other objects or coughing in code, students using a cheat sheet or any other supportive information, or students going outside the examination room to obtain answers (i.e., the bathroom).

Examples of cheating also include a student entering an office or file to obtain the test or answer key, viewing test materials on a secretary's or faculty member's desk, accessing an exam outside of proctored location.

2. Plagiarism: Plagiarism is presenting words or ideas not your own as if they were your own. Self-Plagiarism is defined as using one's own words submitted in previous course or assignment. Three or more words taken directly from another author must be enclosed in quotation marks and referenced. The source's distinctive ideas must also be acknowledged in a citation. The words or ideas of another are not made one's own by simple paraphrasing. Plagiarism can be avoided by:
 - a. Placing the words of another in quotation marks and citing a reference to the source.
 - b. Citing a reference to the source when an author's words or ideas are paraphrased.
3. Academic Misconduct: the intentional violation of School policies, by tampering with grades, or taking part in the unauthorized procurement or distribution of any portion of testing materials. This includes taking notes during exam reviews.
4. Forging Another's Signature: signing another's signature or initials on class attendance forms or other materials that require another person's signature.

The students and faculty are expected to report cases of academic dishonesty in writing to the Dean of Education. The original report will be placed in the student's file.

Penalties for Academic Dishonesty:

The Faculty Organization will determine the penalty for any given act of academic dishonesty. Penalties may range from a written warning or partial or full loss of credit on an assignment up to and including immediate dismissal, depending on the nature of the offense.

The Academic Coordinator and one faculty representative will meet with the student to inform him/her of the decision and the student's right to appeal. If the student contests the faculty decision, he/she may appeal the decision according to the grievance procedures as outlined in the Student Handbook.

ONSITE TESTING POLICY

PURPOSE: To facilitate the student's successful progression through the curriculum.

POLICY:

1. All students are required to complete examinations and quizzes in the curriculum. This is a requirement in all courses and a graduation requirement. The student will be informed in advance of the dates and general topics that will be covered in each examination.
2. All students are required to complete standardized tests in the curriculum. This is a requirement in most courses and a graduation requirement. The student will be informed in advance of the dates and general topics that will be covered in each standardized test.
3. Examinations and quizzes are administered in person, in an online format.
4. Students must complete the examination within the designated timeframe.
 - a. Senior students will have 1.5 minutes per test question.
 - b. Freshmen students will have 2 minutes per test question.
 - c. All students will have 3 minutes per math question.
5. An onscreen calculator will be provided to use for mathematical calculations.
6. Students are not permitted to ask questions regarding test content during the examination.
7. Students are required to answer questions in the order presented. There is no opportunity to return to previous questions.
8. Exam grades will be posted within 7 days of the exam.
9. This policy is maintained throughout the duration of the program.

STUDENT RESPONSIBILITIES FOR ONSITE, ONLINE TESTING:

1. Students must have a fully charged laptop with reliable internet access.
2. Food and drink are not permitted during testing.
3. Students must close all other computer programs before beginning the exam. Other computer programs must remain closed until the exam is completed.
4. All computer texting applications must be disabled before beginning the exam.

TESTING PROTOCOL - During testing, the following protocol will be enforced:

1. Utilize class seating as arranged, unless otherwise instructed. Every attempt should be made to be on time for exams.
2. ID badges must be placed in the designated area prior to the start of the exam.
3. Personal items **may not be brought** into the testing area. These items include but are not limited to purses, backpacks, gym bags, drawstring bags, water bottles, drinks or food of any kind. Students are encouraged to leave such items at home or in a safe place. Limited locker space is provided on the first floor of the school across from Classroom 4. This is on a first come first use status. Students will need to provide their own combination lock. Faculty and staff are not responsible for ‘watching’ students’ personal items. The faculty and staff are not responsible for loss of valuables.
4. Items **to be brought** into the examination room include two #2 pencils and an eraser.
5. Hats, caps, or hoods are subject to inspection. Religious headwear is permitted.
6. The testing room is a “Quiet Zone”. There is to be no talking once in the testing room.
7. Students **may not** bring any digital technology to the testing area, with the exception of a laptop for testing purposes only, including but not limited to cellphones, IPADS, Android tablets, watches, or any other item that has internet search or recording capability.
8. Any and all digital technology must be **turned off** and will be sequestered by the faculty in the designated area. Failure to turn off the device is considered **TO BE UNCIVIL BEHAVIOR** by the faculty.
 - a. **First incident-** A written warning will be given and placed in the student’s file.
 - b. **Second incident-** Five (5) points will be taken off the exam grade and a 2nd written warning placed in the student’s file.
 - c. **Third incident-** ten (10) points will be taken off the exam grade and the student will be placed on academic probation.
9. The possession or use of any digital device, with the exception of a laptop for testing purposes only, is considered **TO BE CHEATING** by the faculty. The Faculty Organization will determine the penalty, which may include immediate dismissal from the program.
10. Students will be provided one sheet of scratch paper. Students are required to write their full name at the top of the scratch paper. When the allotted timeframe for the exam has ended, students must surrender their scratch paper to the faculty proctor.
11. This policy is maintained throughout the duration of the program.

TECHNICAL ISSUES FOR ONSITE, ONLINE TESTING

1. If technical issues are experienced during the assessment, exit the assessment, log back in and re-enter the assessment.
2. If technical issues persist, the student may be reassigned to a school issued computer at the discretion of the faculty proctor.

LATENESS AND ABSENCE FOR ONSITE, ONLINE TESTING:

1. Students need to notify the front desk prior to the start of the exam if they will be more than 15 minutes late or absent from the exam. Failure to do so may result in a zero for the exam.
2. If a student arrives late for an exam, the student will be permitted either of the following options at the discretion of the Course Faculty:
 - a. Utilize remaining test time.
 - i. Exam will be stopped at the scheduled exam end time.
 - b. Reschedule the exam at the course instructor's discretion but will be given an alternate format including the same major concepts.
3. **A student absent from a scheduled examination must contact the Academic Coordinator within 24 hours to schedule another.** The examination will be in an alternate format. The exam is expected to be taken as soon as the student returns to campus. Any call out related to injury will require clearance to return to school. Second subsequent occurrence in the semester will result in five-point deduction from exam and quiz. Non- illness absences or extenuating circumstances will require documentation at the coordinator's request. Extenuating circumstances will be evaluated by the dean.

REMOTE TESTING POLICY

PURPOSE: To facilitate the student's successful progression through the curriculum.

POLICY:

1. In the event that the Dean of Education determines a need for remote testing, this policy will be instituted.
2. All students are required to complete examinations and quizzes in the curriculum. This is a requirement in all courses and a graduation requirement. The student will be informed in advance of the dates and general topics that will be covered in each examination.
3. All students are required to complete standardized tests in the curriculum. This is a requirement in most courses and a graduation requirement. The student will be informed in advance of the dates and general topics that will be covered in each standardized test.
4. Examinations and quizzes are administered in an online format.
5. Students must complete the examination within the designated timeframe.
 - a. Senior students will have 1.5 minutes per test question.
 - b. Freshmen students will have 2 minutes per test question.
 - c. All students will have 3 minutes per math question.
6. Dictionaries will not be permitted during the examination.
7. An onscreen calculator will be provided to use for mathematical calculations.
8. Students are not permitted to contact faculty proctors regarding test content during the examination.
9. Students are required to answer questions in the order presented. There is no opportunity to return to previous questions.
10. Exam grades will be posted within 7 days of the exam.
11. This policy is maintained throughout the duration of the program.

STUDENT RESPONSIBILITIES IN THE EVENT OF REMOTE, ONLINE TESTING:

1. Students must have a fully charged laptop with reliable internet access, web camera and microphone.
 - a. The web camera and microphone must meet the minimum technical requirements.
 - b. The web camera must be attached to the computer being used for the exam so that the student can be viewed during testing. A separate cell phone camera may not be used.
2. Students must download the browser recommended by the proctored assessment program (Proctorio®).
3. Students must complete the exam pre-check 15-30 minutes BEFORE the scheduled exam time. Students are expected to begin the exam at the designated time.
4. Students will be required to present identification prior to the examination. Additionally, the room will be scanned prior to testing.
5. Students must be in a well-lit space.
6. Food and drink are not permitted during testing.
7. Students must close all other computer programs before beginning the exam. Other computer programs must remain closed until the exam is completed.
8. All computer texting applications must be disabled before beginning the exam.

EXAM SECURITY FOR REMOTE, ONLINE TESTING:

1. The school-issued dry erase white board and dry erase marker are permitted for examinations. The blank dry erase white board must be shown (front and back) to the web camera before beginning the exam, and before clicking the “Submit” button on completion of the last question of the exam.
2. Hats, caps or hoods are not permitted. Religious headwear is permitted.
3. Background music and television sounds are not permitted.
4. Any digital technology must remain outside of the testing area. This includes but is not limited to cellphones, IPADS, Android tablets, watches, additional computer monitors, screens or any other item that has internet search or recording capability.
 - a. The possession or use of any digital device during testing is considered **TO BE CHEATING** by the faculty.
5. All textbooks, papers and notebooks must be removed from the testing environment.
6. Taking pictures of test information is prohibited. No test items should be copied, saved or shared during or following the exam.
7. The Academic Integrity Policy is applicable to Online Testing.
 - a. If students are found to have violated the Academic Integrity Policy at any point, further action will be taken. The Faculty Organization Committee will determine the penalty, which may include immediate dismissal from the program.

EXAM CONTENT CLARIFICATION POLICY

1. Students will receive a topic content review on their ATI account after examination grades are posted.
2. Students can independently review the topic content missed on the examination.
3. If students have further questions, faculty are available for further clarification of content. Students should seek out the faculty member who presented the content within one week of the exam.
4. Students may express any concerns or questions about examination content with the designated faculty member.
5. If the student has evidence that there is a grading error, the student must report the alleged error in writing via email to the appropriate Academic Coordinator within 24 hours of the examination grade posting.

MATH PROGRAM POLICY

PURPOSE: To ensure that students can perform medication-based dosage calculations to administer medications safely and accurately.

POLICY:

1. The School of Nursing has integrated the use of ATI® Dosage Calculation and Safe Medication Administration program to reinforce the concept of devising the correct dose of medications for the patient. The modules will be completed at various points of the curriculum with the focus on simple to complex and correlating with classroom content.
2. When clicking on the ATI® math tutorial Dosage Calculation and Safe Medication Administration 3.0, students can select their preferred method (dimensional analysis, desired over have or ratio and proportion). The student will find a listing of modules which will be completed throughout the program.
3. Each ATI® module consists of step-by-step process videos for performing calculations, interactive functionality to simulate drug administration, and drill questions to reinforce the concepts.
4. At the completion of the ATI® module the student is to complete the post test for that ATI® module. The student must attain a 90% or better on the post test for eligibility to take the Medication Math quiz or examination administered during each course. The student may take the posttest as many times as necessary to attain the 90% required (see Medication Math Examination Policy).
5. Students who do not complete the assigned pre-class homework by the designated due date will receive half credit on the next scheduled medication math quiz or examination.
6. The following is a breakdown of content to be delivered based on the corresponding course:
 - a. Nursing 100: Safe dosage, Medication Administration, Oral Medications, Injectable medications, Powdered Medications, & Intravenous Medications
 - b. Nursing 200: Weight Based Dosing and Critical Care medications up to “Titrating continuous IV”.
 - c. Nursing 300: Critical Care medications
 - d. Nursing 400: Pediatric Medications, Case Studies (Diabetes, Acute MI, Pediatric Ear infection & Pre-Eclampsia) and N400 Final Practice Custom Assessment for Medication Administration and Dosage Calculations.

MEDICATION MATH EXAMINATION POLICY

PURPOSE: To ensure that students can safely and accurately administer medications.

POLICY:

1. The Medication Math quizzes, and examination will be given via the ATI® Custom Assessment Builder program as proctored online examinations.
2. Students will be administered 2 medication math quizzes worth 1% for each quiz and a medication math course examination worth 2% for a total of 4% of course grade.
3. The medication math quizzes, and medication math course examination testing dates will be determined within the individual nursing courses and found in the course materials.
4. Only the ATI® onscreen calculator is permitted to be used during the medication math quizzes and medication math examination.
5. Answers are to be entered into the ATI® Custom Assessment Math Examination.
6. Labeling of answers will follow the Roxborough Memorial Hospital School of Nursing Math policy.
7. Items to be brought into the examination room include two #2 pencils and an eraser.
8. For onsite exams, students will be provided one sheet of scratch paper. Students are required to write their full name at the top of the scratch paper. When the allotted timeframe for the exam has ended, students must surrender their scratch paper to the faculty proctor.
9. For remote testing, the school-issued dry erase white board and dry erase marker are permitted for examinations. The blank dry erase white board must be shown (front and back) to the web camera before beginning the exam, and before clicking the “Submit” button on completion of the last question of the exam.
10. Any student who does not attain a raw score of 70% on a quiz or raw score of 85% on the medication math course examination must participate in remedial instruction as assigned by math faculty. This may include the following
 - a. Attendance and participation in a medication math remediation meeting with math faculty at a date and time designated by math faculty.
 - b. Retake of a math faculty designed practice assessment on ATI® to a score of 90% or higher.
11. Students who do not participate in math remediation will be presented to the Evaluation and Promotion Committee for disciplinary action that may lead to dismissal from the program.
12. **N100:** Students who do not earn a 70 on the quizzes or 85% comprehensive math exam must

remediate

N200: Students who do not earn a 70% on quizzes or 85% on the comprehensive math exam must remediate.

N300: Students who do not earn a 70% on quizzes or 85% on the comprehensive math exam must remediate.

N400: Students who do not earn a 70% on quizzes or 85% on the comprehensive math exam must remediate

MEDICATION MATH EXAMINATION GRADING POLICY

PURPOSE: To standardize testing rules on medication calculation exams.

POLICY:

1. A list of formulas and conversion factors will be provided for students to memorize.
2. Answers must be labeled correctly in order to be considered correct. No partial credit will be given.
3. When calculating dosages and rate of IV infusions by IV pump (mL per hour), round to the nearest tenths place.
4. When calculating IV flow rates by gravity, the answer must be rounded to the nearest whole number, the label must read “gtt/min”.
5. Answers must not have trailing zeroes.
Correct: **1 mg**
Incorrect: 1.0 mg
6. Answers must have a whole number before a decimal point
Correct: **0.1mL**
Incorrect: .1 mg
7. Answers to fluid balance questions must have a “+” or “-” in the answer. The label must read “mL”.
Correct: **+248 mL**
Incorrect: 248 mL
Incorrect: +248
8. The following list of labels may not be used:
 - a. Do not write “cc”, you must write “mL”
 - b. Do not write “u”, you must write “units”
 - c. Do not write “ug”, you must write “mcg” or “microgram”
9. Do not use QD or QOD. Use “daily” or “every other day” respectively.
10. Answers must be placed in designated answer box on web page.
11. Only one answer may be entered in the answer box provided.

MATH REMEDIATION PROGRAM

A. Medication Math Quizzes and Examination

1. Medication math remediation is required of students who score below the benchmark of 70% on a medication math quiz or 85% in the medication math examination.
2. Students whose score falls below the quiz or examination achievement benchmark will receive an e-mail from the math instructor within 3 business days of the examination date.
3. Synchronous small group remediation sessions will be scheduled by the math instructor. In these sessions, students will review topics missed from the most recent quiz or examination to identify and correct any math errors. Attendance at math remediation is required (see Medication Math Examination policy).
4. Each student should plan on each session lasting 1 hour. Subsequent sessions may be required, as determined by the math instructor.
5. Students who continue to struggle with math concepts will be required to seek outside help. Documentation may be required as proof of outside tutoring.
 - a. If the tutor is a student in the School of Nursing, prior approval by the math instructor is required.

GRADING POLICY

PURPOSE: To inform the student of the process for recording grades.

POLICY:

The grading policy for students of the Roxborough Memorial Hospital School of Nursing is the cumulative average based on RMH/SON grades. Each grade is awarded a specific number of quality points.

1. Grading and Quality Point System

Roxborough Memorial Hospital School of Nursing (RMH/SON)

<u>Roxborough SON Policy</u>	<u>Letter</u>	<u>Grade</u>	<u>Quality Points</u>
93 – 100%	A	Passing	4.0
89 – 92%	B+	Passing	3.5
85 – 88%	B	Passing	3.0
81 – 84%	C+	Passing	2.5
77 – 80%	C	Passing	2.0
Below 77%	F	Failure	0
	WP	Withdrawal Passing	
	WF	Withdrawal Failing	
	I	Incomplete	

- A. All grades earned at RMH/SON are numerical grades and are awarded a specific number of quality points.
- B. A grade of 77% C (2.0) must be attained for successful completion of a nursing course.

2. DEAN'S LIST:

Students who will be considered for the Dean's List will have:

- i. A 3.5 or better GPA for the semester
- ii. Satisfactory performance (2 or greater) in the clinical area

3. RMH/SON Academic or General or Other Grading Policies

A. Incomplete Grades

- i. Students are expected to complete all required course work within the semester.
- ii. In rare circumstances, a temporary grade of Incomplete (I) is given to a student who has not been able to complete the required work in a course.
- iii. The student must complete the work within two weeks after the end of the course; otherwise, the Incomplete grade (I) will become an (F). Extensions may be granted at the discretion of the Dean of Education in consultation with the Academic Coordinator.

- iv. An exception to the two-week completion time occurs in N400 with the ATI Virtual Course requirements (see NCLEX Success Policy).
- v. A student receiving an Incomplete will not graduate with an “I” on the transcript.

B. Grading Methods

Methods other than testing may be used to evaluate achievement of student learning outcomes, but they will not comprise more than 10% of the grade.

C. Course Failure

A failure in a nursing course will result from a student receiving less than 77% (or F) in the theoretical portion of a nursing course or a failure in the clinical portion, at the completion of a course. When a student fails either the theoretical or clinical portion of a course, the student is dismissed from the program.

D. Repeated Courses for Student Re-entering

- i. All repeated courses will be taken at the student’s own time and expense. The maximum time frame that a student has to complete the program is three (3) years.
- ii. All courses attempted and grades received appear on the official transcript.
- iii. Students who repeat a course for which they receive a grade of “F”, will have the most recent grade used to calculate their GPA. Note: “F” will remain on official transcript.
- iv. All previous satisfactorily completed nursing courses will be included in the GPA.

E. Auditing Courses

- A. All students who are readmitted due to course failure are required to audit course content prior to return.

F. Grade Changes

- i. If the student has evidence that there is a grading error, the student must report the alleged error, in writing, to the appropriate Academic Coordinator within five working days after notification of the grade. If a grade change is warranted, the Academic Coordinator will notify the student, the Dean of Education and the secretary to ensure that the correction is appropriately documented.
- ii. It is the student’s responsibility to review their School transcript upon receipt. The Dean of Education can only verify submitted grades. Grade changes may only be made by the course faculty issuing the grade.

4. Financial Aid Status

Failure to maintain satisfactory academic progress will jeopardize procurement of financial aid. (See Student Financial Aid Policies).

CLASS ATTENDANCE REQUIREMENTS

PURPOSE: The faculty believes that attending classroom sessions, whether physical or virtual, is critical to the student's success in meeting course and program outcomes in the classroom, virtual environment and in the clinical area. This policy details student responsibilities in regard to classroom attendance.

POLICY:

1. **Class attendance is mandatory.**

- A. Attendance records are kept by the faculty for each lecture. Students have the responsibility of signing the attendance record or responding to the attendance record poll within 15 minutes of the start of the lecture and at any time requested by the faculty. Students who arrive after the instructor begins class must sign the attendance record or respond to the poll. The arrival time must be noted on the attendance record.
 - B. Signing another student's name to the attendance record or responding to an attendance poll under another student's name is a serious violation of the Academic Responsibility Statement (see Academic Integrity Policy).
2. For in-person lectures, students who anticipate being significantly late (thirty minutes or more) to a class are required to notify the School of Nursing at (215) 487-4344. Upon arrival, students entering late are asked to enter the classroom quietly and to cause as little disruption as possible.
 3. For virtual lectures, students who anticipate being significantly late (thirty minutes or more) to a synchronous lecture are required to notify the lecturing instructor via email. Upon arrival, students entering late are asked to enter the virtual classroom quietly, mute their microphone, and to cause as little disruption as possible.
 4. **A student who is late to lecture, leaves early, or is absent from lecture is responsible for any missed content and for any missed announcements which may have been made.**
 5. Classes begin promptly at the scheduled time. Class times are published in the Weekly Class Schedule, distributed at the start of each semester. Changes in class times will be communicated through a chosen electronic platform.
 6. Any student displaying uncivil behavior (see Student Civility Policy) may be asked to leave the live or virtual environment.

Non-attendance

1. Academic Coordinators track student attendance. Students with a continuing pattern of non-attendance from class, whether live or virtual, are considered at risk of course failure. Academic warnings may be issued at any time to students at risk due to erratic attendance.

Excused Absences

1. The following constitute excused absences when accompanied by appropriate documentation:
 - A. Inpatient hospitalization of self or immediate family member
 - i. Inpatient hospitalization does not include Emergency Department or Urgent Care visits.
 - B. Death of an immediate family member (parents, grandparents, siblings, significant other/spouse, in-laws, children)
 - C. Funeral
 - D. Mandated court appearance
 - E. Jury duty
 - F. Military Service
 - G. Other unique circumstances approved by the Dean of Education

2. An excused absence will not be considered in the hours calculated for academic warning.

***Classroom attendance and absences may be included in references if requested by potential employer.**

NCLEX SUCCESS PLAN POLICY

PURPOSE: The faculty at the Roxborough Memorial Hospital School of Nursing believes that certain measures for success must be undertaken during the educational program to ensure students are prepared for the licensure examination. To this end, the following plan has been developed by the Dean of Education and the Faculty.

POLICY:

1. Role of the Faculty

The Course Faculty plays a key role in making the NCLEX Plan a success. Faculty are responsible for:

- A. Supervising the students' compliance with the plan and the degree to which students are making progress to be ready for the NCLEX.
- B. Documenting all activities undertaken to assist with NCLEX testing competence.
- C. Ensuring that the students assigned to their course have met the plan's requirement for that course.

2. Role of the Student

Students accept full responsibility for assuming an active role in completing all components of the NCLEX Plan. Students are also responsible to follow through with all recommendations and requirements from the Dean of Education and Faculty that are determined to be significant steps for their success.

3. Components of the NCLEX Success Plan

- A. The student will complete the Test Taking Review in N100, N200 & N300.
- B. Students are required to take the following ATI® proctored assessments throughout the nursing program:

N100 Critical Thinking Entrance, Fundamentals

N200 Mental Health

N300 Customized Medical-Surgical, Pharmacology

N400 Pre-Capstone, Comprehensive Predictor, Critical Thinking Exit

- C. RN Capstone Content Review (N400)

Consists of 7 weeks of content review modules. Each module requires completion and evidence of a pre-assignment quiz, ATI® assessments taken at home, focused review and a quality post assignment. Students may achieve a total of 230 points which will be a percentage of the course grade in the final nursing course (N400).

- D. ATI® RN Comprehensive Predictor NCLEX Readiness Exam

All students are required to take this exam in the final course of the program. Please refer to the course syllabus.

E. ATI® Three Day Live Review

Students are required to attend the three-day live review prior to graduation. Attendance at all sessions is mandatory.

F. Virtual ATI®

All students will be required to complete the Virtual ATI® Program.

- i. Proof of successful completion of the Virtual ATI® program is required to fulfill graduation requirements. It is required that **all** students achieve the “Green Light”.
 - ii. Students will be permitted to begin the Virtual ATI® Program after the ATI® three-day live review.
 - iii. Students will be permitted to “walk” in the graduation ceremony but will NOT have met graduation requirements.
 - iv. Students will receive a grade of “Incomplete” in N400 until they have completed Virtual ATI® Program and all other graduation requirements.
 - v. It is the responsibility of the ATI® coach to notify the school of achieving the “Green Light” in the Virtual ATI® program.
 - vi. Twelve (12) weeks from the date of graduation, if successful completion of the Virtual ATI® program is not documented, the grade of “Incomplete” will be changed to a grade of “F” for the N400 course. Readmission to the nursing program will not be permitted.
 - a. Extraordinary circumstances will be addressed by the Dean of Education on an individual basis.
 - vii. Students must complete Virtual ATI® in order to receive a signed official School diploma.
- G. Students are required to complete a set number of NCLEX-style questions every week within all nursing courses. These questions should focus on the topics covered in class and will be submitted to clinical instructors as directed. The NCLEX-style question distribution is as follows:

N100 10 questions/week
N200 20 questions/week
N300 25 questions/week
N400 Capstone

ATI® POLICY

PURPOSE: Assessment Technologies Institute ATI® (ATI) is a supplemental learning tool utilized in the nursing program to assist identifying gaps in knowledge. This comprehensive review program offers multiple assessment and remediation activities designed to enhance classroom learning. The ultimate goal of ATI® is to assist students in achieving success on the NCLEX-RN.

Pertinent Information:

1. All students will receive a comprehensive orientation to the ATI® website at the beginning of the program and in selected nursing courses.
2. Students will be provided Review Modules in print and eBook formats that include written and video materials in key content areas.
3. Standardized assessments help the students to identify what they know as well as areas requiring remediation. Completion of a variety of Practice and Proctored assessments is required throughout the program.
4. The Sequence/Grading of ATI® Testing (in courses that include a Proctored Assessment) is as follows:
 - a. Complete the Online Practice Assessment A.
 - b. A Focused Review of Practice A will be generated for each topic missed. This should be used to create a legible, handwritten body of work that consists of 2 critical points of information that is relevant to the missed content.
 - c. Online Practice Assessment B may be required to be taken for additional reinforcement of content.
 - d. Students will take a Proctored Assessment. The scoring of each proctored assessment is fully described in each course syllabus.
 - e. All assignments must be completed by the date(s) designated in the course syllabus/weekly schedule.
 - f. If any required Practice Assessment or Focused Review is not completed when due, the student will receive only half credit for the ATI® assignment as noted in the syllabus; however, the student must complete these assignments in order to complete course requirements.

Student Responsibilities:

1. Become familiar with ATI® website and resources available, including “How To” videos.
2. Contact ATI® Tech support for technical difficulties as posted on ATI® website.
3. If technical difficulties are not resolved, student must email the Academic Coordinator prior to due date of assignment.
4. For proctored examinations and quizzes administered through ATI®, please refer to the Testing and Test Review Policy.

CLINICAL POLICIES

PREPARATION FOR CLINICAL EXPERIENCES

Please check with your Clinical Instructor regarding the posting of assignments.

Patient Research

1. Ask for permission to review a patient's medical record (Please note in some institutions, medical records have been computerized or are in the process). If you are assigned more than one patient – only review one chart at a time. Remain seated where you and the chart can be found, if needed.
2. On your prep sheet – identify the patient by using initials only.
3. Review the patient's chart:
 - A. Review the History and Physical section of the chart. This provides an overview of the patient's medical history and a history of the present illness.
 - B. Review the Progress Notes of the multidisciplinary team.
 - C. Review Physician Orders. This section lists tests, treatments, consults and medications that are prescribed to the patient.
 - D. Review the laboratory studies (i.e., CBC, CMP/BMP, UA, Coags, etc.). Note the patient's results (i.e., normal, and abnormal lab values). Review causes for abnormal lab values in your reference sources.
 - E. Do the same with radiology and other studies (i.e., x-rays, ultrasounds, EKGs, etc.).
4. From the material in the patient's medical record, nursing report, your assessment, and your interview of the patient, begin to prepare your nursing plan of care.
 - A. Be prepared to verbalize/document your patient's top 3-5 nursing priorities.
5. You will be expected to explain:
 - A. The pathophysiology of the patient's disease process.
 - B. The rationale of the multidisciplinary team's treatment plan (which includes diagnostic tests, treatments, and medications) related to the patient's disease process.
 - C. The rationale for prescribed medications.
 - D. Your patient's plan of care (i.e., scheduled studies, medications, procedures, and treatment).
 - E. Patient/Family education related to:
 - i. Diagnosis
 - ii. Treatment – tests, drugs, rehab care, diet, etc.
 - iii. Health Promotion
 - iv. Community resources
6. Utilize electronic nursing data source as a reference in the clinical area.
7. Clinical paperwork will be due as indicated in the course syllabus.
8. The weekly Clinical Evaluation tool will be due as indicated in the course syllabus.

9. Continued occurrences of late paperwork will be noted on the clinical evaluation and may result in course failure.

Clinical Experiences in the Virtual Environment

1. Students must be in full uniform and at their computer at the assigned time.
2. Virtual Clinical experiences may be synchronous or asynchronous.
 - a. For synchronous experiences, students must attend virtual pre-conference and virtual post-conference at the time designated by clinical faculty.
 - b. For asynchronous experiences, assignments must be submitted by the date designated by clinical faculty.
3. Students are expected to complete virtual clinical assignments in their entirety.
4. Clinical Experiences in the virtual environment are counted toward clinical time.
5. Clinical paperwork will be due as indicated in the course syllabus.
6. The weekly Clinical Evaluation tool will be due as indicated in the course syllabus.
7. Continued occurrences of late paperwork will be noted on the clinical evaluation and may result in course failure.

CLINICAL EXPERIENCE LATENESS & ABSENCE POLICY

PURPOSE: To provide the student with guidelines for attendance at Clinical Experiences, whether in person or in the virtual environment.

POLICY:

1. Clinical Experience times are published in the Weekly Class Schedule. **Attendance and punctuality at Clinical Experiences are mandatory.** Documentation of Clinical Experience lateness/absence will be kept on the student's Clinical Performance Evaluation.
2. Punctuality, as defined by the faculty, is that students are not late for their assigned Clinical Experience.
3. Lateness is defined by the faculty as five (5) minutes past the start time assigned.
4. Students who are going to be late or absent for Clinical Experiences are expected to notify the Clinical Instructor in a timely fashion. Students who are going to be late or absent for the Lab/Seminar experience are expected to notify the school and/or Academic Coordinator in a timely fashion.
 - A. One no call/no show will result in the student being placed on clinical probation.
 - B. Two no call/no shows may lead to dismissal from the program.
5. A student will be counseled about lateness as follows:
 - A. The first time a lateness occurs the "Clinical Experience Lateness/Absence" form will be issued by course faculty to be placed in the student's file.
 - B. The second time a lateness occurs, a written warning will be issued by course faculty and a copy of the "Clinical Experience Lateness/Absence" form placed in the student's file. Furthermore, the student may be referred to the School Counselor.
 - C. If there is a third lateness, the student will be placed on probation by course faculty and a copy of the "Probation" form will be sent to the Dean of Education's office.
 - D. Any further incident of lateness may result in course failure.
6. **The maximum number of absences for hospital-based clinical experiences (or the equivalent) cannot exceed 2 days per semester.**
 - A. Extenuating circumstances will be addressed by the Dean of Education.
7. A student will be counseled about absence as follows:
 - A. The first time an absence occurs, the first occurrence of the "Clinical Experience Lateness/Absence" form will be issued by course faculty to place in the student's file.
 - B. The second time an absence occurs, the student will be placed on clinical probation by course faculty and copies of the "Clinical Experience Lateness/Absence" form and the "Clinical Probation" form will be placed in the student's file and sent to the office of the Dean of Education. Furthermore, the student may be referred to the School Counselor. Any further absences may result in course failure and dismissal from the program.
8. Scheduled experiences must be attended in their entirety.
9. Partial attendance is not permitted.
10. Multiple occurrences of lateness and absences may result in course failure.

Excused Absences

1. No fee will be charged if absence is due to the following:
 - A. Inpatient hospitalization of self or immediate family member
 - i. Inpatient hospitalization does not include Emergency Department or Urgent Care visits.
 - B. Death of an immediate family member (parents, grandparents, siblings, significant other/spouse, in-laws, children)
 - C. Funeral
 - D. Mandated court appearances
 - E. Jury duty
 - F. Military Service
2. **Appropriate documentation must be provided for absences to be excused.**

In-Person Clinical Experiences

1. Arrival 60 minutes past the start time will be considered an absence.
 - A. The student will be sent home and will be required to make up the clinical experience.
 - i. The student will be required to pay the fee and make up the Clinical Experience.
 1. The required fee must be paid via SONIS.
 2. The receipt must be emailed to the Academic Coordinator **PRIOR TO** completing the Clinical Experience makeup (see Clinical Makeup Protocol form).
 - a. A fee of \$50.00 will be charged for each missed Clinical Experience that is scheduled for 4 hours or less.
 - b. A fee of \$100.00 will be charged for each missed Clinical Experience that is scheduled for more than 4 hours but less than or equal to 8 hours.
 - c. A fee of \$150.00 will be charged for each missed Clinical Experience that is scheduled for more than 8 hours but less than or equal to 12 hours.
 - d. Unpaid fees will result in the student's inability to progress to the next semester or in N400, to graduate.
2. Students who are not adequately prepared for Clinical Experiences, as determined by the instructor, will be asked to leave the experience and this will be considered an absence.
3. Students should **NOT** come to Clinical Experiences when ill. Students who come to Clinical Experiences when ill, as determined by the instructor, will be sent home.
4. Clinical makeup will need to be completed as designed by the faculty.

Clinical Experiences in the Virtual Environment

1. If there are technical difficulties in the virtual environment, students must notify the instructor within 15 minutes of the scheduled start time.
2. Students who are not adequately prepared for Clinical Experiences, as determined by the instructor, will be asked to leave the experience and this will be considered an absence.

MEDICATION ADMINISTRATION POLICY

PURPOSE: To provide for the safe and effective administration of medications by students in the clinical area.

POLICY:

1. **All medications to be administered by students in the clinical area must be observed by the clinical faculty from preparation through administration.**
2. The students and faculty must follow all the principles of medication administration pertaining to correct patient, route, dose, time and drug.
3. The medication administration policy for high alert medications and intravenous (IV) medications in the agency where the student is assigned should be reviewed prior to the student administering any medications.
4. Intravenous (IV) medications include: all primary and secondary IV infusions and IV bolus medications.
 - a. **Students are not permitted to administer IV push medications at any time.**
5. A student administering any High Alert Medication must follow each agency's policy. High Alert Medications include, but are not limited to, any form of insulin via any route, anticoagulants, narcotics or vasoactive medications.
6. Following administration, all proper documentation shall be performed as required by the nursing agency.
7. Students who do not meet safety standards will receive a "Skills Laboratory Prescription" that requires study and lab practice in the area of medication administration (see form).

COACHING

PURPOSE: Provide guidance and direction in applying classroom theory to the practice setting.

POLICY:

In order to promote successful outcomes in both the academic and clinical areas, a coaching process has been implemented, with guidelines for both students and faculty to follow. A positive learning environment is necessary in order to be able to comprehend difficult topics. Beginning with N100, all students will participate in the coaching process as part of the clinical day.

Guidelines:

1. Coaching sessions will be conducted at the clinical site for at least one-and a half hours each week, as a part of post conference.
2. Students will be notified in advance of the topics that are being covered that day.
3. Students are to bring lecture handouts to each session. They are encouraged to take notes as a means of reinforcing salient points.
4. Students are to bring reference materials to all sessions.
5. Faculty will identify and address common areas that students may be having difficulty understanding (i.e., acid-base balance).

Examples of coaching topics may include, but are not limited to:

1. Concept maps
2. Classification, physiologic action, and side effects of medications
3. Review of NCLEX type questions, having the student read questions on a rotating basis, the choices for the answers, and discussing the rationales for the correct and incorrect answers.
4. Reinforcing guidelines for developing a Nursing plan of care, and assistance with development of the plan.
5. Reinforcing guidelines for development of a formal teaching plan, and assistance with development of the plan.
6. Review of concepts which may be difficult to comprehend, such as review and interpretation of laboratory data
7. Relating the disease process, clinical manifestations, and collaborative care of specific patients in the clinical area to the topic being discussed.

SKILLS LABORATORY POLICY

PURPOSE: To enhance and reinforce student knowledge in order to provide a transition into the clinical area.

POLICY:

The Clinical Skills Laboratory is designed to provide a supportive and caring environment in which students can demonstrate and practice nursing skills. The Skills Lab offers opportunities for teaching and learning in the cognitive, psychomotor, and affective domains. It is intended to be an extension of classroom learning, where the student will learn psychomotor, critical thinking and physical assessment skills necessary for clinical nursing.

The Skills Lab helps to strengthen decision making, delegation and teamwork. Students are expected to be **active participants** during Clinical Skills Lab.

The Skills Lab simulates a hospital setting where students can put into practice principles and techniques essential for safe, competent nursing care. The student is expected to come fully prepared to participate in each Skills Lab experience. Being prepared means the student have completed all assignments prior to your Skills Lab Day. If the student is unprepared, a Skills Lab warning will be issued.

Learning is a life –long process. In the Skills Lab, students engage in active learning experiences that enable them to be self –directed learners. A solid grounding in the underlying scientific principles of technical skills helps students transfer learning from the Lab to a variety of clinical settings.

After the Skills Lab experience you should have a basic understanding of the principles associated with each nursing skill. The student is expected to demonstrate a high level of commitment to learning and to demonstrate each skill with competence. **Clinical Skills Lab requires preparation and dedication.**

Remember, the faculty do not expect perfection – that can only be accomplished by repetitive practice of an individual technique. The student will, however, be expected to perform to a satisfactory level, the required skills on a checklist provided by the instructor.

GUIDELINES WHEN USING THE CLINICAL SKILLS LABORATORY

These guidelines are intended to assist the student to be successful in the acquisition of skills obtained during Clinical Skills Lab and Simulation experiences. Appropriate courteous behavior is always expected from the student. This includes maintaining a sound level conducive to verbal communication and learning and exhibiting respectful behavior towards peers and faculty.

On assigned Skills Lab Day:

1. All assignments are to be completed prior to the Skills Lab.
2. Preparation is expected and is necessary for the student to be successful in the acquisition of skills.
 - A. Come prepared with: Clinical Skills Lab Preparation Worksheets
 - i. 'Nurse Pack'
 - ii. Textbook/ eBook
 - iii. Notebook
 - iv. Black ink pen
3. Mark all of your materials and equipment with your name
4. All electronic devices must be on silent mode. They may be checked and answered on scheduled breaks.
5. No food or drinks are to be consumed in the Skills Lab.
6. Clinical uniform is the appropriate attire.
 - A. When clinical uniforms are not required, clothing should be worn which allows for comfort during physical activity. Clothing should demonstrate consideration for the modesty of all students (refer to Student Handbook, Dress Code Classroom and Clinical).
7. Students are required to perform hand hygiene when entering the Skills Lab as well as other designated or appropriate intervals throughout the Lab session. Alcohol based hand sanitizers are available to students.
8. Personal safety of the student and faculty is essential. Students are to familiarize themselves with the operation and function of the beds and over-bed tables.
 - A. Do not lean on the bedrails or on the over-bed tables.
 - B. Do not sit on the backs of chairs, bedrails, over-bed tables or side tables.
 - C. Injury can occur at any time if students are not aware of equipment capabilities.
 - D. Report any broken or unsafe equipment to School of Nursing Faculty.

9. Prior to leaving the Skills Lab, students are to:
 - A. Put the bed in the lowest position and unplug the bed
 - B. Place the over-bed table over the end of the bed
 - C. Straighten the linens
 - D. Clean your workspace – Lab surfaces are to be disinfected by the student at the end of each scheduled Lab session
 - E. All non-disposable equipment used during the Lab session will be disinfected by the student
 - F. Lights are to be turned off

10. The Clinical Skills Lab is a simulated patient care area. Act accordingly!
 - A. This is not the time to be studying for class quizzes or exams. This is the time for clarification when necessary

11. Lab time will be made up at a time arranged with the Skills Lab Faculty.

12. Clinical Skills Laboratory will follow the Policy for Clinical Lateness /Absence Policy (see Policy).

Additional practice time:

1. Skills Lab practice is available at scheduled times during specific semesters (Open lab), as well as at times designated by the Skills Lab Faculty. Students must make an appointment if they desire to use the lab. An instructor will be available, if needed, as a resource person.
2. Students are required to sign in when using the Skills Lab under these circumstances.
3. The Skills Lab may also be used should a student require remediation with a specific skill during the term. The student will be referred by the Clinical Instructor and must report to the lab at the assigned time.
4. Rules 3, 5, 7 & 9 above will apply. It is not necessary to wear a uniform during additional practice times.

CLINICAL PERFORMANCE EVALUATION POLICY

PURPOSE: Provides guidance and direction for student learning.

POLICY:

1. The Clinical Performance Evaluation is a teaching tool used in the assessment of student's clinical achievement.
2. The evaluation tool serves as a guide for the student to recognize their strengths and areas that need improvement.
3. The evaluation tool describes learning outcomes and behaviors that the faculty considers important in the development of a professional nurse.
4. The evaluation process is ongoing. Clinical performance is assessed on a weekly basis. A formal written evaluation of each student's clinical performance will occur where applicable and at the end of each clinical experience. Refer to course syllabus for evaluation process.
5. If a student is having difficulty meeting the clinical course learning outcomes, assistance will be offered by the instructor.
 - a. A Skills Laboratory Prescription Form (see Appendix) may be generated by clinical faculty.
6. A pattern of unsatisfactory performance in any behavior that has not been resolved by the end of the semester results in course failure (see policies on Clinical Warning & Clinical Probation).
7. Clinical performance is graded using a numeric scale. A grade of 2 is considered passing. Failure to meet clinical learning outcomes will result in a course failure.

UNSAFE CLINICAL PRACTICE POLICY

PURPOSE: To provide guidance for student nurses in carrying out nursing responsibilities consistent with the ANA Code for Nurses and the Pennsylvania Professional Nurse Law.

POLICY:

Unsafe Clinical Performance may include, but is not limited to:

1. Failure to assess and evaluate a patient's physical and/or emotional status.
2. Failure to provide care, which may be required to stabilize a patient's condition, or prevent complications.
3. Failure to promptly provide clear, accurate and complete verbal and/or written information to the appropriate person(s) regarding a patient's condition, treatment or nursing care.
4. Failure to administer medications and/or treatments in a responsible and safe manner.
5. Failure to comply with institutional policies and procedures in implementing nursing care.
6. Inability to apply previously learned material.
7. Any violation of The Joint Commission (TJC) Patient Safety Goals.
8. Practicing beyond educational level, experience or responsibilities in the student nurse role.
9. Failure to prepare for clinical assignments according to course requirements.
10. Failure to comply with the American Nurses Association Code of Ethics for Nurses and Pennsylvania Professional Nurse Law is considered a breach of professional conduct and will result in remedial &/or, disciplinary action.

PROCEDURE

1. A student who, in the assessment of the instructor, exhibits unsafe clinical performance will be taken off the clinical assignment for remediation. The student will be permitted to gather any necessary data before being sent off the clinical unit.
2. The student will be advised as to appropriate remediation needed depending on the situation.
3. The student will be placed on probation or be dismissed from the program and the appropriate form(s) will be placed in the student's file.
 - a. If the event does not result in dismissal, the student will make up the day and pay the makeup day fee.
4. If the student has an unsafe clinical behavior, the student will be presented to the Evaluation & Promotion Committee for discussion of the event. The Evaluation & Promotion Committee will make a recommendation to the Faculty Organization for decision if probation or dismissal is warranted.
5. The clinical evaluation form will reflect the event.

6. If the student is sent off the clinical area a second time for an unsafe clinical performance, the student, Clinical Instructor and Academic Coordinator will meet to review the incident. This will result in the student receiving a failing grade in the course.

THE ANA CODE OF ETHICS

1. The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
2. The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
3. The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
4. The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.
5. The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
6. The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
7. The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
8. The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
9. The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

Reference

American Nurses Association. (2021). Code of ethics with interpretative statements. Silver Spring, MD: Author. Retrieved from <http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses/Code-ofEthics-For-Nurses.html>

2023

Hospital National Patient Safety Goals

The purpose of the National Patient Safety Goals is to improve patient safety. The goals focus on problems in health care safety and how to solve them.

Identify patients correctly

NPSG.01.01.01

Use at least two ways to identify patients. For example, use the patient's name *and* date of birth. This is done to make sure that each patient gets the correct medicine and treatment.

Improve staff communication

NPSG.02.03.01

Get important test results to the right staff person on time.

Use medicines safely

NPSG.03.04.01

Before a procedure, label medicines that are not labeled. For example, medicines in syringes, cups and basins. Do this in the area where medicines and supplies are set up.

NPSG.03.05.01

Take extra care with patients who take medicines to thin their blood.

NPSG.03.06.01

Record and pass along correct information about a patient's medicines. Find out what medicines the patient is taking. Compare those medicines to new medicines given to the patient. Give the patient written information about the medicines they need to take. Tell the patient it is important to bring their up-to-date list of medicines every time they visit a doctor.

Use alarms safely

NPSG.06.01.01

Make improvements to ensure that alarms on medical equipment are heard and responded to on time.

Prevent infection

NPSG.07.01.01

Use the hand cleaning guidelines from the Centers for Disease Control and Prevention or the World Health Organization. Set goals for improving hand cleaning. Use the goals to improve hand cleaning.

Identify patient safety risks

NPSG.15.01.01

Reduce the risk for suicide.

Prevent mistakes in surgery

UP.01.01.01

Make sure that the correct surgery is done on the correct patient and at the correct place on the patient's body.

UP.01.02.01

Mark the correct place on the patient's body where the surgery is to be done.

UP.01.03.01

Pause before the surgery to make sure that a mistake is not being made.

CLINICAL WARNING POLICY

PURPOSE: Provide guidance and direction for student learning.

POLICY:

1. If a student's performance in the clinical area is less than satisfactory, the student will be placed on clinical warning.
2. The Clinical Instructor will notify the Academic Coordinator of less than satisfactory performance.
3. The student will receive written documentation on the clinical warning form.
4. The documentation will describe the specific behavior(s) the student was not demonstrating and its (their) relationship to the course outcomes.
5. A plan of action for the student will be developed by the student and Clinical Instructor to achieve the course learning outcome(s). The student and Clinical Instructor are required to sign the plan of action.
6. The plan of action will state:
 - A. The time limit of the clinical warning.
 - B. The faculty member who will be responsible for evaluating the student.
 - C. "Skills Laboratory Prescription" form will also be used as appropriate.
7. A copy of the signed form is to be given to the student.
8. A copy of the signed form is to be forwarded to the Dean of Education for placement in the student's file.
9. Failure to successfully meet the plan of action within the specified time limit will result in clinical probation.

CLINICAL PROBATION POLICY

PURPOSE: Provides guidance and direction for student learning.

POLICY:

1. A student who is deficient in meeting course learning outcomes during the clinical experience will be placed on clinical probation.

2. The Clinical Instructor will notify the Academic Coordinator of less than satisfactory performance.

3. The student will receive written documentation on the clinical evaluation tool and clinical probation forms.

discuss The Clinical Instructor and another course faculty member will meet with the student initially to discuss the reason(s) for clinical probation.

4. A conference between the Clinical Instructor and the student will be held to develop a plan for the student to meet the clinical learning outcomes. "Skills Laboratory Prescription" will be considered if appropriate (See form).

5. An executed copy of the clinical probation form with the remedial plan, signed by both the student and Clinical Instructor will be given to the student. The original copy will be retained by the instructor and forwarded to the Dean of Education for filing in the student's educational file.

6. In general, Probationary status, if uncorrected by the end of the semester, will result in course failure.

7. There have been special circumstances, determined by faculty, in which probationary status is continued until the student's graduation from the program.

HIPAA TRAINING & CONFIDENTIALITY POLICY

PURPOSE: To provide guidance and direction for students regarding professional responsibility and to establish the parameters of confidential computer and non-computer information.

Definition: Confidentiality is keeping all entrusted private information/matters gained through a professional relationship to oneself unless the patient specifically gives permission for disclosure or, in certain circumstances, as required by law.

POLICY:

1. To prevent the misuse of patient information, congress has passed legislation that requires health care providers to take specific actions that will help protect patient privacy and confidentiality. This is called the Health Insurance Portability and Accountability Act (HIPAA) of 1996.
2. Students may not reveal confidential information except as required in their education and to other health care providers directly involved with the patient care on a “need to know basis”.
3. Students may not discuss or reveal confidential information in public places such as elevators, hallways, cafeterias, classrooms, or computer screens.
4. Students may not give confidential patient, financial or personal information to anyone outside the school or hospital.
5. Students may not access a patient's records unless they are directly involved in the nursing care of that patient, or if their instructor gives permission to do so strictly for their educational purposes.
6. In the event that a member of a student's family, friend, etc. has been hospitalized, the student does not have the right to review the medical record or data in the computer system. Doing this is a breach of professional confidentiality. This applies to all agencies.
7. Students must not share any of their security codes, passwords, or access numbers.
8. The instructor will advise students of the affiliations IT/EMR policies. Students may not use another student's or individual's security code, password, or access number.
9. All inquiries from the news media are to be referred to your instructor who will refer them to hospital administration.
10. Only authorized individuals may discuss hospital or patient business with the news media.
11. Reminder:
 - Respect a patient's right to have his or her health information protected.
 - Remember that HIPAA makes it illegal to improperly release protected health information.
 - Be aware that there are civil and criminal penalties for improper release of Personal Health Information (PHI).

Disciplinary Sanctions for Unprofessional Behavior:

Confidentiality of patient information is a fundamental individual right upheld by the Roxborough Memorial Hospital School of Nursing. Breaching of confidentiality provides substantive grounds for immediate failure in a nursing course. Student nurses are expected to protect patient's confidentiality and to follow all associated contracted clinical agency guidelines. All students will be required to sign a Confidentiality Statement (see form).

HIPAA TRAINING FOR STUDENT NURSES' & FACULTY

Overview: What is HIPAA?

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is a multifaceted piece of legislation covering the following three areas:

- Insurance portability
- Fraud enforcement (accountability)
- Administrative simplification (reduction in health care costs)

The first two components of HIPAA, portability and accountability, have been put into effect.

Portability ensures that individuals moving from one health plan to another will have continuity of coverage and will not be denied coverage under pre-existing condition clauses.

Accountability significantly increases the federal government's fraud enforcement authority in many different areas. The third component, **administrative simplification**, is arguably the most significant part of the legislation.

Two rules covered under administrative simplification, **privacy** and **security** require administrative, technical and policy changes meant to protect patients' privacy and the confidentiality of protected health information (PHI).

HIPAA's privacy and security regulations punish individuals or organizations that fail to keep patient information confidential. Until these regulations were enacted, there was no federal framework to protect patient information from being exploited for personal gain. Now, the Office for Civil Rights in the Department of Health and Human Services has been charged with enforcing the HIPAA privacy rule. HIPAA states that "**covered entities**" must comply with its regulations. Covered entities for HIPAA's privacy and security regulations are most healthcare providers, clearinghouses and health plans.

Inadvertent violations vs. intended violations

Breaking HIPAA's privacy or security rules can mean either civil or criminal sanctions. Civil penalties are usually fines. These are the result of "inadvertent violation," not necessarily resulting in personal gain. These penalties can result in fines of up to \$100 for each violation of a requirement per individual. For instance, if the hospital disclosed 100 patient records, it could be fined \$100 for each record, for a total of \$10,000.

Have you ever accessed a co-worker's medical record to learn his or her date of birth? Or looked up a neighbor's medical history out of curiosity? Under HIPAA, this could earn your organization a civil sanction and a fine. In some specific cases, even "inadvertent violations" can result in criminal sanctions.

Criminal penalties for "wrongful disclosure" can include not only large fines but also jail time. The criminal penalties increase as the seriousness of the offense increases. In other words, selling patient information is

more serious than accidentally letting it be disclosed, so it brings stiffer penalties. These penalties can be as high as fines of \$250,000 or prison sentences of up to 10 years. For example:

- Knowingly releasing patient information can result in a one-year jail sentence and \$50,000 fine.
- Gaining access to health information under false pretenses can result in a five-year jail sentence and a \$100,000 fine.
- Releasing patient information with harmful intent or selling the information can lead to a 10-year jail sentence and a \$250,000 fine.

For instance, criminal penalties for “egregious violations” could result from the sale of a celebrity’s medical record information to a tabloid newspaper or the sale of health information to marketing or pharmaceutical companies for personal profit.

Roxborough Memorial Hospital and its School of Nursing are committed to protecting patient privacy and confidentiality. When you fail to protect patient information and patient records by not following the Roxborough Memorial Hospital School of Nursing’s Confidentiality Policy, it can have an impact on your ability to continue working in the clinical area and can even affect your license to practice.

Why are privacy and confidentiality important?

Patients' expectations of privacy and confidentiality are central to any provider organization that has access to patient-identifiable information, be it a hospital, physician practice, lab, nursing home, pharmacy, payer or other provider service or organization. Under HIPAA, the hope is that educated patients will be able to trust their providers and the organizations in which they work. To build trust, HIPAA calls on covered entities to learn the rules for privacy and confidentiality and to live by them.

Privacy and confidentiality refer to an individual's right to control access and disclosure of his/her protected individually identifiable health information (PHI). Under HIPAA, this means that information provided by the patient to health care providers and notes and observations about the patient's health will not be used for purposes other than treatment, payment, or health care operations.

These principles allow patients to feel comfortable sharing information with their providers. Privacy and confidentiality are essential to good patient care.

Hospitals and health care organizations have always upheld strict privacy and confidentiality policies. And unless you're new to health care, this idea is familiar to you.

But there are changes. The U.S. government has begun to strengthen the laws protecting privacy and confidentiality in response to cases of private medical information getting into the wrong hands.

In North Carolina, an employer fired a good employee shortly after the company learned that the employee had tested positive for a genetic illness that could lead to lost work time and to increased insurance costs. In New York, a congresswoman who had battled depression had her medical history given to newspaper reporters.

Not surprisingly, cases of misused health information have also caused lawsuits. A California woman sued a pharmacy that disclosed her medical information to her husband, who used it to damage her reputation in a divorce. And in another divorce case, a woman threatened to use information about her husband’s health status that she obtained from his health records in custody hearings, forcing him to settle to avoid public discussion of his health.

As cases of misused health information increase, Congress has taken action to make hospitals and health care providers do more to protect health information privacy and confidentiality.

And with enactment of the **Health Insurance Portability and Accountability Act of 1996**, or **HIPAA** as it's known, the idea that patients have the right to privacy and to confidentiality became more than just an ethical obligation of physicians and health care organizations. It became the law.

The privacy regulation and protected health information (PHI)

Regulations implementing the privacy component of HIPAA cover protected individually identifiable health information (PHI) that is transmitted or that is maintained in any medium by covered entities. They were published in the *Federal Register* on December 28, 2000.

Individually identifiable information is any information, including demographic information, that identifies an individual and that meets any or all of the following criteria:

- Is created or is received by a health care provider, health plan, employer, or health care clearinghouse
- Relates to the past, present, or future physical or mental health or condition of an individual
- Describes the past, present, or future payment for the provision of health care to an individual

It's important to realize that HIPAA's privacy regulation is not limited to health information that is maintained or transmitted electronically, but also information conveyed on paper or via the spoken word.

The Privacy rule also covers **all** "covered entities," which include health care providers, health plans, employers, or clearinghouses, **not just those entities that transmit information electronically.**

What makes information identifiable?

Any information that might identify someone is called individually identifiable information, under HIPAA. Elements that make information individually identifiable include:

- Names
- Addresses
- Employers
- Relatives' names
- Dates of birth
- Telephone and fax numbers
- E-mail addresses
- Social Security numbers
- Medical record numbers
- Member or account numbers
- Certificate numbers
- Voiceprints
- Fingerprints
- Photos
- Codes
- Any other characteristics, such as occupation, that may identify the individual

It's not always what you think it is

Essentially, individually identifiable information is anything that can be used to identify a patient. Releasing any of this information for other than permissible purposes is a violation of the HIPAA privacy regulation.

Remember to take care in disclosing any details that could allow a third party to guess at the identity of the patient, even when his/her name is not provided. An example of this type of information might be a patient's condition or date of surgery.

Case #1: The problem

Consider the example of a male patient in the waiting room. He's the only male in the room. His physician is discussing his condition—testicular cancer—with a nurse and everyone in the waiting room can hear the conversation

Question: What could have been done differently to protect this patient's privacy?

Case scenario #1: The answer

This patient's case should only have been discussed in a private room or in a manner where details could not be overheard. Even when the patient's name is not specifically used in conversation, remember that details about his or her case or condition can be identifying factors in certain circumstances.

Case #2: The problem

Mr. Olsen, a patient in the facility, has had an adverse reaction to his medications. The nurse tries several times to reach the patient's physician for instructions, with no success. Finally, she reaches the club where the physician is attending a social event. She asks the receptionist to tell the physician that Mr. Olsen has had an adverse reaction to his medications, and she urgently needs the physician to call.

Question: What should the nurse have done differently?

Case scenario #2: The answer

Leaving a message with someone other than the physician that provides any identifying details about the patient or his condition is a breach of confidentiality. If the person receiving the message knows Mr. Olsen, then information about his presence at the facility and his condition could lead to speculation about the patient. Whether in person, on the phone or via voicemail, never leave a message with a third party that contains specific information about a patient that can identify him or her. The nurse should have simply requested an immediate call back from the physician about an urgent patient matter.

Health Care Operations

"Health care operations" are defined as activities considered to be in support of treatment and of payment and for which protected health information could be used or could be disclosed without individual authorization. Some examples provided by HIPAA include:

- Conducting quality assessment and improvement activities
- Reviewing and evaluating the competence, qualifications and licensing of health care professionals and plans
- Training future health care professionals

- Insurance activities relating to the renewal of a contract for insurance
- Conducting or arranging for medical review and auditing services
- Fundraising conducted by a provider or its fundraising arm for its own benefit, providing the patient is given an opportunity to opt out
- General administrative and business functions
- Population-based activities related to improving health or to reducing health care costs, protocol development, case management and care coordination
- Business planning and development, related to managing and operating the organization
- Resolution of internal grievances, including to an employee and/or employee representative; for example, when the employee needs protected health information to demonstrate that the employer's allegations of improper conduct are untrue

Among those activities **not** considered health care operations are:

- Marketing of health and non-health items and services
- Disclosure of protected health information for sale, rent or barter
- Disclosure to an employer for employment determinations
- Certain types of fundraising activities that require authorization, such as those not for the benefit of the provider or the provider organization

Authorization

Written authorization is required for the use and the disclosure of health information for business-related purposes, like releasing information to financial institutions that offer loans or selling mailing lists to marketing companies.

Patients have the right to revoke their authorization at any time. And they may ask providers to restrict how their medical information is used to carry out treatment, payment, and health care operations.

Providers cannot deny treatment to patients who refuse to sign authorization forms.

Those other than the patient requesting use of health information that is not covered as a part of treatment, payment, or healthcare operations (TPO) must submit an authorization form to providers. The form must include the following:

- * The name of the patient, his/her signature, and the person to whom the requested information will be disclosed
- * A description of the information needed
- * An expiration date capping the length of time the information can be used
- * A warning so that the patient understands that re-disclosed information may not necessarily continue to be protected

Psychotherapy notes

Not all protected health information is treated the same under the privacy rule. Psychotherapy notes have much stronger protections. The rationale is that personal notes of the treating psychotherapist can be damaging if they fall into the wrong hands. Under HIPAA, the general category of treatment, payment and health care operations isn't adequate for psychotherapy notes. Instead, the law requires individual authorization for these notes. The final privacy rule defines psychotherapy notes in this way:

"Notes recorded (in any medium) by a health care provider who is a mental health professional documenting or analyzing the contents of conversation during a private counseling session or a

group, joint, or family counseling session and that are separated from the rest of the individual's medical record.

Psychotherapy notes exclude medication prescription and monitoring, counseling session start and stop times, the modalities and frequencies of treatment furnished, results of clinical tests, and any summary of the following items: Diagnosis, functional status, the treatment plan, symptoms, prognosis, and progress to date."

Case #3: The problem

Susan is a nurse in the ER of a city hospital, and she has just heard through the grapevine that a fellow nurse is pregnant. The other staff members would like to give this nurse a baby shower, but nobody knows when the baby is due or if it is a boy or a girl. Susan has access to the records and could easily find the answers to both questions.

Question: Should Susan try to get information about the pregnancy and share it with the staff?

Case scenario #3: The answer

Absolutely not. This is clearly an unauthorized use of medical information. Remember that any time patient information is used for purposes other than treatment, payment or operations, it must be authorized.

Helping patients understand their rights

It's important that patients understand how they can protect their own health information and how their providers protect their information. Because of this, the HIPAA rule also requires health care providers to post notices telling patients how their information will usually be used.

HIPAA requires providers to make "good faith efforts" in obtaining patients' written acknowledgement that they have received a copy of the notice.

The minimum necessary standard

Providers must make a reasonable effort to disclose or to use only the minimum necessary amount of protected health information in order to do their jobs.

However, they can disclose information requested by other health care providers if the information is vital for treatment. To determine what is necessary to be disclosed and what should be withheld, consider the following questions:

How *much* information are you planning to use or to disclose? By using the information, will the number of people who are likely to have access to that information increase? How important is it that I use/disclose this information? What's the likelihood that further uses or disclosures could occur? Where is the information being disclosed (location) and in what form (e-mail, conversation)? Making minimum necessary determinations is a balancing act. Providers must weigh the need to protect patients' privacy against their reasonable ability to limit the information that is disclosed and to deliver quality care.

What if you see information, you do not need?

There still will be occasions when you will have access to confidential information that you don't need for your work. For example, if a patient is placed in an isolation room, you may become aware of why

he or she is there, or you may suspect you know why. This is confidential information about a patient; do not communicate it to anyone else.

You may also see patient information on whiteboards throughout the facility. These are usually posted where the public cannot see them. In the course of providing patient care, you may work in areas where they are visible. You must keep this information confidential. Do not use it in anyway, and do not disclose it to anyone, including coworkers, other patients, patient visitors or anyone else who may ask.

In the course of doing your job, you may also find that patients speak to you about their condition. While there's nothing wrong with this, you must remember that they trust you to keep what they tell you confidential. Do not pass it on.

Ways to protect patient privacy

Here are some common ways that nurses and other clinical staff members can protect patient privacy:

- Close patient room doors when discussing treatments and administering procedures.
- Close curtains and speak softly in semi-private rooms when discussing treatments and when administering procedures.
- Keep your voice down when discussing a patient's care—especially when someone else is in the room.
- Avoid discussions about patients in elevators and cafeteria lines.
- Do not leave messages on answering machines regarding patient conditions or test results.
- Avoid paging patients using identifiable information, such as their conditions, names of physician or unit that could reveal their health issues.

Maintaining records

When patient information is in your possession, you are responsible for keeping it safeguarded. Do not leave it unattended in an area where others can see it.

This is especially important in public buildings, provider locations and areas with heavy pedestrian traffic.

When you are done using paper patient information, return it to its appropriate location, i.e., the medical records department or to a file at a nursing station. When you are done accessing electronic patient information, log off the system. Do not leave the information visible on an unattended computer monitor.

When discarding paper patient information, make sure the information is shredded and preferably locked in a secure bin. Leaving paper patient information intact in a wastebasket can lead to a privacy breach. What if the wastebasket is knocked over and the information is not placed back with the rest of the contents? What if the paper information falls off a recycle truck and blows down the street?

Patient directories

Hospitals can list certain information about each patient in their patient directories. However, they must give patients the opportunity to opt out of inclusion in the directory or to restrict the amount of information available in the directory. If a patient agrees to be listed in the directory, the following information can be given to visitors or to callers who ask for the patient by name:

- * Location in the facility
- * General condition (such as stable, good, fair, etc.)

If a patient opts out of the directory entirely, staff should not provide any information to callers or to visitors, including whether the patient is at the facility in the first place.

HIPAA does not require facilities to keep directories. But if the facilities have directories, you should follow HIPAA's rules and should respect the organization's policies on their use.

The security regulation

HIPAA's Security and Electronic Signatures Standard proposed rule (published in the August 12, 1998, *Federal Register*) sets forth regulations to protect health information that is stored or that is transmitted electronically.

The security regulations call for certain technologies to protect electronic individually identifiable health information. The regulations require organizations to:

- Send and to store information over public networks only in "encrypted form" —that is, in a kind of code within the organization's computer network that keeps the data confidential and secure
- Have procedures to identify the senders and the recipients of data and to ensure they are known to each other and are authorized to receive and to decrypt the information and to use passwords to protect information from unauthorized users

Ways to protect electronic data

If you have access to electronic medical records, here are some ways to protect patient privacy:

- Use screen savers to block patient information that is displayed on unattended computer monitors. (Better yet, log off the system before you walk away.)
- Point computer monitors in such a way that people walking by, or visitors cannot view the on-screen information.
- Always log off when leaving a workstation.
- If you need to discard data or information that is kept electronically, always check with your supervisor about the proper procedure. Confidential information stored on diskettes or CDs should never simply be thrown away in waste bins. Deleting information, a single time from your PC's hard drive may not take care of the removal of all copies of the file.

Passwords

- Do not post passwords on monitors or walls, and do not leave them in easily discovered places.
- Never share passwords with anyone.
- Avoid guessable names for your passwords, such as your last name or the name of your child.
- Change your password regularly.
- Do not leave your workstation logged on under your password when you are not there.

Case #4: The problem

It has been the practice to leave the records system open and logged on at the nurses' station computer at the end of a shift. This saves time during shift changes for staff that need to retrieve records.

Question: Is this an allowable practice under HIPAA?

Case #4: The answer

Although it may seem to be a timesaver, this practice is the same as sharing a password. Remember that when others are allowed to access the system under your password, there can be no way to audit who sees records and when they see them. You should never stay logged into the system beyond the end of your shift. Generally, you shouldn't leave the system open when you leave the station for any reason.

Case #5: The problem

An individual tells you that he is here to work on the computers. He wants your password to log on to the electronic medical record system.

Question: What do you do?

Case #5: The answer

Before providing this person access, make sure he has passed through the appropriate clearance. A proper response may be to ask him who is his contact person at the hospital. Call the contact person to see if the individual has signed a confidentiality agreement. . If you are unsure of the individual's identity and of his reason for requesting access, contact your supervisor.

Faxes

HIPAA does not specifically address faxing patient information, but as with any form of health information, it is protected under the privacy rule. Nurses need to understand that faxed patient information can easily fall into the wrong hands, which would be a violation of privacy.

If you do fax patient information, make sure you are faxing it to a dedicated fax machine in a secure location and make certain that the person to whom the information is being faxed actually receives the fax. If you know you will receive a fax that contains patient information, tell the person faxing the information to warn you ahead of time so that you can be present to receive it.

Do not let faxed patient information lay around a fax machine unattended. Immediately dispose of or file faxed information before others can see it.

Case #6: The problem

You are just coming off a double shift at the hospital, and a physician has asked you to fax his patient's lab test results to his office fax. The results are ready, but it's after hours in his office, and none of his office staff is available to receive the fax.

Question: What do you do?

Case scenario #6: The answer

Don't send the fax to an unattended machine unless you have been assured that it is in a locked room or has a locked cover. You have no way to ensure that someone will not see the fax besides the physician or his staff. Talk with the incoming shift about handling the fax during office hours and leave a message with the physician's office asking them to call for a fax of the results that were requested. Make sure not to leave the patient's name or other identifying information on the message.

Using E-mail

HIPAA does not ban the use of e-mail for sending patient information, but the proposed security regulation does require organizations to put security mechanisms in place, including the use of password protection, encryption when sending patient information over a public network and technology that authenticates both the sender and the receiver.

Remember that in your role at work, e-mail is not meant for personal use. Sharing or opening attached files from an unknown source can open the door to viruses and to hackers. It's also important to remember that you can never be sure who will have access to your e-mail on the receiving end. So never send confidential information about a patient in an e-mail unless it is coded.

When you send e-mails, always double check the address line just before sending the message. Be sure that your e-mail doesn't go to the wrong person or to the wrong list by mistake!

As with faxes, do not let printed e-mails lay around. Immediately dispose of printed e-mails after use or file them in the medical record, as appropriate.

Exceptions to the rule

The rule is that in no case should you be releasing confidential patient information outside the facility or be discussing it with anyone if it is not needed for treatment, billing or operations. That's important to remember.

But there are exceptional cases where providers are required to release patient information, and the law allows that.

The following list highlights the conditions in which the hospital may release information.

- There are laws that require hospitals to report certain communicable diseases to state health agencies. The hospital must report when patients have these diseases, even if the patient doesn't want the information reported.
- The Food and Drug Administration requires that certain information about medical devices that break or malfunction be reported.
- Some states require physicians or other providers who suspect child abuse or domestic violence to report it to the police.
- Police have the right to request certain information about patients to determine if they should be considered suspects in a criminal investigation.
- Certain courts have the rights in some cases to order providers to release patient information.
- The provider must report cases of suspicious deaths or certain injuries, such as people with gunshot wounds.
- The provider or facility reports information about patients' deaths to coroners and to funeral directors.
- Finally, the patient has a right to access and to request amendments to his or her own record.

Patient access and amendment

HIPAA gives patients the right to inspect and to copy the health information the plan or the provider keeps about them. Patients should be directed to the Medical Records department for processing requests for access to or copies of their medical records.

HIPAA allows patients to request amendments to their medical records. Organizations are not required to automatically make whatever changes a patient request, but they must allow patients to make the requests and must adhere to the following specific process for handling them:

1. Respond to the request by either accepting or denying the amendment within 60 days. In many cases, the first step will be to forward the requests to the doctor or to other clinicians whose documentation the patient is disputing.

2. Inform the patient in writing whether it has accepted or has denied the request.

Patients requesting amendments to their medical records should be directed to the Medical Records department.

When reporting is required

In most cases, patients are informed when their health information is being reported to police or to others outside the facility, but these are cases where they do not have the right to control their information.

In all these cases, the organization complies with the law and makes reports when necessary. Remember, unless reporting this information is part of your job, you should not report this information. Check with your supervisor when you have questions about whether a report is necessary.

SUMMARY

1. General Information:

All students/faculty enrolled in the Nursing Program are subject to the U.S. Department of Health and Human Services "Privacy Rule" contained in the Health Insurance Portability and Accountability Act of 1996 (HIPAA). This act, which became effective April 2003, is designed to guarantee patient rights and protects against the misuse or inappropriate disclosure of their individually identifiable health information. As part of their educational experience, students and faculty in health care professions are allowed access to protected health information as necessary to provide patient care. Students and faculty should access protected health information on the same basis as any other health care provider, which is a "need to know" basis only.

2. Identifiable information, as contained in HIPAA, includes:

- a. Names
- b. All geographic areas smaller than a state
- c. All dates
- d. Telephone numbers, addresses, hospital account numbers and any other identification information
- e. Full face photographic images and any comparable images

3. Students/faculty enrolled in the Roxborough Memorial Hospital School of Nursing are required to take the following steps to protect the privacy of Health Care Recipients (HCR's):
 - a. Close room doors when discussing treatments and administering procedures.
 - b. Close curtains and speak softly in semi-private rooms when discussing treatment and performing procedures.
 - c. Avoid discussions about HCR's in public areas such as cafeteria lines, waiting rooms, and elevators.
 - d. Safeguard medical records by not leaving the record unattended in an area where the public can view or access the record.
 - e. Log off the computer system immediately after reviewing an electronic medical record.
 - f. Prior to leaving the clinical area, destroy any notes made about an HCR during a clinical experience that could identify the HCR.

4. Case Studies/Care Plans
 - a. All information about the HCR must be hand copied from hospital records on the day the student/faculty provides health care.
 - b. Students/faculty must adhere to Roxborough Memorial Hospital School of Nursing clinical agency policies related to access to patient information.

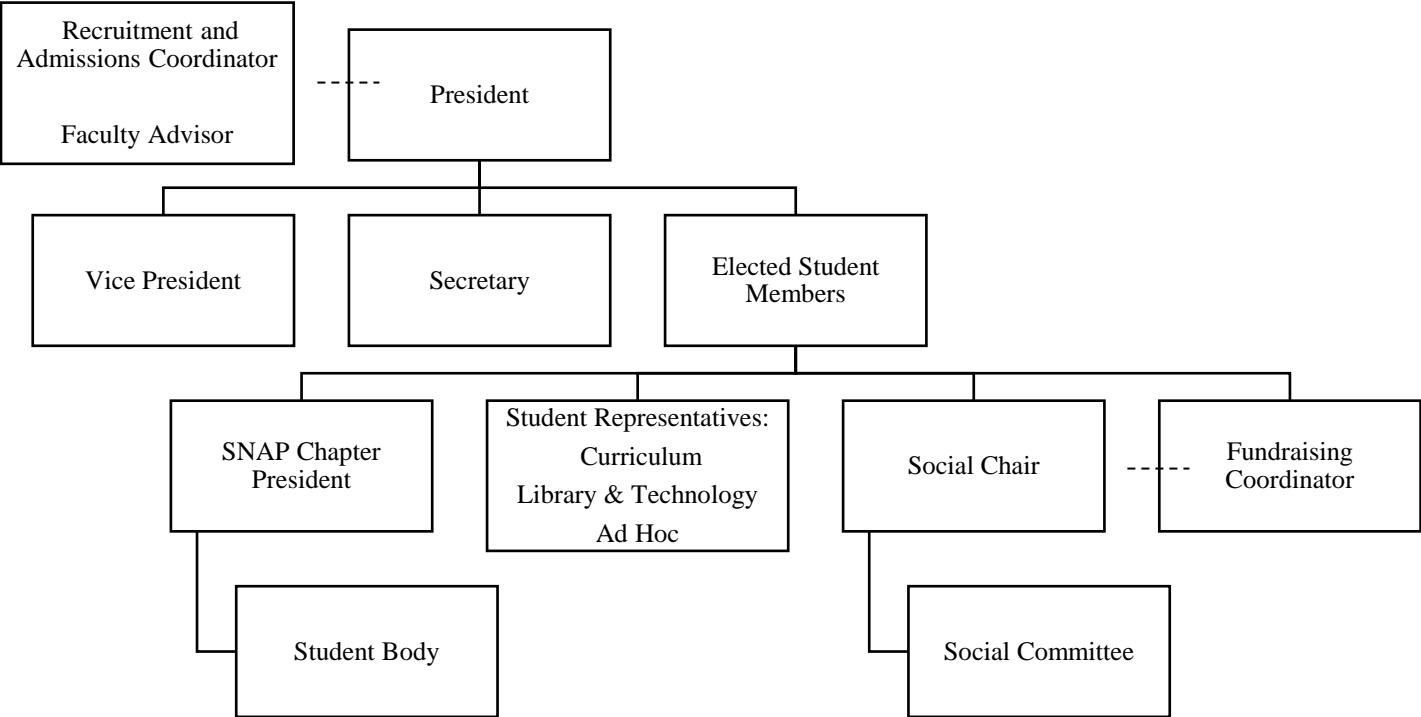
Students/faculty will not use the HCR's name or initials on the Case Studies/Care Plans. Fictitious names/initials may be used.

Adapted from Legacy Health System "HIPAA Training for Student Nurses/Faculty" 6/03

STUDENT ACTIVITY POLICIES

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

**STUDENT GOVERNMENT
ORGANIZATIONAL CHART**



STUDENT GOVERNMENT ORGANIZATION RULES AND REGULATIONS

PURPOSE: The name of the student organization shall be the Student Government (SG) of the Roxborough Memorial Hospital School of Nursing. The purpose of the SG shall be to establish a governmental body consisting of students, which provides a means of communication between the faculty and students while promoting leadership, professionalism, School spirit, social activities, and community involvement. SG shall also stimulate interest, understanding, and participation of the students in higher professional organizations, such as Student Nurses Association of Pennsylvania and National Student Nurses Association.

POLICY:

1. MEMBERSHIP & ATTENDANCE

All nursing students enrolled in the School of Nursing are members and are invited to attend scheduled meetings. Membership shall also include elected student committee members, President, Vice President, and a secretary. In addition, the Recruitment and Admissions Coordinator and the faculty advisor will attend all meetings. The SG Secretary will record attendance in the minutes. During semesters when both classes are not on site at the school on the same day separate SG meetings will be held with the faculty advisor and Recruitment and Admissions Coordinator acting as a liaison.

2. STUDENT GOVERNMENT BOARD:

The Board shall be nominated by the student body and voted into office at the beginning of the third semester (second year students) and mid-first semester (1st year students). They shall serve for one year, provided they are not in academic jeopardy. These members should demonstrate the qualities of leadership and initiative and should be active in gaining the cooperation of the entire student body. The Board for the SG will consist of the President of the 2nd year, Vice President of the 1st and 2nd year, Secretary of the 1st and 2nd year, the faculty advisor and the Recruitment and Admissions Coordinator. Voting shall be by means of secret ballot counted by the Recruitment and Admissions Coordinator and a staff member or the faculty advisor. In case of a vacancy, new board members may be elected to fill it. The duties of the Board members are as follows:

A. The PRESIDENT will:

- i. Preside and maintain order at all meetings and be held ultimately responsible for the SG.
- ii. Acquire a working knowledge of parliamentary law and procedure and a thorough understanding of the bylaws and standing rules of the organization.
- iii. Prepare an agenda for all meetings and discuss the agenda with the Recruitment and Admissions Coordinator and faculty advisor before each meeting.
- iv. Open the session, at the time at which the assembly is to meet, by calling the members to order, and announce the business before the assembly in the order in which it is to be acted upon.
- v. Entertain only one motion at a time and state all motions properly.
- vi. Put all motions to vote and give results.
- vii. Call special meetings as necessary.
- viii. Officially represent the students where such representation is needed.

- ix. Meet with the 1st year students during orientation to explain their participation in SG.
 - x. Hold committee chairs responsible for the work of their respective committees.
 - xi. Cast a deciding vote in case of a tie.
 - xii. Meet with the Recruitment and Admissions Coordinator and faculty advisor as the need arises.
 - xiii. Review SG Rules and Regulations yearly and revise as needed with student input.
 - xiv. Orient newly elected President to duties of this office.
- B. The **VICE PRESIDENT** will:
- i. Assume all the duties of the President and SNAP Chapter President in their absence.
 - ii. Assist the President with the aforementioned as necessary.
 - iii. Assist the SNAP Chapter President, as necessary.
- C. The **SECRETARY** will:
- i. Keep accurate records of all the proceedings and meetings of SG, including attendance. Meeting minutes will be due one week after each meeting.
 - ii. Keep the SG members informed of all meetings at least one week in advance and place memo of upcoming meetings on the student bulletin board.
 - iii. Be responsible for each class sign-in sheet at each meeting in order to determine the quorum.
 - iv. Submit minutes to the Faculty Advisor.
 - v. Be responsible for all correspondence.
 - vi. Orient newly elected secretary to duties of this office.
- D. The **FACULTY ADVISOR** will:
- i. Be a member of the faculty appointed by the Dean of Education.
 - ii. In the event of a vacancy, the Dean of Education shall elect a new advisor as an alternate.
- E. The **Recruitment and Admissions Coordinator** will:
- i. Will serve as advisor to the SG organization.

3. ELECTIONS

Nominations and elections for the SG Board, class representatives, and committee members from each class (1st & 2nd year) will be accepted for the ballot and voted on annually.

- A. All students will be given a ballot for voting.
- B. The candidates receiving the greatest number of votes shall be elected and are expected to maintain the office for a period of one academic year.
- C. The Recruitment and Admissions Coordinator and Faculty Representatives from the 1st and 2nd year class shall be present during the voting process.

4. MEETINGS:

- A. Meetings of the SG shall be held at least twice per semester and as deemed necessary.
- B. The President shall call meetings.
- C. Special meetings may be called at the discretion of Recruitment and Admissions Coordinator, Faculty Advisor, and/or the President of the SG.
- D. A quorum shall consist of a simple majority of the students present.

5. ORDER OF BUSINESS:

The order of business for any meetings shall be:

- A. Call to Order
- B. Approval of Minutes
- C. Faculty and Student Committee Reports
- D. Old Business
- E. New Business
- F. Announcements
- G. Adjournment

6. PARLIAMENTARY AUTHORITY:

In case of procedures not covered by the Rules and Regulations of the SG organization, Roberts Rules of Order shall be regarded as authority in all meetings.

7. METHOD OF AMENDING RULES:

Any student can propose a change to the rules.

- A. Amendments to rules may be proposed through an Ad Hoc committee.
- B. All amendments shall be approved by the SG President and may be subject to the approval of the Recruitment and Admissions Coordinator and Faculty Advisor.

8. COMMITTEES:

A. The RMH/SON Faculty Committees with student representatives are:

- i. Curriculum
- ii. Library and Technology
- iii. Ad Hoc (1st & 2nd year)

B. Social Committee

i. Social Chair

a. The Social Chair shall be a 2nd year student ultimately responsible for planning and coordinating all social activities and traditions of the school as well as community involvement events:

- 1. Welcome picnic. It is held during the first semester of each academic year and is sponsored by Roxborough Memorial Hospital School of Nursing. All current students are invited to attend.
- 2. Holiday lunch or Multicultural luncheon. The SG may wish to plan a potluck meal and refreshments.
- 3. Student Recognition Ceremony. This ceremony recognizes students receiving awards. A breakfast for 2nd year students, sponsored by the School of Nursing, will be planned before this award ceremony.
- 4. Pinning Ceremony. 1st year students assist with the pinning ceremony
- 5. Graduation. 1st year students assist with the graduation ceremony.

b. Presenting an oral report at SG meetings.

c. Orienting the newly elected Social Chair to the duties of this office.

ii. Committee Members

a. Assists with social activities and maintaining traditions of the school

C. Fundraising Coordinator

- i. Plans and coordinates both Student Government and SNAP Chapter fundraising events
- ii. Assists with the budget

9. SPECIAL COMMITTEES

The SG President and the Recruitment and Admissions Coordinator, and the Faculty Advisor may appoint special Committees. Special committees are assigned with a specific task and are discharged as soon as the task is complete. Each special committee will have a chairperson responsible for calling meetings and seeing that the special committee works toward its goal. The chair of a special committee shall also report at scheduled SG meetings.

10. AWARDS

The following are considered SG awards:

A. Team Leadership Award

With each graduating class, the 2nd year students will choose a peer to receive the Team Leadership Award. The nomination and selection process will take place one month prior to graduation.

The recipient:

- a. Creates a positive School atmosphere.
- b. Is active in Student Government activities.
- c. Is a role model for all nursing students.
- d. Inspires all students to succeed.
- e. Exemplifies the core values of Roxborough Memorial Hospital School of Nursing.
- f. Demonstrates leadership quality and skills and acts as a member of the team.

This award will consist of the student's name engraved on a plaque, which is displayed in the School of Nursing. The winner will also be acknowledged at Graduation and recognized with a certificate by the Dean of Education.

B. The Student Spirit Award

With each graduating class, the 1st year students will choose a classmate to receive a Student Spirit Award. This award will recognize a student who has been an inspiration to the class by demonstrating enthusiasm and spirit in class, School, and community. 1st year students will be asked to submit nominations with rationale for selection. The nomination and selection process will take place one month prior to graduation. The Dean of Education announces the winner at the Graduation Breakfast. The winner will also be acknowledged at Graduation and recognized with a certificate presented by the Dean of Education.

STUDENT REPRESENTATION ON SCHOOL COMMITTEES

PURPOSE: Student participation on RMH/SON committees provides the student with the opportunity to participate in the governance of the school. Both day and evening-weekend options shall have representation on school committees.

POLICY:

1. Membership

A. Curriculum Representatives

Call to the attention of the faculty any concerns or recommendations within the curriculum.

Membership: one Year I student and one Year II student for each option

B. Library and Technology Committee

Review, recommend, and evaluate the availability of appropriate library and computer resources to meet the teaching/learning needs of students and faculty.

Membership: one Year I student and one Year II student for each option

C. Student Ad Hoc Committee

To address a specific question presented to the Faculty Organization.

Membership: one Year I student, one Year I student alternate, one Year II student, and one Year II student alternate for each option

2. Student Representative Responsibilities

The general functions of the student representative are to:

- A. Attend scheduled committee meetings or submit a written report if scheduling problems arise.
- B. Entitled to discuss concerns, recommendations, and feedback on success of the program from the student body but do not have voting privileges.
- C. Present a verbal report to the committee and written report for the committee recorder.
- D. Present an oral report at the next SG meeting.

NATIONAL STUDENT NURSES ASSOCIATION POLICY

PURPOSE: To promote professionalism and leadership.

POLICY:

All students are enrolled in the local chapter of the National Student Nurses Association - the only national organization for nursing students and the largest independent student professional organization in the United States.

Some of the functions of the local chapter are to assume responsibility for contributing to nursing education, to provide programs of fundamental and current professional interests and to aid in the development of the whole person and his/her professional role and his/her responsibility for the health care of all people.

The local chapter may send its own officers and delegates to the state and national conventions. To qualify for one of these positions a student must be a member of Student Nurses Association of Pennsylvania (S.N.A.P.) and must be in good academic standing.

In order to be eligible to have an excused absence from School to attend a non-local S.N.A.P. convention, a student must be a member of S.N.A.P., and must have actively supported the local chapter throughout the year. The student must also be in good academic standing.

STUDENT RIGHTS & RESPONSIBILITIES

STUDENT BILL OF RIGHTS AND RESPONSIBILITIES

PURPOSE: To provide direction and guidance.

POLICY:

1. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, sex, sexual orientation, gender identity, age, citizenship, religion, national origin, disability, illness, legal status, personal attributes, or economic status.

Interpretative Statement: NSNA upholds every student's right to be treated equally and to not have their admission to an institution be denied based on race, sex, sexual orientation, gender identity or expression, age, citizenship, religion, nation of origin, disability, illness, legal status, personal attributes, economic status, veteran status, and/or political affiliation/ideation.

2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom and quality education; students should exercise their freedom in a responsible manner.

Interpretative Statement: NSNA recognizes all students' and faculty's rights to academic freedom and students should pursue their desire to receive a quality education based on standards set by the state boards of nursing and nursing education accrediting agencies with respectability and professionalism to uphold the standards that have been put in place. Academic freedom should be approached through evidence-based practice.

3. Each institution has a duty to develop policies and procedures which provide for and safeguard the students' freedom to learn.

Interpretative Statement: It is the responsibility of each institution to ensure that proper guidelines are in place that allow for a safe environment in which a student can learn. Institutional policies and procedures must demonstrate cultural competence with regards to all individuals. Institutions must have policies and procedures in place to prevent acts of lateral and vertical violence, harassment, or bullying in any form that would inhibit a student's ability to learn or function within the institution. It is the institution's responsibility to make these policies and procedures readily available and public for all students, in addition to educating and informing the students that such policies and procedures exist.

4. Students should be encouraged to develop the capacity for critical judgment and engage in an autonomous, sustained, and independent search for truth.

Interpretative Statement: Each student has the right to come to their own conclusion and engage in activities of higher learning to enhance their knowledge based upon independent, evidence-based research.

5. Students should be free to take reasoned exception in an informed, professional manner to the data or views offered in any course of study. However, students are accountable for learning the content of any course of study for which they are enrolled.

Interpretative Statement: It is well within a student's right to agree or disagree with the views offered in a course, although the student is still responsible for learning the contents of the course material in order to become a well-rounded and versed nurse.

6. Students should have protection, through orderly approved standard procedures, against prejudicial or capricious academic evaluation. However, students are responsible for maintaining standards of academic performance established for each course in which they are enrolled.

Interpretative Statement: NSNA recognizes that all students should be protected against academic evaluation that may be biased. NSNA also recognizes that all students are still responsible for adhering to the policies that were outlined prior to the start of the course. The institution's standards should be based on standards set by the state boards of nursing and nursing education accrediting agencies.

7. Information about student views, beliefs, political ideation, legal status, United States citizenship status, sexual orientation or other personal information which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as an element of evaluation.

Interpretative Statement: Information that is obtained by an instructor on a student that might include the student's views, beliefs, political affiliation/ideation, legal status, citizenship status, sex, sexual orientation, gender identity or expression, economic status, veteran status, religion or other personal information should be held in the strictest confidence and only disseminated with the written consent from the student.

8. The student should have the right to advocate for themselves and other students in the construction, delivery and evaluation of the curriculum.

Interpretative Statement: It is within the right of a student to speak for themselves and other students in a course on the overall evaluation of the course and course materials. Proper grievance procedures shall be set in place by each institution to ensure due process is followed. NSNA members should review the standards set by the state boards of nursing and nursing education accrediting agencies with respectability and professionalism to uphold the standards that have been put in place.

9. Institutions should have a clearly written published policy as to the disclosure of private and confidential information which should be a part of a student's permanent academic record in compliance with state and federal laws.

Interpretative Statement: NSNA recognizes that each institution should have proper written guidelines in place that are compliant with state and federal laws regarding any private information that is a part of a student's permanent academic record that may be publicly disclosed with student approval.

10. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions in an informed, professional manner, both publicly and privately.

Interpretative Statement: It is the right of students and student organizations to respectfully express opinions, discuss, and conduct new research on matters of interest to them.

11. Students should be allowed to invite and hear any individual of their own choosing within the institution's guidelines, thereby advocating for and encouraging the advancement of their education.

Interpretative Statement: NSNA upholds each student's rights to advance their education. It is within a student's rights to invite any individual to speak or attend an event as a means of advancing their education as long as the invitation is adherence with the institution's policies and does not invoke hatred or crimes against other groups.

12. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, thereby encouraging leadership, e.g., through a faculty-student council, student membership, or representation on relevant faculty committees.

Interpretative Statement: NSNA encourages a student body's ease of participation and collaboration on institutional policy that may affect academic and student affairs through proper and professional student and faculty deliberation. Proper grievance procedures and faculty-student committees shall be set in place by each institution to ensure due process is followed. The academic institution standards should be based on standards set by the state boards of nursing and nursing education accrediting agencies with respectability and professionalism to uphold the standards that have been put in place.

13. The institution has an obligation to clarify those standards of conduct which it considers essential to its educational mission, community life, and its objectives and philosophy. These may include, but are not limited to, policies on academic dishonesty, plagiarism, punctuality, attendance, and absenteeism.

Interpretative Statement: It is the responsibility of the institution to ensure that all established policies incorporate their educational mission and values and that those policies are easily understood and properly disseminated to the student body. The institution's standards should be based on standards set by their respective state boards of nursing and nursing education accrediting agencies with respectability and professionalism to uphold the standards that have been put in place.

14. Disciplinary proceedings should be instituted only for violations of standards of conduct. Standards of conduct should be formulated with student participation, clearly written and published in advance through an available set of institutional regulations. It is the responsibility of the student to know these regulations.

Interpretative Statement: Only when an institution's standards of conduct have been violated may a disciplinary proceeding take place. It is the student's responsibility to be aware of these policies. Students should adhere to state regulations and accrediting body standards.

15. The nursing program should have readily available a set of clear, defined grievance procedures.

Interpretative Statement: NSNA recognizes that nursing programs need to have proper grievance policies in place. Students should have due process as it relates to any formal grievances. Grievance procedures should protect students from lateral and vertical violence, harassment, bullying, or bias.

16. As citizens and members of an academic community, students are exposed to many opportunities, and they should be mindful of their corresponding obligations.

Interpretative Statement: It is the student's responsibility to have a balance between their academic studies and other duties that come up outside of course work and clinical practice. Students must have respectability and professionalism with regards to their role as a student of the nursing profession.

17. Students have the right to belong to or refuse membership in any organization.

Interpretative Statement: NSNA recognizes each student's right to partake in or refuse membership in any organization. Students have the right to create organizations in accordance with the policies of their respective colleges or universities.

18. Students have the right to personal privacy in their individual/personal space to the extent that their wellbeing and property are respected.

Interpretative Statement: NSNA recognizes each student's right to privacy, including upholding a certain level of respect in consideration of a student's body and property. Students expect the institution's policies to protect each student's health, safety, and well-being.

19. Adequate safety precautions should be provided by nursing programs, for example, adequate street and building lighting, locks, patrols, emergency notifications, and other security measures deemed necessary to ensure a safe and protected environment.

Interpretative Statement: Proper safety measures should be undertaken by nursing programs to provide an environment that is secure and safe and allows students to feel comfortable reporting unsafe conditions to the proper authorities without repercussions.

20. Dress code, if present in school, should be established with student input in conjunction with the school administration and faculty. This policy ensures that the highest professional standards are maintained, but also takes into consideration points of comfort and practicality for the student.

Interpretative Statement: If an institution has a dress code it should be formed with equal feedback from student, school administration, and faculty. The dress code should incorporate proper professional standards while also taking into consideration practical and accessible means for a student. Established dress codes should be sensitive to the culture and ethnic diversity of the student population. Dress codes must be practical and uphold standards for the environment they take place in, whether in the academic or clinical setting.

21. Grading systems should be carefully reviewed initially and periodically with students and faculty for clarification and better student-faculty understanding.

Interpretative Statement: NSNA recognizes that to facilitate an appropriate environment of professional and academic courtesy there is a need for grading systems to be regularly reviewed between students and faculty to ensure each party is in equal understanding. Grading policies should be implemented to prevent instructor bias from influencing a student's grade. Students should adhere to standards set by accrediting agencies.

22. Students should have a clear mechanism for input into the evaluation of their nursing education and nursing faculty.

Interpretative Statement: Institutions should have clearly defined and published procedures that allow students to respectfully evaluate and provide proper input on the quality of the nursing education that they are receiving and on the nursing faculty that are instrumental in their education.

23. The nursing program should track their graduates' success in finding entry-level employment as registered nurses and make this information available to all who apply and enroll.

Interpretative Statement: It is imperative for nursing programs to conduct the proper research and evaluation on the level of success that graduates of their programs obtain and their success in finding entry-level employment as registered nurses. This information must be readily available to all those who apply, all those who enroll, and all those who are considering applying.

24. The nursing program should provide comprehensive, clear and concise information related to student loans, scholarships and any other student financial aid.

Interpretative Statement: It is the nursing program's obligation to ensure that student information concerning loans, scholarships, and financial aid be structured in an understandable manner and be made easily accessible. Students also have an obligation to understand the financial disclosures associated with student loans (i.e. interest rates, terms of payment, etc).

Adopted in April 2020 by the 2019-20 NSNA Board of Directors

The NSNA Student Bill of Rights and Responsibilities was initially adopted in 1975. The document was updated by the NSNA House of Delegates in San Antonio, Texas (1991); and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006). Further amendments were adopted by the House of Delegates at the NSNA Annual Convention on April 7, 2017, in Dallas, TX. Adopted in April 2020 by the 2019-20 NSNA Board of Directors

Reference

National Student Nurses' Association. (2020). *Code of Ethics*. Retrieved from <https://www.nsna.org/nsna-code-of-ethics.html>

SEXUAL AND OTHER UNLAWFUL HARASSMENT POLICY

PURPOSE: To provide an environment free from harassment.

POLICY:

The School of Nursing is committed to providing an environment free from discrimination and unlawful harassment. Actions, words, jokes, or comments based on an individual's sex, race, ethnicity, age, religion, sexual orientation or any other legally protected characteristic will not be tolerated. As an example, sexual harassment (both overt and subtle) is a form of misconduct that is demeaning to another person, undermines the integrity of the School of Nursing relationship, and is strictly prohibited. Anyone engaging in sexual or other unlawful harassment will be subject to corrective action, up to and including dismissal.

Examples of unlawful sexual harassment include, but are not limited to unwelcome sexual advances, requests for sexual favors and other verbal, visual or physical conduct of a sexual nature in both the physical and virtual environment.

Any student who wants to report an incident of alleged sexual or other unlawful harassment should promptly report the matter to his or her instructor. If the instructor is unavailable or the student believes it would be inappropriate to contact that person, the student should immediately contact the Dean of Education. The student may raise concerns and make reports without fear of reprisal.

This policy also may, under certain circumstances, apply to agents and non-employees who have contact with our employees and students.

If you have any questions concerning this policy, please feel free to contact the Dean of Education.

VIOLENCE IN THE WORKPLACE/SCHOOL POLICY

PURPOSE: To provide a safe environment.

POLICY:

Your safety and security are of vital importance. Acts of threats of physical violence including intimidation, harassment and/or coercion which involve or affect the School of Nursing, or which occur on hospital property will not be tolerated from anyone. The prohibition against threats and acts of violence applies to all persons involved in the operation of the hospital and its facilities, including but not limited to hospital, students, contract and temporary workers and anyone else on company property. Violations of this policy by any individual will result in corrective action, up to and including termination from the School of Nursing, and/or legal action as appropriate.

Workplace/School violence is any intentional conduct which is sufficiently severe, offensive, or intimidating to cause an individual to reasonably fear for his or her personal safety or the safety of his or her family, friends and/or property such that learning conditions are altered or a hostile, abusive or intimidating learning environment is created. Examples of workplace/School violence include, but are not limited to, the following:

1. Threats, threatening language or any other acts of aggression or violence made toward or by any Facility employee will not be tolerated. For purposes of this policy, a threat includes verbal or physical harassment or abuse, attempts to intimidate, or instill fear in others, menacing gestures, bringing weapons to the workplace, stalking, or any other hostile, aggressive, injurious and/or destructive actions undertaken for the purpose of domination or intimidation.
2. Threats or acts of violence occurring off the School of Nursing premises involving someone who is acting in the capacity of a representative of the School of Nursing.
3. Threats or acts of violence occurring off the School of Nursing premises involving a student enrolled in the School of Nursing as a victim if the school determines that the incident may lead to an incident of violence on School premises.
4. Threats or acts resulting in the conviction of an employee or agent of company, or of an individual performing services for company on a contract or temporary basis, under any criminal code provisions relating to violence or threats of violence, which adversely affect the legitimate business interests of company.
5. Specific examples of conduct, which may be considered threats or acts of violence under this policy include, but are not limited to the following:
 - A. Threatening physical or aggressive contact directed toward another individual or his/her family, friends, associates, or property with physical harm.
 - B. The intentional destruction or threat of destruction of company property or another's property.

- C. Harassing or threatening phone calls, e-mails, text messages or harassment via social media.
- D. Surveillance.
- E. Stalking.
- F. Veiled threats of physical harm or like intimidation.

Report any acts or threats of physical violence, including intimidation, harassment and/or coercion, which involve or affect the School of Nursing, or which occur on hospital property should be reported immediately to your instructor and/or Academic Coordinator, as appropriate to the situation.

WORKPLACE MONITORING AND SECURITY INSPECTIONS POLICY

PURPOSE: To provide supervisors with appropriate guidelines regarding Roxborough Memorial Hospital's intent to provide security for its property, its employees, students, and authorized visitors to its premises.

POLICY:

It is the policy of Roxborough Memorial Hospital to maintain a work environment that is free of illegal drugs, alcohol, firearms, explosives, or other improper materials. In administering this policy, the Hospital prohibits the possession, transfer, sale, or use of such materials on its premises. Roxborough Memorial Hospital requires the cooperation of all employees in administering this policy.

Desks, lockers, and other storage devices may be provided for the convenience of employees but remains the sole property of Roxborough Memorial Hospital. Accordingly, they, as well as any articles found within them, may be inspected by any agent or representative of Roxborough Memorial Hospital at any time, either with or without prior notice.

Roxborough Memorial Hospital likewise wishes to discourage theft or unauthorized possession of the property of employees, Roxborough Memorial Hospital, visitors, and customers. To facilitate enforcement of this policy, Roxborough Memorial Hospital or its representative may inspect not only desks and lockers but also persons entering and/or leaving the premises and any packages or other belongings. Any employee who wishes to avoid inspection of any articles or materials should not bring such items onto Roxborough Memorial Hospital's premises.

PROCEDURE

1. Employees, students, and/or Department Heads are required to report any security violations or potential problems to Security immediately.
2. All employees and students are required to wear issued identification badges at all times while on the premises.
3. All employees and students are required to cooperate and/or assist the Security Department/Human Resources Department with any investigations pertaining to security matters.
4. Roxborough Memorial Hospital may conduct video surveillance of non-private workplace areas. Video monitoring is used to identify security and safety concerns, maintain quality control, detect theft and misconduct, and discourage or prevent acts of harassment and workplace violence. Because the Hospital is sensitive to the legitimate privacy right of employees, every effort will be made to guarantee that workplace monitoring is done in an ethical and respectful manner.

5. Reasonable Searches

- A. The Hospital reserves the right to perform reasonable searches of individuals and their personal effects upon reasonable cause. This may include, but is not limited to, lockers, lunch boxes, purses, brief cases, packages and private vehicles (if parked on the premises).
- B. Searches may be determined to be necessary, and may be initiated by the Hospital without prior announcement and will be conducted at such times and locations as deemed appropriate by the Hospital.
- C. Only Human Resource director /designee may authorize such searches. After business hours this individual may be reached by pager, through the page operator, or through the Administrator on Call.
- D. The Human Resource director /designee will consult with the Director of Security regarding the search.
- E. The search will be conducted by the Director of Security/designee in the presence of the Director of Human Resources/designee.
- F. A written report of the search will be prepared by those conducting the search.
- G. A photographic record of the results of the search may be made at the discretion of those conducting the search.
- H. Every attempt will be made to perform the search in as private a location as feasible.
- I. Any individual refusing to submit to a search will be considered to be insubordinate and will be subject to disciplinary action up to and including termination. In the case of a contracted employee, they will be immediately removed from the premises and not permitted to return.

DRUG-FREE SCHOOL POLICY

PURPOSE: To establish the School of Nursing's commitment to provide a drug-free, healthy, and safe workplace and educational environment for students and employees.

POLICY:

1. STANDARDS OF CONDUCT:

A student who is, or becomes, impaired in his/her ability to adequately perform in the classroom and/or clinical environment due to drug or alcohol use may impede the School of Nursing from achieving its purpose. Therefore, the use of alcohol, illegal use of drugs, and/or the misuse of legal therapeutic drugs while engaged in any portion of their educational experience or School-related activity, is strictly prohibited, and students engaging in such conduct will be subject to expulsion from the School of Nursing.

No alcoholic beverages or illegal drugs are permitted in the School of Nursing building at any time.

Prior to the beginning of any scheduled clinical experience, students are required to report the use of any prescribed drug, or any other substance, which can impair clinical performance to the School Health Nurse (Director of Recruitment, Admissions and Student Health Services), confirming that the student can safely provide patient care while taking the medication.

2. DRUG/ALCOHOL COUNSELING:

The Greater Philadelphia area has numerous facilities available for the treatment of individuals experiencing a chemical abuse disorder. The School of Nursing, however, is not responsible for the treatment of individuals with a substance abuse disorder. The following is a partial list of institutions, which offer services for treatment of substance abuse. If additional information is needed, please contact the School Counselor or the Pennsylvania Addiction Hotline at 1-800-662-4357.

Institutional Referrals for Substance Abuse:

A. Inpatient Rehab Units:

i. Malvern Institute

940 King Road
Malvern, PA
1-610-647-0330

Detoxification, Rehabilitation and Dual Diagnosis- 24 hours a day

iii. Livengrin Foundation

4833 Hulmeville Road
Bensalem, PA 19020
215-638-5200

Detoxification, Rehabilitation and Dual Diagnosis- 24 hours a day

ii. Caron Foundation

401 Plymouth Road, Suite 325

Plymouth Meeting, PA 19462
1-877-545-0741

Detoxification and Rehabilitation and Residential Treatment

iv. Fairmount Behavioral Health System

561 Fairthorne Avenue
Philadelphia, PA 19128
215-487-4000

Dual Diagnosis Unit with Primary Psychiatric problem

B. Intensive Outpatient Programs:

Rehab After Work

Locations including Paoli, Upper Darby, and NJ and the following in Philadelphia:

1420 Walnut Street Suite 500
Philadelphia, PA 19102
215-546-2200

and

9815 Roosevelt Boulevard
Philadelphia, PA 19114
610-632-5039

C. Outpatient Treatment (HMO-type care)

Livengrin Foundation
4833 Hulmeville Road
Bensalem, PA 19020
215-638-5200

D. Support Groups

- i. Alanon - For family and friends affected by another's addiction 215-222-5244
- ii. Alcohol Abuse 24 Hour Hotline 1-800-444-9999 or 1-800-930-9329
- iii. Alcoholics Anonymous (AA) 1-800-839-1686
- iv. Narcotics Anonymous (NA) 1-800-407-7195
- v. Philadelphia Recovering Nurses Association (PRNA)
5937 Crystal Street
Philadelphia, PA 19120
215-725-5035
- vi. Free Quit line for Smokers 1-800-784-8669

3. DISCIPLINARY SANCTIONS

The illegal possession, use, manufacture, sale or purchase of narcotics, drugs (including alcohol), drug paraphernalia, or controlled substances while on Roxborough Memorial Hospital or affiliate clinical agencies property will result in expulsion and in the filing of criminal charges. Illegal substances will be confiscated, and the appropriate law enforcement agencies notified. A student who is arrested or charged with a drug offense which involves

the sale, manufacture, possession, or purchase of illegal drugs must inform the Dean of Education within five (5) days of the nature of the charges and the ultimate disposition of the charges. Failure to do so is grounds for disciplinary action, up to and including expulsion. Such arrest/conviction will subject the student to discipline, up to and including expulsion.

4. REPORTING OF DRUG & ALCOHOL RELATED VIOLATIONS & FATALITIES

Any drug and alcohol related violations and fatalities that occur at Roxborough Memorial Hospital or at any School activity are reported to the Dean of Education. Disciplinary sanctions are outlined above in Section III.

5. SEARCHES OF STUDENTS AND PROPERTY

In accordance with School policy as stated in the Student Handbook, the School of Nursing reserves the right to search a student or a student's property when there is reasonable suspicion of illegal possession, use, manufacture, sale, or purchase of drugs or alcohol. Student property subject to searches include, but is not limited to, personal belongs and private vehicles parked on Hospital property. Any student who refuses to submit to such a search will be subject to expulsion.

6. DRUG AND ALCOHOL TESTING

- A. All applicants for admission to the School of Nursing are required to submit to drug screening as a condition of enrollment. Any applicant who tests positive for illegal use of drugs or who refuses to submit to such testing will not be admitted.
- B. All enrolled students are subject to mandatory testing for illegal drug use or alcohol during their enrollment at the School of Nursing. Such testing may be required of all students, for reasonable cause, or as part of a program of random testing. Any enrolled student who tests positive for illegal use of drugs or for being under the influence of alcohol, or any student who refuses to submit to such testing, will be subject to expulsion.
- C. Any applicant or student who is refused admission to, or is expelled from the School of Nursing, as a result of a positive drug or alcohol test, or a refusal to submit to such testing, will forfeit all monies paid for tuition or fees to the school.
- D. When a student exhibits impaired academic or clinical performance and reasonable suspicion exists that he/she is under the influence of alcohol and/or drugs while in class, in the clinical laboratory or at a community agency affiliation, the instructor is to:
 - i. Arrange if practical, to have another person observe and document the impaired performance or suspicious behavior and notify the Dean of Education as soon as possible of the behavior observed.
 - ii. Conduct a private meeting with the student to discuss the behavior and observations. The student is to explain why he/she is not in a condition to adequately perform assigned clinical or academic responsibilities.

- E. Should reasonable suspicion remain that the student in question is under the influence of alcohol and/or drugs, the Dean of Education shall be notified, and the student will be escorted for appropriate testing according to Roxborough Memorial Hospital's policy for "On Job Impairment Drugs and Alcohol Screening."
- F. Symptoms leading to reasonable suspicion may include dilated pupils, constricted pupils, uncoordinated gait, slurred speech, poor motor coordination, glossy eyes, drowsiness, disorientation or confusion, odor of alcohol on breath or clothes, extreme nervousness or irritability, profuse perspiration, unusual talkativeness, convulsions, and the inability to perform routine tasks.
- G. Referral to Testing:
- i. No individual will be tested unless he or she signs a consent form.
 - ii. Where possible the consent form shall be executed prior to referral; in all other cases the consent form shall be executed at the collection site.
 - iii. When the form is executed prior to referral a copy shall be given to the student to present to the collection site representative.
 - iv. The consent form shall be signed by the Employee Health clinician, or by Emergency Room staff during off hours.
 - v. The individual to be tested shall be escorted by instructor or director to the collection site.
 - vi. Any student who refuses to submit to such testing will be subject to expulsion.
- H. Verification of Identity and Obtainment of Consent:
- i. The collection site shall be clean, well-lit and dedicated solely to urinalysis and blood collection during the collection process. Whenever possible, the collection site shall have a collector of each gender.
 - ii. Upon arrival at the collection site, the individual to be tested shall be asked to provide the collection site person with the consent form and an additional form of identification. If the individual does not have photo identification, a detailed description of the person being tested should be included on the consent form. The individual to be tested shall acknowledge the description by signing their name to same.
 - iii. The collection site person shall check that the individual signed the consent portion of the consent form.
 - iv. If an individual refuses to execute the consent, no sample shall be collected. The individual's refusal should be noted on the consent form and reported to the Dean of Education.
- I. Confidentiality
- i. The School of Nursing shall not disclose the results of any drug or alcohol test except to individuals who have a need to know, as required by law, or with the student's consent.

COMPUTER SYSTEM & WEB-BASED PROGRAMS

COMPUTER ACCESS AND USE POLICY

PURPOSE: To describe acceptable uses of the school's computer lab equipment.

POLICY:

I. Access

- A. The equipment in the computer lab is maintained for use of the students, faculty, and staff of the School of Nursing. No other persons are authorized to be in the labs or to use this equipment except by permission of an arrangement with the School Librarian or designee.
- B. The computer labs are accessible during the same hours as the library. Instructors may reserve all or part of the computer labs for class sessions requiring or teaching computer use; otherwise, no reservations are accepted.

II. Acceptable Use

- A. The computer labs may be used for course work, computer-assisted instruction directly related to course work, and for other applications relevant to nursing education.
- B. Software that is not the property of the School of Nursing may not be used or installed on the computers. No user may alter or delete any permanent file on a hard drive.
- C. Users are to save their work on their own virtual cloud. Files left on the hard drives not only are accessible to other users, but also are subject to deletion as staff undertakes routine maintenance.
- D. Equipment is not to be moved, disconnected, or reconfigured.

III. Other Information

- A. There are 12 computers in the library, 8 computers in the Helene Fuld computer lab and 24 computers in Classroom 1.
- B. All the computers have the web based EBSCOHOST icon, and web-based Microsoft Office, including Word, Excel, and PowerPoint.
- C. While anti-virus software is installed on the computers, the school cannot guarantee that every virus will be detected and neutralized.
- D. Assistance with the computers or the installed software may be obtained from the Librarian.
- E. Under no circumstances are food or drink allowed in the computer lab.

MINIMUM TECHNICAL REQUIREMENTS FOR ELECTRONIC DEVICES

ATI

Browser	Version	Notes
Google Chrome™	77 or later	
Mozilla Firefox®	69 or later	
Safari®	11 or later	For optimal experience, disable the “prevent cross-site tracking” setting under Safari’s privacy settings.

Device	Operating System	Notes
PC	Windows 10 or later	Min resolution 1024 x 600
Mac	Mac OS® X 10.11 or later	Min resolution 1024 x 600
Ipad®	iOS 13 or later	<p>Products that have more specified iPad® requirements:</p> <ul style="list-style-type: none"> • Skills Modules 3.0 (see below in Additional Notes for details) <p>Products not currently supported on iPad®</p> <ul style="list-style-type: none"> • Proctored Assessments • Communicator 2.0 (virtual interactions) • HealthAssess (virtual practice and virtual challenge simulations)
Android tablet	Android 9.X or later	<p>If your default browser is not Google Chrome, please download Google Chrome for a better experience.</p> <p>Products not currently supported on Android tablets</p> <ul style="list-style-type: none"> • Proctored Assessments • Communicator 2.0 (virtual interactions) • HealthAssess (virtual practice and virtual challenge simulations)

ADDITIONAL NOTES

Accessibility:

- ATI assessments are WCAG 2.1 AA compliant and, accordingly, meet the mandates of the Americans with Disabilities Act. In addition, ATI internally tests its portal websites and products

delivered therein using a combination of Voiceover, JAWS, and NVDA to promote WCAG 2.1 compliant operations for assistive reading; however, as browsers and assistive technology are constantly changing and outside of ATI's control, we are not able to guarantee any specific performance.

Browser:

- JavaScript and cookies must both be enabled within browser.
- Some browsers may require users to enable tabbing.
- Some content may only be made accessible by disabling your browser's popup blocker.
- Session Timeout Counter: The browser you use needs to allow status bar updates via script otherwise a session timeout counter will not be visible for you.

Miscellaneous:

- Satellite ISP's: The ATI website functionality depends on direct connections to our website and databases in order to accurately display content. Because many ISP's cache webpages rather than allowing connection to the originating website, we are not able to guarantee performance of our website over a satellite connection.
- For Civility Mentor, The Communicator 2.0 and HealthAssess virtual simulations, a minimum internet speed of 5 Mbps is required (10 Mbps or more is recommended). Test your internet speed using www.speedtest.net.

Remote Proctoring Requirements for Students:

- Browser: Google Chrome
- Microphone: Any microphone, either internal or external
- Webcam: 320x240 VGA resolution (minimum) internal or external
- Internet Speed: .5 - 1.0 Mbps. Test your internet speed using www.speedtest.net.

Skills 3.0 Device Requirements:

- iOS Requirements:
 - iOS 13.4 or above
 - Use the default Safari browser
 - 4GB RAM+
 - One of the following devices:
 - iPad Air 4
 - iPad Mini 4 or later
 - iPad Pro
 - iPad 6th Generation or later

Davis Advantage

Please ensure Javascript and Cookies are enabled in your browser settings.

Browsers		
OS	Version	Browsers
Windows	10, 8 and 7	Internet Explorer 9 and above Google Chrome (latest) Firefox (latest)
Mac OS	10.9 (Mavericks) and above	Safari 10.0.3 and above Google Chrome (latest) Firefox (latest)

Devices		
OS	Version	Devices
iOS	10.3.3 and above	iPad, iPad Air 1 and above, iPad Mini iPhone 6 and above
Android	4.4.2 and above	Android Mobile (i.e. Samsung Galaxy S III) Android Tablet (i.e. Samsung 10" Tab) Kindle Fire (i.e. Kindle Fire 7 inch)

INTERNET ACCEPTABLE USE POLICY

PURPOSE: To provide students with guidelines regarding Roxborough Memorial Hospital’s intent to maintain an educational facility free of harassment and sensitive to the diversity of students through the use of computers and computer software, including electronic (e-mail) and Internet access.

POLICY:

This policy governs the use of Roxborough Memorial Hospital’s e-mail and internet usage. Computers, computer files, the e-mail system and all software furnished to students are Roxborough Memorial Hospital property intended for School use only. These systems, including the equipment and the data stored in the systems, are and remain at all times the property of Roxborough Memorial Hospital. As such, all messages created, sent, received, or stored in the systems and all information and materials downloaded into Roxborough Memorial Hospital computers are and remain the property of Roxborough Memorial Hospital. Students should not use a password, other than the ones created to access our computer system without authorization from the Director of the Hospital IT Department. To contact the Director, you can call the HELP desk at 215-487-4357. Students must use good judgment when communicating through e-mail. These electronic communications have the same effect as if they are created on a hard copy document. To ensure compliance with the policy, computer and e-mail usage may be monitored.

STATEMENT OF POLICY

I. Use of Information Systems

Roxborough Memorial Hospital strives to maintain an academic facility that is free of harassment and sensitive to the diversity of its students and employees. Therefore, Roxborough Memorial Hospital prohibits the use of computers and the e-mail and Internet systems in ways that are disruptive, offensive to others or harmful to morale.

- A. Examples of inappropriate use of the information systems include, but are not limited to the following:
1. Threatening or harassing other students.
 2. Using obscene or abusive language.
 3. Creating, displaying, or transmitting offensive or derogatory images, messages or cartoons regarding sex, race, religion, color, national origin, marital status, age over 40, physical or mental disability, medical condition, or sexual orientation.
 4. Creating, displaying, or transmitting “junk mail” such as cartoons, gossip or “joke of the day” messages.
 5. Creating, displaying, or transmitting “chain letters”; and,
 6. Soliciting or proselytizing others for commercial ventures or for religious, charitable, or political causes. This includes “for sale” and “for rent” messages or other personal notices.

II. Privacy Considerations

Students should not expect privacy with regard to Roxborough Memorial Hospital’s information systems. Any communication, which is private, confidential, or personal, should not be placed on Roxborough Memorial Hospital’s information systems. Students should expect that any e-mail that is created, sent or received and any file in the computer network, in local PCs or devices located on Roxborough Memorial Hospital property may be read at any time. Roxborough Memorial Hospital expressly reserves the right to intercept, read, review, access and disclose all e-mail messages; and to intercept, listen to, review, access and disclose all voice mail messages; and to intercept, read, review, access, and disclose all computer files, including, but not limited to Internet usage and Web sites that you have accessed. Every time you use or log on to these devices, you are consenting to such action. The reasons for these actions, include, without limitation, to investigate wrongdoing, to determine whether security breaches have occurred, to monitor compliance with policies and to obtain work products needed by other employees. Deleting e-mail messages and computer files does not necessarily mean that there are not copies on the network or in storage, or that the information cannot be retrieved. Accordingly, nothing should be written in a computer file or in e-mail

that you would not put in a traditional hard copy document. Please note that it is possible that Roxborough Memorial Hospital could choose to or be compelled to produce e-mail and computer files in litigation.

III. Licensing of Computer Software

The Roxborough Memorial Hospital purchases and licenses the use of various computer software for the school's curriculum purposes and does not own the copyright to this software or its related documentation. Unless authorized by your Information Systems Director, who is be contacted by request by the Administration Secretary of the School of Nursing, does not have the right to produce such software for use on more than one computer.

It is the Roxborough Memorial Hospital's policy to acquire software through legitimate means and respect agreements concerning the use and copying of software. Students must not borrow, "bootleg" or copy Roxborough Memorial Hospital's licensed software for personal use or utilize it outside the limits of the license agreement negotiated by the hospital or its School.

IV. Security Precautions

Security of the School of Nursing information systems is a priority and the responsibility of all students. Computer log-on ID's and passwords for network access, e-mail, and other applications should never be saved on a public device or revealed to anyone unless requested by authorized School personnel. Please be sure to log out/ exit from any personal accounts when using any public device.

V. Violations of Policy

Students should notify the Dean of Education upon learning of violations of this policy. The information age makes it difficult to cover every possible emerging technology adequately as to its capacity for abuse. Students are expected to use good judgment in using any Roxborough Memorial Hospital provided business tool. While not all-inclusive, any breach of the guidelines, statements, or spirit of this policy, may result in disciplinary action up to and including dismissal from the School of Nursing.

PROCEDURES

Students

1. Report any violations or potential problems with communication to the Librarian.
2. Utilize the computer and computer networks solely for School assignments in accordance with this policy.

SOCIAL MEDIA USE POLICY

PURPOSE: Roxborough Memorial Hospital and Roxborough Memorial Hospital School of Nursing recognize the use of and access to social media platforms by students. We are supportive of the students' use of and access to social media. Our goal is to assist the student with proper and positive use of social media. While the School of Nursing recognizes that social media is a powerful communication tool, there are risks, as well as benefits, of use of social media platforms. To avoid potentially serious consequences for inappropriate use of social media, the School of Nursing has developed this policy as a guideline for its students.

Students should be mindful that they not only represent themselves, but also represent the School of Nursing, Roxborough Memorial Hospital, and the nursing profession on social media. Therefore, it is recommended that students demonstrate individual professionalism and act consistently with the mission of Roxborough Memorial Hospital and Roxborough Memorial Hospital School of Nursing.

POLICY:

1. Privacy and Confidentiality

- A. Students are bound by federal, state, and facility privacy and confidentiality standards and policies.
- B. Students must adhere to the Health Insurance Portability and Accountability Act (HIPAA).
- C. Students have the responsibility to promptly report an identified breach of privacy and/or confidentiality to a school authority-including, but not limited to, an instructor, faculty, staff person, or Dean.

2. Social Media Behavior

- A. Students should not use their Prime Healthcare company email address in association with personal social media accounts.
- B. Students are not permitted to "friend" or "follow" faculty while actively enrolled in the nursing program.
- C. Students should be aware that there is a potential impact from each post made and that individuals including peers, faculty, employers, potential employers and other personal and/or professional contacts may view the activity online.
- D. Student should stay informed about privacy settings of the social media sites they use.
- E. Students who utilize social networking sites should actively maintain an awareness of how their professionalism may be affected by friends' and peers' usage of the same sites.
- F. Students should not share, post, or otherwise disseminate any information that can identify a client or in any way violate a client's rights or privacy.
- G. Students should never refer to anyone in a disparaging manner.
- H. Students should not make threatening, harassing, sexually explicit or derogatory statements regarding any person's race, ethnicity, gender, age, citizenship, national origin, sexual orientation, disability, religious beliefs, political views or educational choices.

- I. Students should not make disparaging remarks about Roxborough Memorial Hospital, Roxborough Memorial Hospital School of Nursing, any clinical facility, any other college, university, healthcare faculty or School of nursing, including the students, faculty members and staff.
- J. Students should not post content or otherwise speak on behalf of Roxborough Memorial Hospital, Roxborough Memorial Hospital School of Nursing, any clinical facility, any healthcare faculty, any college, university or School of nursing.

3. Violation of Social Media Policy

Any student who violates this social media policy will face disciplinary action up to and including dismissal from the Roxborough Memorial Hospital School of Nursing. (See Student Civility in School of Nursing and Classroom Policy).

References

Recommendations For; Social Media Usage and Maintaining Privacy, Confidentiality and Professionalism. (2017). Retrieved from National Student Nurses' Association: <http://www.nsna.org>

Social Media Policy. (2023). Roxborough Memorial Hospital Employee Handbook. Philadelphia, PA: Prime Health Care-Roxborough Memorial Hospital.

Spector, N. (2012). What Nurse Educators Should Consider when Developing Social Media Policies. Dean's Notes, 1-. Pitman, NJ: Anthony J Jannetti, Inc.

Spector, N. A. (2017). Guidelines for Using Electronic and Social Media: The Regulatory Perspective. Retrieved from ANA: <http://www.nursingworld.org>

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Active
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- Discipline**
- Author
- Editor

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- Consumer Health (92)
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- Medicine (1202)
- Nursing (272)
- Pharmacy (1)
- Veterinary Medicine (28)

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A - H	I - O	P - V
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Allergy (10)	Infectious Disease (24)	Parasitology (0)
Alternative/Complementary Medicine (20)	Internal Medicine (27)	Pathology (30)
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Aviation & Space Medicine (0)	Maternal Child Nursing (11)	Pharmaceutical Chemistry (0)
Biochemistry (1)	Medical Assisting (11)	Pharmacology (21)
Biology (9)	Medical Illustration (0)	Pharmacy (60)
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Cardiovascular Technology (0)	Medical Technology (8)	Physician Assistant (3)
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A Closer Look at the Browse Tools

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Browse A-Z Index My R₂ Reserve Shelf Admin SEARCH [Advanced Options](#)

Tools

Current Search
 Search Terms: wheezing

Include:
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Show results from:
 Indexed Terms (51)
 Full Text (2,785)
 Chapter Title (22)
 Section Title (9)
 Images (47)

Filter by:
 One(s)

Practice Area
 Allied Health (146)
 Consumer Health (51)
 Dentistry (24)
 Medicine (1,814)
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 Veterinary Medicine (12)

Publication Date
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 2010 (544)
 2009 (324)
 2008 (595)
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Discipline
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Chapter 8 - Respiratory Problems | Section: 8.9 WHEEZING
 TAYLOR'S 10-MINUTE DIAGNOSIS MANUAL, 2nd; Paul Paulman, MD, Audrey Paulman, MD, Jeffrey Harrison, MD, Lippincott Williams & Wilkins 2007
 8.9 WHEEZING Thomas C. Bent • BACKGROUND. Wheezing is one of the most common respiratory complaints to present to primary care physicians. • PATHOPHYSIOLOGY. Although asthma and chronic obstructive pulmonary...

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Chapter 17 - The Wheezing Child
 PEDIATRIC PRIMARY CARE CASE STUDIES, 1st; Catherine Burns, PhD, RN, CPNP-PC, FAAN, Beth Richardson, DNS, RN, CPNP, FAANP, Margaret Brady, PhD, RN, CPNP-PC, by Jones and Bartlett Publishers, LLC 2010
 The Wheezing Child Deborah A. Bohan Wheezing is a common presenting symptom of respiratory illness in children. Although the most frequent cause of wheezing in children is asthma, conditions in...

[Full Text Available](#)

WXYZ | Section: Wheezing
 PROFESSIONAL GUIDE TO SIGNS & SYMPTOMS, 6th; LWW, Lippincott Williams & Wilkins 2012
 Wheezing [Sibilant rhooch] Wheezes are adventitious breath sounds with a high-pitched, musical, squealing, creaking, or groaning quality. They're caused by air flowing at a high velocity through a narrowed airway. When they...

[Full Text Available](#)

Chapter 9 - Wheezing | Section: Treatment
 HANDBOOK OF MEDICINE IN PSYCHIATRY, 1st; Peter Mann, M.D., Raymond Suarez, M.D., Barbara Barnett, M.D., American Psychiatric Publishing, Inc. 2006
 Treatment The results of the history and physical examination should be used to determine the underlying etiology of the patient's wheezing, and the patient should be treated accordingly. If the patient is hypoxic, supplemental...

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Chapter 17 - The Wheezing Child | Section: Management
 PEDIATRIC PRIMARY CARE CASE STUDIES, 1st; Catherine Burns, PhD, RN, CPNP-PC, FAAN, Beth Richardson, DNS, RN, CPNP, FAANP, Margaret Brady, PhD, RN, CPNP-PC, by Jones and Bartlett Publishers, LLC 2010
 Management Medication Management Having determined the asthma severity level that James is experiencing based on his history and physical examination findings, you are ready to identify an appropriate medication plan. You prescribe a short burst of...

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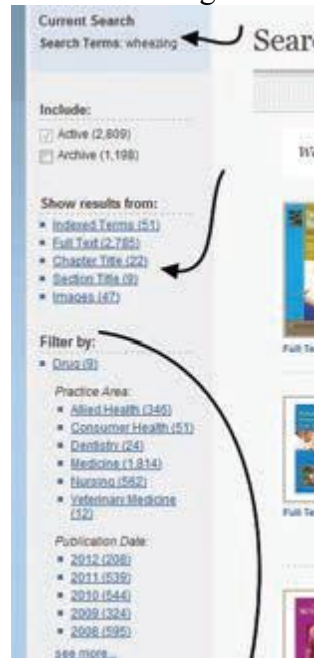
Chapter 37 - Bronchiolitis and Wheezing | Section: ETIOLOGY AND PATHOGENESIS
 NETTER'S PEDIATRICS, 1st; Todd Florin, MD, Stephen Ludwig, MD, by Saunders, an imprint of Elsevier Inc. 2012
 ETIOLOGY AND PATHOGENESIS The majority of wheezing in infants is caused...

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A Closer Look at the Search Tools

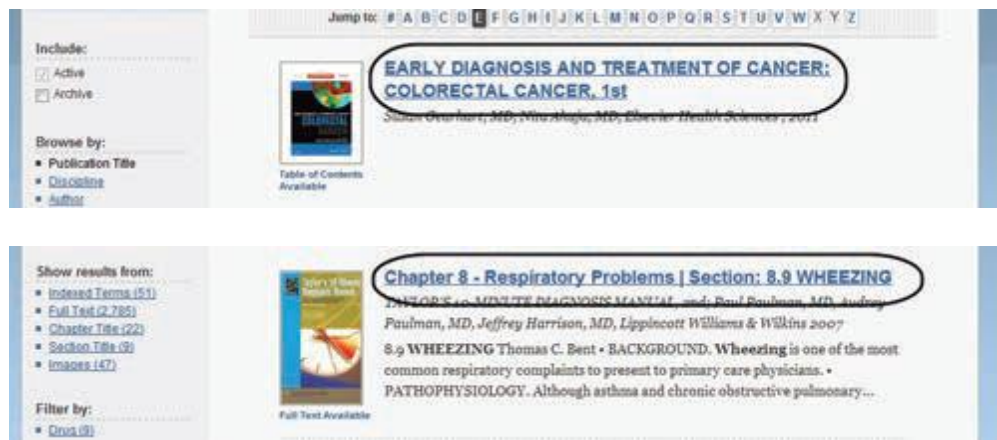
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TAYLOR'S 10-MINUTE DIAGNOSIS MANUAL > Respiratory Problems > 8.9 WHEEZING

TAYLOR'S 10-MINUTE DIAGNOSIS MANUAL

[<< Previous](#) [Next >>](#)

8.9 WHEEZING

Thomas C. Bent

1. **BACKGROUND.** *Wheezing* is one of the most common respiratory complaints to present to [primary care physicians](#).
2. **PATHOPHYSIOLOGY.** Although [asthma](#) and chronic obstructive [pulmonary disease](#) (COPD) account for most cases of *wheezing*, there are multiple causes. The National [Asthma](#) Education and Prevention Program (NAEPP) recommends an accurate diagnosis be made by medical history, physical, and spirometry (1).
 - a. *Wheezing* in infants, children, and adults. The reasons why patients wheeze vary dramatically, depending on age. For example, whereas [asthma](#) is the most common chronic pediatric disease in industrialized nations, inhaled allergens appear to be unimportant precipitants of *wheezing* in infancy (2) (see [Table 8.9.1](#)). *Wheezing* that begins in infancy or early childhood is associated with progressive and persistent disease (3).
 - b. *Wheezing* versus stridor. Stridor, discussed in [Chapter 8.8](#), is characterized as an inspiratory wheeze that implies major obstruction of the upper airway. *Wheezing*, in contrast, is defined as high-pitched, continuous (or long *duration*) lung sounds that are superimposed on the normal breath sounds (4). The inspiratory phase of respiration is usually normal, and the expiratory phase is prolonged. Unfortunately, the difference is not always obvious to the clinician. Vocal cord dysfunction, which is a psychosomatic disorder, can be difficult to differentiate from [asthma](#). These episodes can include both inspiratory and expiratory *wheezing* and an upper airway cause is not clear (5).

TABLE 8.9.1 Etiology of Wheezing by Age-Group

[View Table](#)

Browse & Search Contents Topics Tools

TAYLOR'S 10-MINUTE DIAGNOSIS MANUAL

Search within this title: Search Q

- RESPIRATORY PROBLEMS
 - 8.1 COUGH
 - 8.2 CYANOSIS
 - 8.3 HEMOPTYSIS
 - 8.4 PLEURAL EFFUSION
 - 8.5 PLEURITIC PAIN
 - 8.6 PNEUMOTHORAX
 - 8.7 SHORTNESS OF BREATH
 - 8.8 STRIDOR
 - 8.9 WHEEZING
- GASTROINTESTINAL PROBLEMS
- RENAL AND UROLOGIC PROBLEMS
- PROBLEMS RELATED TO THE FEMALE REPRODUCTIVE SYSTEM
- MUSCULOSKELETAL PROBLEMS
- DERMATOLOGIC PROBLEMS

b. Wheezing versus stridor. Stridor, discussed in Chapter 8.8, is characterized as an inspiratory wheeze

Browse & Search Contents Topics Tools

Jump directly to a topic in TAYLOR'S 10-MINUTE DIAGNOSIS MANUAL.

- Sinusitis
- Anemias
- Anoxia
- Ankylosis
- Anuria
- Arthritis
- Asthma
- Back Pain
- Bone Cyst
- Bradycardia
- Cardiomegaly
- Chest Pain
- Coma
- Congestive Heart Failure
- Cough
- Cyanosis
- Cyst
- Delirium

Other topics in this book related to this chapter

- Cough
- Cyanosis
- Hemoptysis
- Pain
- Pleural Effusion
- Pneumothorax
- Wheezing

industrialized nations, inhalant allergens appear to be unimportant precipitants of wheezing in infants (r) (see Table 8.2). Wheezing that begins in infancy or early childhood is associated with

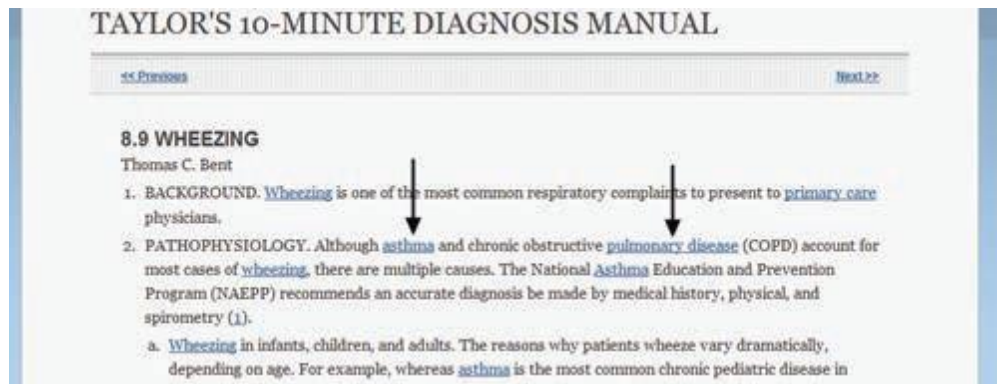
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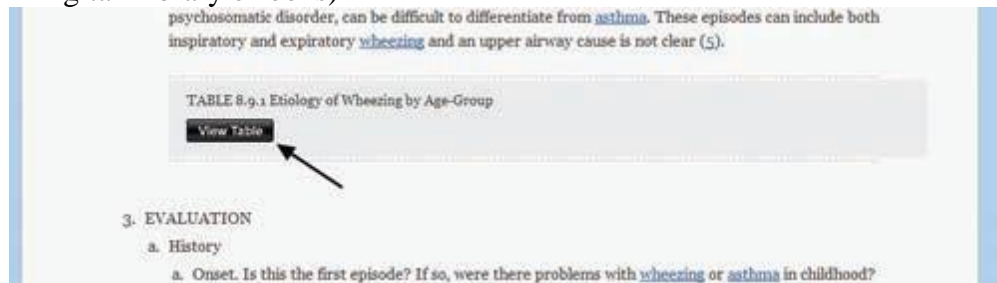
TAYLOR'S 10-MINUTE DIAGNOSIS MANUAL

<< Previous Next >>

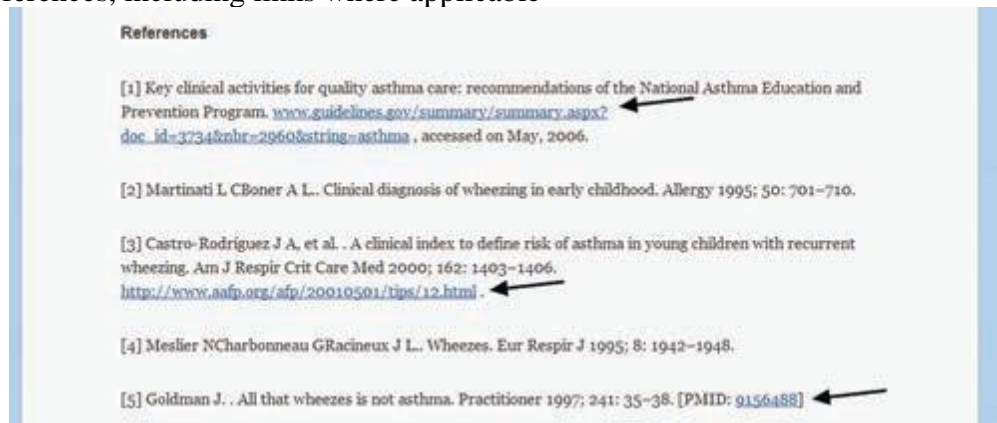
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The R2 Digital Library A-Z Index

The R2 Digital Library features an A-Z index that includes drug names, diseases and topics. This index is dynamic and pulled directly from your library's R2 Digital Library eBook collection. This index can be filtered and sorted to enhance discoverability.

The screenshot shows the 'A - Z Index' page of the R2 Digital Library. The page is organized into columns of letter-based categories. A callout box on the left highlights the 'Filter by' section, which includes options for 'Practice Area' (Medicine, Nursing, Allied Health, Consumer Health, Veterinary Medicine, Dentistry, Pharmacy) and 'Discipline' (NDS, Alloter, Alternative/Complementary Medicine, Anatomy, Anesthesiology). A search bar at the top right allows for searching by drug, publication title, or condition. The 'A - Z Index' section includes a 'Jump to' bar with letters A through Z, and several columns of terms starting with the letters A, AJ, AO, A-, AA, and AP.

My R2

The My R2 area of the R2 Digital Library allows you to save images, sections, deep links and more for future use. Please note that to save from session to session, your library must enable user names and passwords so that you can create your unique profile over time. You may also use the My R2 area without a user name and password to save information over a single session.

Save Bookmarks, Course Links, Images and References to your My R₂ Profile

Browse A-Z Index My R₂ Reserve Shelf Admin

Search for a drug, publication title, or condition SEARCH Advanced Options

Bookmarks Course Links Images References My User Profile

Images

Create folders to organize content in each of the available sections

- Wheezing Images Rename Folder Delete
- Upcoming Presentations Rename Folder Delete
- Wheezing Charts and Graphs Rename Folder Delete

ADD A NEW FOLDER

Saved Searches

No Saved Searches

Search History (last 20 searched):

- [pulmonary disease](#)
214 results on 08/14/2012
- [pulmonary disease](#)
6147 results on 08/14/2012
- [pulmonary disease](#)
214 results on 08/14/2012
- [pulmonary disease](#)
6147 results on 08/14/2012
- [wheezing](#)
2609 results on 08/14/2012
- [wheezing](#)
2609 results on 08/14/2012
- [AIDS](#)
14877 results on 08/14/2012
- [MI](#)
130 results on 03/29/2012
- [ELSEVIER](#)
0 results on 02/29/2012
- [ELSEVIER](#)
0 results on 02/29/2012
- [ELSEVIER](#)
0 results on 02/29/2012

Your can save searches and the R₂ Digital Library will automatically save recent searches

FINANCIAL AID

STUDENT FINANCIAL AID POLICY

PURPOSE: To guide and direct students.

POLICY:

The School of Nursing receives and offers a wide variety of financial aid packages. Over 90% of all of our students receive some type of financial aid. This handbook outlines what aid is available and how to apply for it.

FINANCIAL AID PROGRAMS:

The Federal government offer several different funding sources to our students. These include Federal PELL Grants, Federal Direct Loans, and PLUS Loan.

All students seeking financial aid must complete the "Free Application for Federal Student Aid" (FAFSA). The Financial Aid Officer may need an IRS Tax return transcript for you, your spouse and/or parents from two years prior to the current FAFSA. We may also need copies of other information.

Presently, the deadline for filing the FAFSA application is May 1st for new applicants. It is urged that you do not wait this long. Apply after October 1st or as early as you can. Seniors must apply before March 15th. In order to apply for financial aid, you need to go to <https://studentaid.gov/> and complete the FAFSA online.

All students must re-apply for financial aid each award year they are in School.

STUDENT ELIGIBILITY REQUIREMENTS:

To receive any type of aid, a student must be enrolled in the School of Nursing as at least a half-time student and must maintain a passing grade. **You cannot receive federal funds to repeat a course previously failed.** Federal PELL Grants will not be awarded if you already have an undergraduate degree.

SELECTION CRITERIA:

Financial aid funds are allocated based upon financial need. Congress has adopted a financial analysis model that takes into consideration a wide variety of economic factors in determining the "Expected Family Contribution." Factors such as earned income, savings, etc. all enter into these calculations. This information is derived from the FAFSA application described earlier.

AMOUNT OF LOAN OR GRANT:

Financial aid funds provide a base level of aid for most students. They were not intended to fund the entire cost of attendance at the post-secondary level. The basic formula in determining the financial need of students is as follows:

- a. Cost of Attendance (Tuition, Fees, Living Expenses)
- b. Minus Expected Family Contribution
- c. Minus Other Financial Aid
- d. Equals Financial Need

Verification of Financial Aid Information

Roxborough Memorial Hospital will verify financial aid application received that are federally selected for verification by the U.S. Department of Education's Central Processing System.

A financial aid applicant who is federally selected for verification will be notified that their FAFSA was selected for verification and requests documents that must be submitted to verify data. The student must provide the requested documentation within forty-five days of receiving the written notification. Failure to comply may result in a loss of grant and/or loan eligibility under Title IV.

If changes are required as a result of verification, the school will make the changes to the FAFSA electronically. The student will receive a corrected Student Aid Report from Central Processing. Once the changes have been processed the student will be issued a Financial Aid Award Letter by Roxborough Memorial Hospital, which indicates the award the student is eligible to receive.

Suspected cases of fraud and abuse must be reported to the Regional Office of the Inspector General in accordance with regulation 34 CFR 668.14 (G). Fraud may exist if the institution has reason to suspect any of the following:

- Falsified or forged documents or signatures.
- Use of false or fictitious names, addresses, or social security numbers.
- A pattern of misreported information from one year to the next.
- A pattern of filing special condition applications for two or more years for the same reasons.
- Stolen or fraudulently endorsed financial aid checks.
- Kickbacks to receive grants or loans.
- Unreported prior loans or grants during one award year.

STUDENT'S RESPONSIBILITIES:

All students receiving grants or loans must sign an Affidavit of Educational Purpose relating to the student's education. This affidavit is on the FAFSA application.

All students must notify the school of any name or address change occurring during enrollment.

All students must notify the Financial Aid Office of any significant change in financial resources. Increases as well as decreases must be reported.

BASIC INFORMATION ON TITLE IV GRANTS AND LOANS:

NOTE: Students can file the FAFSA over the Internet. The website is: <https://studentaid.gov/>

I. FEDERAL PELL GRANTS

A. Grants range from \$757.00 to \$7,395.00 at present but change annually based on congressional appropriations.

B. Eligibility Requirements:

1. Demonstrated financial need based on Department of Education analysis
2. Must not possess a Bachelor's degree
3. U.S. citizen or eligible non-citizen
4. Satisfactory academic progress

C. Application Fee: none

D. Application Form: "Free Application for Federal Student Aid (FAFSA)"

E. Application Process: Complete the application online at <https://studentaid.gov/>

F. Application Deadline: March 15th

G. Students who are Pell eligible and have a Title IV credit balance after required charges are paid will have access to their Title IV credit balance within SEVEN days of the start of the payment period.

H. Pell Grant duration of eligibility. Once you have received a Pell Grant for 6 full years, you are no longer eligible for Pell Grants.

II. FEDERAL DIRECT LOANS (Federal Family Education Loan)

A. Annual maximum loan: (independent students)

\$9,500 for first level students

\$10,500 for second level students up to a maximum of \$57,500 during your undergraduate years of study

B. Eligibility Requirements:

1. U.S. citizen or eligible non-citizen
2. Satisfactory academic progress
3. Must carry at least 6 credits per semester

C. July 1, 2023, Origination Fees and Interest Charges. NOTE: Origination Fees and interest are subject to changes from year to year. Presently, fees are 1.059% for unsubsidized loans and 1.057% for subsidized loans. Subsidized Direct Loans are at a 5.5% fixed rate and unsubsidized Direct Loans are at a 7.05% rate for the 2023-2024 academic year. Direct Loan Application (Master Promissory Note.)

D. Application Process: All students must first complete Free Application for Federal Student Aid (FAFSA). Next you must go to www.studentaid.gov and complete a Direct Loan Master Promissory note. You will also need to complete Direct Loan Entrance Counseling at www.studentaid.gov.

E. Application Deadline: 30 days prior to the end of the school year to avoid a request for late disbursements.

F. Loan Repayment: Must begin following a grace period of 6 months after graduation, withdrawal or decrease in academic load to less than 6 credits per semester. Interest may have to be paid while in school if loan is unsubsidized. Borrower may have option to capitalize interest into the original loan amount.

- G. There is a limit on the maximum period of time (measured in academic years) that you can receive Direct Subsidized loans. In general, you may not receive Direct Subsidized loans for more than 150% of the published length of any program of study. The published length of any program of study is in a school's catalog or on their website. If you lose eligibility for Direct Subsidized loans, you will be responsible for interest that accrues on your Direct Subsidized loans for the period when you meet the 150% limit. You can still be eligible to receive a Direct Unsubsidized Loan. You can check your Pell grant and Federal Stafford loans history at www.nslds.ed.gov.

III. FEDERAL PLUS LOANS:

- A. The dependent student must complete a current year FAFSA before the parent can apply for a Plus Loan.
- B. Annual Maximum Loan: Parents of dependent students may borrow up to the amount of unmet need per year for each undergraduate child attending School on at least a part-time basis.
- C. Fees and Interest Charges: The interest rate for the loans is 8.05%. Fees are 4.22% of the Loan.
- D. Application Process and Deadline: Students may apply for these loans any time up to six weeks before the end of the school year. It is strongly recommended however, that all students apply for all aid 60 days before school starts.
- E. The parent needs to complete a Plus Application and a Master Promissory Note go to www.studentaid.gov to complete.

OTHER SOURCES OF FINANCIAL AID:

In addition to these sources of aid, there are many private foundations and companies that offer aid. These sources are too numerous to list here but are compiled in a convenient report that is available in our library and may be photocopied. Alternative loan programs are also available for qualified students. Students can also search the Internet for other sources of financial aid through most common search engines. e.g. AOL, GOOGLE.COM, Bing etc.

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

STUDENT LENDING CODE OF CONDUCT

Roxborough Memorial Hospital School of Nursing, hereafter known as RMH/SON, is committed to providing students and their families with the best information and processing alternatives available regarding student borrowing. In support of this and in an effort to rule out any perceived or actual conflict of interest between RMH/SON officers, employees or agents and education loan lenders, RMH/SON officers, employees or agents and education loan lenders, RMH/SON has adopted the following:

- RMH/SON does not participate in any revenue-sharing arrangements with any lender.
- RMH/SON does not permit any officer, employee or agent of the school who is employed in the financial aid office or is otherwise involved in the administration of education loans to accept any gifts of greater than a nominal value from any lender, guarantor or servicer.
- RMH/SON does not permit any officer, employee or agent of the School who is employed in the financial aid office or is otherwise involved in the administration of education loans to accept any fee, payment or other financial benefit (including a stock purchase option) from a lender or affiliate of a lender as compensation for any type of consulting arrangement or contract to provide services to a lender or on behalf of a lender relating to education loans.
- RMH/SON does not permit any officer, employee or agent of the School who is employed in the financial aid office or is otherwise involved in the administration of education loans to accept anything of value from a lender, guarantor, or group of lenders and/or guarantors in exchange for service on an advisory board, commission or other group established by such a lender, guarantor group of lenders and/or guarantors. RMH/SON does allow for the reasonable reimbursement of expenses associated with participation in such boards, commissions or groups by lenders, guarantors, or groups of lenders and/or guarantors.
- RMH/SON does not assign a lender to any first-time borrower through financial aid packaging or any other means.
- RMH/SON recognizes that a borrower has the right to choose any lender from which to borrow to finance his/her education. RMH/SON will not refuse to certify or otherwise deny or delay certification of a loan based on the borrower's selection of a lender and/or guarantor.
- RMH/SON will not request or accept any offer of funds to be used for private education loans to students from any lender in exchange for providing the lender with a specified number or volume of Title IV loans, or a preferred lender arrangement for Title IV loans.
- RMH/SON will not request or accept any assistance with call center or financial aid office staffing.

FINANCIAL AID POLICY:

1. All first-time borrowers requesting a Federal Direct Loan must complete entrance counseling before any financial aid can be credited to their school account. Entrance counseling can be completed online at www.studentaid.gov.
2. Upon withdrawal or before graduation all students who received a Federal Direct Loan must have an exit interview. This interview is conducted with the Financial Aid Officer. The purpose of the interview is to make students familiar with their rights and obligations for the loans they took while a student and to apprise them of repayment schedules, grace periods, etc. Exit counseling must also be completed online at www.studentaid.gov.
3. Commitment of federal or state funds are made contingent upon the regulations of the individual program. Such funds are subject to annual legislative approval and are not, in any way, under the direct control of the School of Nursing. Signed affidavits are usually required on such matters as drug use and draft status.
4. Each applicant seeking financial aid must submit the FAFSA application before any aid can be awarded. In addition, you may be asked to verify your income and other financial information. Refusal to provide these documents will automatically prevent you from receiving any needs-based aid. Willfully false information on finances can lead to federal or state prosecution for fraud. The school is required by law to report cases of fraud to the Inspector General. In addition, the school may dismiss any student for fraud, as this is a direct violation of the student code of conduct.
5. Students are to report any change in address or name to the Financial Aid Office. All grants, scholarships or other financial aid must be reported to the Financial Aid Office as these awards may affect your eligibility for government appropriated funds.
6. Roxborough Memorial Hospital is dedicated to all qualified people regardless of their gender, race, religion, place of birth or origin, economic status, or sexual orientation.
7. The definition of an academic year for financial aid awarding is 900 clock hours or 24 credit hours.
8. All financial aid funds are made in two disbursements. The first at the start of the fall semester and the second at the start of the spring semester
9. Professional Judgment Policy:

Special circumstances can affect a student's financial aid situation, including a change in family circumstances, traumatic events, or reductions in income that may occur while the student is enrolled. This may result in the need to clarify the student's situation with the Financial Aid office.

Students and parents who require information regarding the Professional Judgement process should contact the Financial Aid office. Students and their families should be prepared to itemize the change in income and provide copies of all applicable documentation (IRS tax return transcripts, W2 forms, proof of marital separation, letter from former employer, etc.).

Request for Professional Judgment (Special Circumstances) consideration does not guarantee the receipt of new or additional financial aid.

FINANCIAL AID ENTRANCE AND EXIT COUNSELING POLICY

PURPOSE: To guide and direct students.

POLICY:

All Roxborough students are provided Entrance and Exit counseling regarding financial aid. Exit counseling is done prior to graduation or upon withdrawal from the program. Prior to the start of the program Entrance Counseling must be completed at www.studentaid.gov. Exit counseling is completed online at www.studentaid.gov. There is also a group exit counseling meeting prior to graduation.

Subsidized Direct Loan

- This is a need-based loan.
 - Interest on the loan is paid by the federal government while you are in School, during your grace period, and during authorized periods of deferment.
 - The interest rate is 5.5% effective 7/1/2023.
 - You must be enrolled at least halftime in an eligible program of study to qualify.
- Repayment begins six months after you are no longer enrolled on at least a half-time basis.

Unsubsidized Direct Loan

- This is not a need-based loan.
- You are responsible for paying all of the interest on your loan.
- The interest rate is a fixed rate of 7.05% effective 7/1/2023.
- You must be enrolled at least halftime in an eligible program of study to qualify.
- Repayment begins six months after you are no longer enrolled on at least a half-time basis.

Important!

It is **important** to remember that loans must be repaid even if you do not complete your education, are not employed upon completion of your studies, or feel that the education you received did not meet your expectations. Information about your rights and responsibilities will be provided by your financial aid counselor. Please review it carefully.

What is the Loan Agreement (Master Promissory Note) (MPN)?

Once you have decided to borrow money to finance your education, the Financial Aid Office at your School will verify your need for funds and provide you with instructions as to how to request a loan. Before you can receive the loan funds you must sign a Master Promissory Note. A Promissory Note is a binding legal document that you sign to indicate that you agree to repay your student loans. It must be signed by you before loan funds are disbursed by the lender. It lists the conditions under which you are borrowing and the terms for your repayment of the loan. The MPN is designed to be used a multi-year note. The multi-year feature means borrowers sign one MPN to receive maximum loan eligibility for all years of borrowing under the subsidized and unsubsidized Federal Direct Loan programs. The MPN simplifies the loan application process for borrowers and also serves to provide significant process improvements for schools. It is important that you thoroughly read and save this document for when you begin repaying your loan.

Who uses the MPN?

All borrowers may use the MPN for Federal Direct Loans. Roxborough Memorial Hospital School of Nursing uses the multi-year feature of the MPN. Only first year students need to complete the Direct Loan Master Promissory Note. The Master Promissory can be completed at www.studentaid.gov.

Do I have to accept the loan amount recommended?

Because our School uses the multi-year MPN, you will not have to reapply/request funds for each year. Your School will certify you for the maximum amount of loans dollars for which you are eligible. If you do not need/want the certified loan amount you will have the opportunity to reduce it via one or both of the following ways:

- A. The school will mail you a Financial Aid Award Letter listing out all of the aid for which you are eligible. If you wish to reject any of the awards, you need to indicate that on the award letter, sign the letter and return the award letter to the school.
- B. You will receive written notice of credit to account. You must request loan return/cancellation within 14 calendar days of the date that you receive the letter.

When is a new Loan Agreement (MPN) required?

Generally, a Multi-year promissory note is good for ten years.

PLUS Loan

- Dependent student must complete a FAFSA
- This is not a need-based loan.
- Parents borrow the money.
- The interest rate for the loans is 8.05%. Fees are 4.22% of the Loan.
- Repayment of a Direct PLUS Loan begins 60 days after the full amount you've borrowed for a School year has been disbursed. This means that you generally must begin repayment while your child is still in School. For Direct PLUS Loans with a first disbursement date that is on or after July 1, 2008, you may request that repayment be delayed while your child is enrolled at least half-time and during the 6-month period after your child graduates or is no longer enrolled at least half-time. If you would like to postpone repayment of your PLUS Loan based on your child's enrollment status, you must contact the Direct Loan Servicing Center.
- Parents applying for a Plus Loans must complete a Plus Application and a Plus Master Promissory Note at www.studentaid.gov

FEDERAL DIRECT LOAN LIMITS 2023-2024

Grade Level	Base Loan Amount Subsidized and Unsubsidized Loans	Additional Unsubsidized Eligibility for Dependent Students (Exclusive of dependent students whose parent(s) is not eligible to borrow a PLUS Loan)	Additional Unsubsidized Eligibility for Independent Students and Dependent Students whose parent(s) is not eligible to borrow a PLUS Loan
1 st Year Undergraduate	\$3,500	\$2,000	\$6,000
2 nd Year Undergraduate	\$4,500	\$2,000	\$6,000
3 rd , 4 th , 5 th Year Undergraduate	\$5,500	\$2,000	\$7,000
Graduate Students	Ø		\$20,500

Total Borrowing Allowed	Sum of Years
Dependent Undergraduate	\$31,000 of which no more than \$23,000 may be subsidized Stafford Loans
Independent Undergraduate	\$57,500 of which no more than \$23,000 may be subsidized Stafford Loans

*Or dependent student whose parents cannot borrow a PLUS loan. The amount an independent student or eligible dependent student can borrow under the unsubsidized Direct Loan Program during an academic year is (A) the amount indicated in the first column minus the subsidized loan amount for which the student is eligible, plus (B) the amount indicated in the second column.

Important! Important! Important!

It is important to remember that loan must be repaid even if you do not complete your education, are not employed upon completion of your studies, or feel that the education you received did not meet your expectations.

Once you are out of school, you will have to pay back the loan. It is important that you develop a budget and stick with it while you are in school. This will keep you from accumulating a large debt and allow you to manage your monthly student loan payments when you have finished school.

KEEPING TRACK OF YOUR LOAN

Keeping a detailed file of your loan paperwork is essential. This is important when the time comes to communicate with your School or servicer concerning any aspect of your loan. These organizations process thousands of documents and electronic data and rely on many administrative systems to record and retrieve your information. Keeping your paperwork up-to-date and readily accessible will ensure your official records are kept accurate.

When the time comes to begin loan repayment, your servicer offers several flexible repayment options to help you easily transition into repayment.

- Standard repayment is the traditional approach. Standard repayment requires a minimum monthly payment of \$50. The payment amount may be higher depending on your loan balance.
- Graduated repayment sets your payments to be smaller in the beginning of repayment and gradually increases in stages throughout the repayment period.
- Income-sensitive repayment adjusts your payment annually based on your gross income.

Everyone experiences financial difficulty at one time or another. Your lender understands this and therefore offers you several options that temporarily reduce or suspend your monthly payment.

A **deferment** is a period of time during which your lender temporarily suspends your regular payments. Types of deferments include Full-time student, unemployment, active duty status in the Armed Forces, full-time volunteer in approved programs, temporary total disability, internship or residency, parental leave, full-time teaching in shortage areas, and economic hardship.

The federal government will pay the accrued interest on your subsidized Stafford Loan during deferment. You are responsible for the interest on unsubsidized Stafford Loans.

Your lender must determine your eligibility for any of these deferments. In order to receive a deferment, you must request deferment from your lender, complete the form with all required documentation, and return it promptly to your lender.

Forbearance is a period of time during which your lender temporarily reduces or suspends your regular payments. You may request forbearance if you are willing but unable to make your payments. You may also request a forbearance to reduce your payment amount for a short period of time. Unlike deferments, you are responsible for the interest that accrues during the forbearance period. You may choose to pay the interest as it accrues or allow it to capitalize.

Capitalization of interest may result in a higher monthly payment upon conclusion of the forbearance. You need to contact your lender for more information on applying for forbearance.

If you become totally and permanently disabled or you die, your loan obligation will be cancelled.

Notify your servicer immediately if you anticipate difficulty making a payment. Failure to pay all or part of an installment payment when due can result in the addition of late charges. In addition, your servicer has the option, in some cases, to file a lawsuit against you for failure to make timely payments.

You must start paying back your student loan six months after you are out of School. Failure to do so will put you in **default**.

Defaulting on your student loan can result in:

- Damage to your credit rating.
- Garnishment of your wages.
- Withholding of your IRS refund.
- Lawsuit.
- Liability for court costs/legal expenses.
- Loss of deferment entitlements.
- Loss of eligibility for further financial aid.
- Referral of account to a collection agency.

There are three basic loan maintenance guidelines to follow:

- Inform your School and servicer of changes in your name, mailing address, telephone, or Social Security Number so that all correspondence is promptly directed to you.
- Read and keep all documents you receive pertaining to your student loan.
- If you're experiencing financial hardship and are unable to make your payments, call your servicer for information regarding possible temporary postponement or reduction of payments through a deferment or forbearance.

Loan consolidation is available after you have completed your educational program. This program enables you to combine loans from different lenders or services into one loan, with one interest rate and repayment schedule.

While loan consolidation can extend your repayment period and lower your monthly payments, the interest rate and total interest you pay on the loan may be greater than if you kept the loans separate.

Loan Servicer

Your loan may be sold to another servicer at any time during the life of the loan. If this happens, you will be notified in writing, and you must direct all future correspondence to the new lender.

HAVING PROBLEMS WITH YOUR LOANS?

Your first resource is the Financial Aid Office at the School you attended. Next would be the servicer who is servicing your loan. After you have exhausted these resources, if you are still unable to resolve your situation, the Department of Education, Office of Student Financial Assistance (OSFA) has an Ombudsman who works informally with student borrowers to resolve loan disputes and problems. Please use the following information to contact the FSA Student Loan Ombudsman Group.

Via on-line assistance: <http://studentaid.gov/repay-loans/disputes/prepare>.

Via telephone: 877-557-2575

Via Fax: 606-396-4821

Via Mail:

FSA Ombudsman Group
P.O. Box 1843
Monticello, KY 42633

TRACK YOUR FEDERAL LOANS AND GRANTS USING THE NSLDS STUDENT ACCESS WEBSITE.

What is the National Student Loan Data System (NSLDS)?

NSLDS is the U.S. Department of Education's (ED's) central database for student aid records. NSLDS provides a centralized, integrated view of your federal Title IV education loans and grants, tracking from when they're approved through when you pay off your loans.

What is the NSLDS Student Access Web site?

The NSLDS Student Access Web site was designed for student and parent borrowers to track and manage their federal student loans and/or grants. The site displays information on your loan and/or grant amounts, outstanding balances, loan status, and loan amounts you receive. Both student and parent borrowers can use it.

What is the Web site's address?

It's at <https://nsls.ed.gov>. You can use it 24 hours a day, 7 days a week. Sometimes database maintenance occurs during weekends or late-night hours; scheduled maintenance hours are posted ahead of time.

How do I access the NSLDS Student Access Web site?

To access the Web site, you key in:

- your Social Security Number (SSN),
- the first two letters of your last name,
- your date of birth, and
- your government-provided username and password.

These are your "identifiers."

What if I enter my identifiers but no data or wrong data appear?

Check to be sure you entered all your personal information correctly. If so, and you still have problems, call the Federal Student Aid Information Center at 1-800-4-FED-AID.

How secure is the NSLDS Student Access Web site? Very. The unique combination of SSN, username and password, and other personal information needed to access the Web site makes it as secure as using an automatic teller machine (ATM).

TUITION AND FEES FOR 2023-2024

Required Fees	Year I	Year II
*Tuition	\$13,846	\$14,792
*Matriculation (non-refundable)	300.00	
*Library	250.00	250.00
*Testing - ATI	1,512.50	1,512.50
*ACLS course- (book & card)		55.00
*Computer & Technical Maintenance Fee	300.00	300.00
*Activity Fee	150.00	150.00
*Graduation		350.00
*NSNA-SNAP (2-year membership)	80.00	
NSNA-SNAP (convention registration- paid directly to company)		50.00
Pearson VUE Registration (NCLEX -paid directly to company- estimate)		200.00
License by Examination (PA-paid directly to State Board of Nursing- estimate)		95.00
Uniforms (estimated –paid directly to company)	150.00	
Books (estimated –paid directly to company)	745.00	50.00
Lab Equipment Pack (paid directly to company)	136.00	
Health Requirements (paid directly to company)	200.00	100.00
Child Abuse Clearance (paid directly to company)	10.00	
FBI Fingerprinting (estimated-paid directly to company)	35.00	
Castle Branch (estimated- paid directly to company)	81.00	
Clinical Experience Makeup- scheduled for 4 hours or less (per occurrence if applicable)	50.00	50.00
Clinical Experience Makeup- scheduled for more than 4 hours but less than or equal to 8 hours (per occurrence if applicable)	100.00	100.00
Clinical Experience Makeup- scheduled for more than 8 hours but less than or equal to 12 hours (per occurrence if applicable)	150.00	150.00

***Payments are to be made using the SONIS system.**

The Matriculation Fee is non-refundable.

Tuition and Fees are subject to change. MasterCard, VISA, American Express and Discover Card are accepted.

Instruction for Payment

Semester tuition, as well as all fees are due two (2) weeks before the semester starts. No student will be admitted to class without clearance from the Financial Aid Officer. You will receive an invoice showing all financial aid and the balance that is due. **This balance must be paid two (2) weeks before the start of the semester.** The hospital complies with the Return of Title IV Funds Regulations issued on October 7, 2000.

Refund Policy

**It is the policy of Roxborough Memorial Hospital to provide fair and equitable refunds of institutional charges for students who withdraw from the diploma-nursing program. Effective January 1, 2005 the following policy is in effect:

Date of Withdrawal	Percent Refunded
2 weeks or less from the start of the first semester	80%
Between 2 and 3 weeks from the start of the first semester	60%
Between 3 and 4 weeks from the start of the first semester	30%
Over 4 weeks from the start of the first semester	No refunds
Second Semester	No refunds

The school reserves the right to change its curriculum, educational policies, and expenses at any time.
REASONABLE NOTICE WILL BE GIVEN.

TUITION REFUND POLICY

PURPOSE: To provide direction for all students.

POLICY:

This policy applies to tuition and fees for the School of Nursing.

It is the policy of Roxborough Memorial Hospital to provide fair and equitable refunds of institutional charges for students who withdraw from the diploma-nursing program. Effective January 1, 2005, the following policy is in effect:

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Over 4 weeks from the start of the first semester	No refunds
Second Semester	No refunds

Official Withdrawal

To officially withdraw from the school, a student must provide a written Letter of Withdrawal to the Dean of Education within five working days of the last day they attended classes. The letter must state the last day of attendance in the program. The letter must be dated and signed by the student. Students should keep a copy of this letter for their own records. A sample Letter of Withdrawal is provided in this policy. This letter serves to document the correct actual last day of attendance and could affect the amount of the refund.

Unofficial Withdrawal

An unofficial withdrawal occurs if a student leaves the program without providing the school a Letter of Withdrawal. In such cases, the school is required to use the last documented day of attendance as the legal date of withdrawal. Any student that does not provide official notification of his or her intent to withdraw and is absent for more than 2 consecutive calendar days of absence, will be subject to termination and considered to have officially withdrawn.

Return of Title IV Financial Aid When a Student Withdraws from the Program

The law specifies that RMH must determine the amount of Title IV program assistance that you earn if you withdraw from school. The Title IV programs that are covered by this law are Federal Pell Grants, Direct Loans and Direct PLUS Loans.

Though your aid is posted to your account at the start of each payment period, you earn the funds as you complete the payment period. If you withdraw during your payment period, the amount of Title IV program assistance that you have earned up to that point is determined by a specific formula. If you received (or your school or parent received on your behalf) less assistance than the amount that you earned, you may be able to receive those additional funds in the form of a post-withdrawal disbursement. If you received more assistance than you earned, the excess funds must be returned by the school and/or you.

The amount of assistance that you have earned is determined on a pro rata basis. For example, if you completed 30% of your payment period, you earn 30% of the assistance you were originally scheduled to receive. Once you have completed more than 60% of the payment period you earn all the assistance that you were scheduled to receive for that period.

If you did not receive all the funds that you earned, you may be due a post-withdrawal disbursement. If your post-withdrawal disbursement includes loan funds, your school must get your permission before it can disburse them. You may choose to decline some or all of the loan funds so that you do not incur additional debt. Your school may automatically use all or a portion of your post-withdrawal disbursement of grant funds for tuition and fees. The school needs your permission to use the post-withdrawal grant disbursement for all other institutional charges. If you do not give your permission, you will be offered the funds. Grants will be disbursed within 45 days. Loans will be offered to a student within 30 days, allowing the student at least 14 days to respond to accept or decline the funds. However, it may be in your best interest to allow the school to keep the funds to reduce your debt at the school. Any credit balance will be disbursed as soon as possible and no later than 14 days after the calculation of Title IV withdrawal calculation.

There are some Title IV funds that you were scheduled to receive that cannot be disbursed to you once you withdraw because of other eligibility requirements. For example, if you are a first-time, first-year undergraduate student and you have not completed the first 30 days of your program before you withdraw, you will not receive any Direct Loan funds that you would have received had you remained enrolled past the 30th day.

If you receive (or your school or parent receive on your behalf) excess Title IV program funds that must be returned, your school must return a portion of the excess funds equal to the lesser of:

1. your institutional charges multiplied by the unearned percentage of your funds, or
2. the entire amount of excess funds

The school must return this amount even if it did not keep this amount of your Title IV program funds.

If your school is not required to return all of the excess funds, you may be required to return the remaining amount.

For any loan funds that you must return, you (or your parent for a Direct PLUS Loan) will repay the loan funds in accordance with the terms of the promissory note. That is, you will not be required to repay any loan funds immediately, but instead, you will make scheduled payments to the holder of the loan over a period of time.

Any amount of unearned grant funds that you must return is called an overpayment. The maximum amount of a grant overpayment that you must repay is half of the grant funds you received or were scheduled to receive. You do not have to repay a grant overpayment if the original amount of the overpayment is \$50 or less. You must make arrangements with your school or the Department of Education to return the unearned grant funds.

The requirements for Title IV program funds when you withdraw are separate from any refund policy that your school may have. Therefore, you may still owe funds to the school to cover unpaid institutional charges. Your school may also charge you for any Title IV program funds that the school was required to return. If you do not already know your school's refund policy, you should ask your school for a copy. Your school can also provide you with the requirements and procedures for officially withdrawing from school.

RMH will return to the Federal fund programs any unearned portion of the Title IV funds for which the school is responsible within 45 days of the last date of academic attendance as determined by attendance records and note return on the student's account card. The student will be provided with of copy of the Return to Title IV Calculation Worksheet.

Return to Title IV funds are allocated in the following order:

- Unsubsidized Federal Direct Loans
- Subsidized Direct Loans
- Federal Parent Loans
- Federal Pell Grant

Time frame for returning an unclaimed Title IV, HEA Credit balance. RMH will attempt to disburse the credit balance by check if check is not cashed, the school must return the funds no later than 240 days after the date the school issued the check. If a check is returned to the School, the School will make additional attempts to disburse the funds provided that those attempts are made not later than 45 days after the funds were returned. RMH will cease all attempts to disburse the funds and return them no later than 240 days after the date it issued the first check.

SAMPLE: LETTER OF WITHDRAWAL

I, (student's name), do hereby formally withdraw from the Roxborough Memorial Hospital School of Nursing. My last day of attendance was (date).

Signed: _____ Date: _____

Printed name: _____

*Copies must be submitted to the Dean of Education, Recruitment and Admissions Coordinator Services and Financial Aid Officer.

SATISFACTORY ACADEMIC PROGRESS

Minimal Standards for Satisfactory Academic Progress for Financial Aid Applicants

Federal regulations require that an institution establish, publish, and apply reasonable standards for measuring whether a student who is otherwise eligible for aid, is maintaining satisfactory academic progress in his or her course of study. The standards must be the same or stricter than the institution's standards for a student enrolled in the same academic program who is not receiving financial aid. In light of this federal requirement and existing Roxborough Memorial Hospital Grading Policy, which is outlined in detail in the student Handbook, listed below is the statement of Minimum Standards for Satisfactory Academic progress for financial aid recipients.

Financial Aid Satisfactory Academic Progress (SAP)

To receive financial aid a student must meet the Financial Aid Satisfactory Academic Progress (SAP) standard requirements at the end of each term.

The Financial Aid Satisfactory Academic Progress (SAP) policy, as required by federal regulation, is written to measure its standards as strict as the school's academic progress standards for the Nursing Program. The SAP standards are:

- **Cumulative Grade Point:** must maintain a cumulative grade average (GPA) of at least 77% (C) throughout the entire program. That is, a student must complete all courses with a grade of 77% (C) or better.
- **Cumulative Completion Rate:** must maintain a 100% completion rate throughout the entire program.
- **Maximum Time Frame:** must complete the program of study within three (3) calendar years of the student's original start date.
- **Transfer credits are not accepted.**

Student Academic Progress Failure

1. Student Academic Progress will be measured at the end of each semester and is posted in Sonis after the final semester exam.

2. If a student has failed SAP they are notified via a certified letter from the Dean within 14 days of final semester exam.

3. If a student does not successfully complete the semester with a grade of 77% or better, they are not considered to be making Satisfactory Academic Progress (SAP) for Financial Aid purposes and are no longer eligible for Federal Funds.

4. A student is eligible to appeal a SAP failure but will repeat a semester at their own expense. When a student successfully repeats the semester with a grade of 77% or higher, they will then be making Satisfactory Academic Progress (SAP) and will be eligible to receive Federal financial aid funds. In the instance that the appeal requirements are not met a student cannot repeat a course.

5. All required Financial Aid Paperwork must be completed before aid can be reinstated. If a student has failed SAP they are not eligible to appeal (apply for re-entry) unless they meet SAP appeal policy requirements.

INCOMPLETE, WITHDRAWN AND REPEATED GRADES REGARDING SAP

A. Students are expected to complete all required course work within the semester.

B. In rare circumstances, a temporary grade of Incomplete (I) is given to a student who has not been able to complete the required work in a course or has withdrawn from the program. The student must complete the work within two weeks after the end of the course; otherwise, the Incomplete items (I) will become an F and will be averaged into the overall GPA. Extensions may be granted at the discretion of the Dean of Education in consultation with the Academic Coordinator.

C. An exception to the two-week completion time occurs in N400 with the ATI Virtual Course requirements (see NCLEX Success Policy).

D. A student receiving an Incomplete will not graduate with an "I" on the transcript. The incomplete grade is not counted in the overall GPA for the semester. The attempted credit hours for the Incomplete grade are included in the student's overall SAP quantitative completion measurement.

E. A grade of Withdrawn (W) is not counted in overall GPA for the semester; however, the attempted credit hours for withdrawn (W) grades are included in the students overall SAP quantitative measurement.

F. In the instance from the appeal approval where the repeat course requirements are not met, the student is placed on probation for the next semester. Repeated course grades are accumulated into GPA once semester is completed, and previously recorded grades are no longer calculated into total. The attempted credit hours for repeated attempts are included in the overall SAP quantitative measure of completion.

STUDENTS APPEALING SAP FAILURE (Re-Entry Policy)

PURPOSE: To facilitate students' reentry into the program after SAP failure

POLICY:

1. Any student who failed a nursing course may only appeal for reentry to the program once and only once when the following criteria occurs:

- A. No violation of academic integrity or professional conduct during their time in the program.
- B. No clinical failure.
- C. A grade between 75.0 to 76.4 in school created exams only. This includes math exams.
 - i. This excludes all homework assignments and any standardized testing.
 - ii. Please note, math exams and course exams are weighted differently.
- D. If a student failed a previous nursing program, they are not eligible for reentry.
- E. Students that do not complete the Virtual ATI program will not be eligible for reentry

(See NCLEX Success Plan Policy)

F. Student Must Request in Writing:

i. A written statement sent to Admissions from the student explaining why they failed to make SAP and what has been resolved to pass SAP. Statement must be received within 14 days of receipt of Dean's letter. Supporting documentation (examples: letters from professors, medical documentation, ect.) will be reviewed by the Admissions Committee. Students are informed via letter from Admissions that they are re-admitted into the program within 30 days of receipt of statement.

G. Appeal circumstances are reviewed on a case by case basis and may include but are not limited to:

- i. A student becomes seriously ill
- ii. Student is severely injured
- iii. Student's relative dies

2. Probation Policy

A. Student is considered on a probationary status while repeating a course for one semester. Once course is completed with a grade of 77% or higher a student is determined off probation and considered passing SAP. Financial Aid will then be re-instated when student is considering passing SAP

REQUIREMENTS FOR RE-ADMISSION OF A STUDENT WHO WITHDREW PASSING THE COURSE

- A. The student must be in good standing
 - i. good standing is defined as no violation of academic integrity or professional conduct during their time in the program.

- B. If withdrawal was for any reason other than a medical cause, the letter requesting return must be submitted to the Recruitment and Admissions Coordinator at least eight weeks prior to the start of the course.

- C. Include in the request to return:
 - i. A written statement that the original circumstances requiring the withdrawal have been resolved.
 - ii. Indications of readiness to return and factors which may influence the student's success in completing the program.

- D. Requests for return received beyond the designated period will be reviewed at the discretion of the Faculty Organization Committee.

- E. Students that withdrew passing the course in good standing must return in the beginning of the course in which they did not complete.

- F. A grade of "W" will not be issued. Incomplete assignments must be repeated upon re-entry to the course.

- G. Student will continue receiving Financial Aid

**INFORMATIONAL GUIDE FOR
STUDENT SECURITY
& WELFARE**

OVERVIEW

Roxborough Memorial Hospital is committed to providing a safe and secure environment for its employees and students. Because no campus is isolated from crime, the school has developed this brochure to provide an overview of the Hospital's safety and security program.

Population of Roxborough Memorial Hospital, School of Nursing

ADMINISTRATION	1
FACULTY (Full Time)	5
(Part Time)	3
(Adjunct)	20
SUPPORT	9
TOTAL STUDENTS ENROLLED	137

NOTE: Since the School of Nursing is part of Roxborough Memorial Hospital, references to "Hospital property" are understood to include both the Hospital proper and the school.

WHO IS RESPONSIBLE FOR SECURITY AT THE SCHOOL OF NURSING?

The Hospital's Public Safety Director oversees the hospital and School campus and investigates any conduct in violation of the hospitals and School's policies. The director can be reached at extension #6857. There are 11 Public Safety officers on staff. These Officers are uniformed with the exception of the Director. All Public Safety Officers have had a thorough character and work background investigations and have no police record, as verified by a Pennsylvania State Police. Roxborough Memorial Hospital Public Safety Officers have the authority to ask persons for identification and to determine whether individuals have lawful business at Roxborough Memorial Hospital. Roxborough Memorial Hospital Public Safety Officers do possess arrest powers. Major incidents are referred to the Philadelphia Police Department and State Police if appropriate.

All crime victims and witnesses are strongly encouraged to immediately report any crimes to the Roxborough Memorial Hospital Public Safety Department and the Philadelphia Police Department. Prompt reporting will assure timely warning notices on-campus and timely disclosure of crime statistics.

Additionally, the School of Nursing is monitored 24 hours-a-day, seven days a week with a CCTV system that stores all information for 90-days. The monitor is located at the front desk and 8 cameras are located throughout the building.

WHAT IS THE PROCEDURE FOR STUDENTS OR OTHERS FOR REPORTING CRIMINAL ACTIONS OR OTHER EMERGENCIES WHICH OCCUR ON CAMPUS, AND HOW DOES THE HOSPITAL RESPOND TO SUCH REPORTS?

Students, faculty and staff should report all crimes to the Hospital Public Safety Department by immediately calling extension 333 or by dialing "0" and asking to have Public Safety dispatched. Officers will respond to the scene and complete an incident report. With victim's consent, Public Safety will contact the Philadelphia Police Department. The Police Department will respond and file their report. If an **EMERGENCY** occurs and Officers are needed, the operator is to be called at 333 and told "Dr. Sam at the School of Nursing". A team will immediately respond to that call. However, if there is a crime in progress you are encouraged to call 333 & 911 first to have Public Safety and Philadelphia Police Department dispatched. Remember your safety and the safety of the other students is paramount, do not take unnecessary chances, if you feel something is out of place or wrong, Dial 333.

WHAT IS ROXBOROUGH MEMORIAL HOSPITAL'S POLICY ON TIMELY WARNINGS?

In the event that a situation arises either at the School of Nursing or at the Hospital that, in the judgment of the Public Safety Director, constitutes an ongoing or continuing threat, a hospital wide "Timely Warning" will be issued. The warning will be issued through the Hospital e-mail System to students, faculty and staff and posted on the textbook platform for students and faculty.

Anyone with information warranting a Timely Warning should report the circumstances to the Public Safety Director by phone 215-509-6857 or the Operator at 333.

WHAT IS ROXBOROUGH MEMORIAL HOSPITAL'S POLICY RELATING TO POSSESSION, USE OR SALE OR DISTRIBUTION OF ALCOHOLIC BEVERAGES AND ILLEGAL DRUGS?

No alcoholic beverages or illegal drugs are permitted on the School of Nursing campus at any time. The use of alcohol or illegal drugs and the misuse of legal therapeutic drugs by students or Hospital employees while on Hospital property or while participating in any School related activity are strictly prohibited. For more information on the Drug-Free School Policy, refer to the Student Handbook.

If any student has information on illegal drug sales or usage on campus, you can contact the Philadelphia Police Departments Narcotics Field Unit (North) anonymously at 215-685-1127, or refer to Roxborough Memorial Hospital's Security Policy Handling and Disposal of Controlled Substances – Policy # RXHSD-033. The hospital security and safety manual is kept at the receptionist desk.

WHAT IS ROXBOROUGH MEMORIAL HOSPITAL'S POLICY ON POSSESSION AND USE OF WEAPONS BY HOSPITAL PERSONNEL OR ANY OTHER PERSONS?

With the exception of on-duty law enforcement personnel, all persons are prohibited from possessing or using weapons on Hospital property. Please refer to Roxborough Memorial Hospital's Security Policy – Weapons Employees/Visitors Police, which can be found in the Company Policy/Procedure Manual.

WHAT IS ROXBOROUGH MEMORIAL HOSPITAL SCHOOL OF NURSING'S POLICY WITH REGARD TO ANY STUDENTS WHO HAVE PREVIOUS CRIMINAL RECORDS?

Both federal as well as state background investigations are conducted for students. This policy is found in the School of Nursing Student Handbook.

Students are required to sign an affidavit each year attesting that they have never been convicted of a felony.

WHAT SECURITY CONSIDERATIONS DOES ROXBOROUGH MEMORIAL HOSPITAL FOLLOW FOR THE REPAIR AND UPKEEP OF CAMPUS FACILITIES, INCLUDING OUTDOOR LIGHTING, GROUNDSKEEPING AND LANDSCAPING?

Roxborough Memorial Hospital facilities and grounds are maintained so as to avoid or minimize hazards of any sort. Malfunctioning lights and other unsafe conditions are reported immediately to the Hospital Facility Maintenance Department for correction, repair, or replacement at extension 4292.

HOW DOES ROXBOROUGH MEMORIAL HOSPITAL INFORM THE SCHOOL OF NURSING COMMUNITY ABOUT SECURITY MATTERS?

Students receive a presentation on security measures during orientation. Additional details concerning student and facility regulations are included in the Student Handbook, which is updated annually. Brochures concerning safety are available to the Hospital and School community.

The Director of Public Safety is responsible to provide timely warnings in response to any security matters that may affect the School of Nursing Community. A weather related or Emergency Management notification are sent via a blast email on the Prime Healthcare email system. All students are issued a Prime Healthcare email address upon the start of the program. In addition, emergency notifications of events that may affect the hospital campus including the school follow the procedures set forth in the Roxborough Memorial Hospital Disaster Plan.

SCHOOL OF NURSING BUILDING INFORMATION

School hours during the academic year (unless otherwise posted):

Monday: 8:00am to 6:30pm

Tuesday, Wednesday and Thursday:
8:00am to 8:30pm

Friday: 8:00am to 3:00pm

Weekends: 8:00am-4:00pm

During those times School personnel cover the facility. In addition, Hospital Officers check the school as part of their regular evening and nighttime rounds.

Access to the School of Nursing building is through the front door, which is locked at all times. The door lock is released at the front desk. Other doors in the school serve primarily as emergency exits and cannot be opened from the outside without a key. Exit doors directly accessible to students have an audible alarm, which sounds whenever a door is opened. The ground level exit doors on Jamestown Street are also covered from the front desk by continuous camera surveillance.

All visitors must sign a logbook upon entering and leaving the building. Any visitor who violates any regulation relevant to the conduct of visitors will be asked to leave.

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING
SEXUAL ASSAULT PREVENTION AND RESPONSE POLICY**

Roxborough Memorial Hospital realizes the seriousness of sex offenses. For information on sex offences, including rape, acquaintance rape, and other forcible and non-forcible sex offences, students and staff can access the following websites:

Women Organized Against Rape (WOAR) www.woar.org

24-hour Hotline: 215-985-3333

Pennsylvania Coalition Against Rape (PCAR) www.pcar.org

Toll Free Hotline: 1-888-772-7227

If you are a victim of sexual assault at this institution, your first priority should be to get to a place of safety. You should then obtain necessary medical treatment.

Victims of sexual assault are to report the incident in a timely manner to the Director of Safety and Security at extension #6857. Timely reporting is a critical factor for evidence collection and preservation. The Director of Safety and Security can assist you in contacting the Philadelphia Police Department.

Notifying the Director of Safety and Security does not obligate the victim to report to the police and prosecute.

If you decide to report to the police, you can call 911 or the Special Victims Unit at 215-685-3251 or 215-685-3271. Filing of a police report will:

- Ensure that a victim of sexual assault receives the necessary medical treatment and tests, at no expense to the victim.
- Provide the opportunity for collection of evidence helpful in prosecution, which cannot be obtained later (ideally a victim of sexual assault should not wash, douche, use the toilet, or change clothing prior to a medical/legal exam)
- Assure the victim has access to free confidential counseling from counselors specifically trained in the area of sexual assault crisis intervention.

The school also has a Part-Time Counselor, Dr. Jana Mallis, who is available to counsel students and can be contacted at 215-284-3646.

Confidential Reporting Procedures:

If you are the victim of a crime and do not want to pursue action within the criminal justice system, you may still want to consider making a confidential report. With your permission, the School of Nursing can file a report on the details of the incident without revealing your identity. The purpose of a confidential report is to comply with your wish to keep the matter confidential, while taking steps to ensure the future safety of yourself and others. With such information, the school can keep an accurate record of the number of incidents involving students, determine where there is a pattern of crime with regard to a particular location, method, or assailant, and alert the campus community to potential danger. Reports filed in this matter are counted and disclosed in the annual crime's statistics for the institution.

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

POLICY STATEMENT ADDRESSING SEX OFFENDER REGISTRATION

In accordance with the “Campus Sex Crimes Prevention Act” of 2000 RMH/SON is providing a link to the Pennsylvania Sex Offender Registry. The link is <http://www.pameganslaw.state.pa.us>. This Act became effective on October 25, 2002.

The Sex Crimes Prevention Act requires institutions of a higher education to issue a statement advising the school community where law enforcement information provided by a State concerning registered sex offenders may be obtained. Unlawful use of the information for purposes of intimidating or harassing another is prohibited and violation is punishable as a class 1 misdemeanor.

CRIME ANALYSIS*

[Information provided by the Philadelphia Police Department]

5TH DISTRICT 2023 (as of June 2023)

INCIDENT SECTION								
Violent Crime	LAST TWO WEEKS		LAST 28 DAY PERIOD			YEAR TO 06/18		
	Week 24	Week 25	(04/24/2023 to 05/21/2023)	(05/22/2023 to 06/18/2023)	% Change	2022	2023	% Change
Homicide	0	0	0	0	0.00%	2	0	-200.00%
Rape	0	0	0	0	0.00%	6	3	-50.00%
Robbery/Gun	0	0	1	2	100.00%	6	5	-16.67%
Robbery/Other	0	0	0	0	0.00%	15	7	-53.33%
Aggravated Assault/Gun	2	1	2	3	50.00%	4	11	175.00%
Aggravated Assault/Other	1	0	4	3	-25.00%	24	17	-29.17%
TOTAL VIOLENT CRIME OFFENSES	3	1	7	8	14.29%	57	43	-24.56%
Property Crime	Week 24	Week 25	(04/24/2023 to 05/21/2023)	(05/22/2023 to 06/18/2023)	% Change	2022	2023	% Change
Burglary/Residential	4	2	10	11	10.00%	35	40	14.29%
Burglary/Commercial	0	1	4	5	25.00%	25	24	-4.00%
Theft of Motor Vehicle Tag	1	1	3	5	66.67%	9	17	88.89%
Theft from Person	0	0	1	0	-100.00%	2	3	50.00%
Theft from Auto	13	7	52	48	-7.69%	200	290	45.00%
Theft	5	7	18	31	72.22%	109	115	5.50%
Retail Theft	1	2	26	7	-73.08%	66	88	33.33%
Stolen Autos	13	8	24	38	58.33%	69	158	128.99%
TOTAL PROPERTY CRIME OFFENSES	37	28	138	145	5.07%	515	735	42.72%
TOTAL PART ONE OFFENSE	40	29	145	153	5.52%	572	778	36.01%

5TH DISTRICT 2021 (as of July 2022)

Violent Crime	2020	2021	% Change
Homicide	1	2	100%
Rape	10	10	0.00%
Robbery/Gun	5	19	280.00%
Robbery/Other	20	14	-30.00%
Aggravated Assault/Gun	16	18	12.50%
Aggravated Assault/Other	51	31	-39.22%
Total Violent Crime Offenses	103	94	-8.74%
Property Crime	2020	2021	% Change
Burglary/Residential	56	91	62.50%
Burglary/Commercial	60	36	-40.00%
Theft of Motor Vehicle Tag	25	31	24.00%
Theft from Person	4	5	25.00%
Theft from Auto	293	499	70.31%
Theft	216	228	5.56%
Retail Theft	104	109	4.81%
Auto Theft	96	116	20.83%
Total property Crime Offenses	854	1115	30.56%
Total Part One Offense	957	1209	26.33%

* These statistics are given on the entire district, not just the hospital sector.

**Updated statistics were not available at time of posting.

ADDITIONAL SAFETY AND SECURITY POLICIES LOCATED IN HOSPITAL POLICY BOOK

Complete and detailed School policies are found in the Student Handbook. Additional hospital policies that the school abides by are on the hospital intranet homepage.

- Theft Control
- Bomb Threats
- Serving of Subpoenas and Warrants
- Safety and Parking Regulations
- Handling and Disposing of Controlled Substances
- Code Red
- Fire Drills
- Hospital Disaster Plan

For additional information, please contact:

Thierry Davis
(215) 487-6857

Security Department
REV. 7/22, 7/21; 6/20; 8/19;7/18; 6/13; 6/12; 7/11; 7/10; 7/09

GLOSSARY

GLOSSARY OF TERMS USED BY THE FACULTY

Accrediting Commission for Education in Nursing (ACEN) – The organization which establishes Standards and Criteria through which the School of Nursing regularly performs self-evaluation for educational equality. Program accreditation is based on resources invested, processes followed and results achieved. This organization also serves as the gatekeeper for Title IV-Higher Education Act programs, programs administered by the Department of Education and/or other federal government agencies.

Action Plan – An individualized plan of remedial and tutorial assistance to address the remediation and learning needs of a student to attain Learning Outcomes.

Asynchronous Interactions- Those that do not depend on time and place. For example, email, threaded discussion forums, and archived video and audio streams.

Attrition – The reduction or decrease in the number of students admitted to the School of Nursing for academic, financial or personal reasons.

Best Practices – According to Nelson (2014), “best practice is more than practice based on evidence. It represents quality care which is deemed optimal based on a prevailing standard or point of view. Specific best practices in nursing are significant because they serve to direct nurses regarding solutions to identify problems/needs”.

Client- One who receives the attention, advice, and services from a professional (Taber’s Medical Dictionary, 2021).

Clinical Experiences – Instructional activities with patients across the lifespan that aid in the achievement of the student learning outcomes and program outcomes. Clinical experiences are supervised by qualified faculty who provide feedback in the support of learning. Clinical experiences may include (but are not limited to) traditional hospital or outpatient settings, laboratory or simulation activities.

Clinical Judgement- According to Betts et al (2019), “Clinical judgement is a combination of critical thinking and decision-making skills that is based on a solid foundation of basic professional medical knowledge, in this case with respect to nursing knowledge.”

Clock Hour- A period of time consisting of (1) a 50-60 minute class or lecture in a 60 minute period; or (2) a 50-60 minute faculty supervised laboratory in a 60 minute period (U.S. Department of Education, 2021).

Communication/Leadership - Verbal and non-verbal messages used to convey information and build relationship, clinical coordination and management of care, priority setting, time management, conflict resolution and team work.

Communities of Interest – Persons, groups, agencies, and/or organizations that influence the mission, services, and outcomes of the nursing education unit. Examples include students, graduates, healthcare employers, governing organizations, state regulatory agencies and the public.

Concepts - A general notion, idea or thought, i.e., content areas integrated throughout the nursing courses, application simple to complex.

Course – Specific content to be studied within each semester to meet specific objectives.

Credit Hour- A credit hour is an amount of student work defined by an institution, as approved by the institution’s accrediting agency or State approval agency, that is consistent with commonly accepted practice in postsecondary education and that— (1) Reasonably approximates not less than— (i) One hour of classroom or direct faculty instruction and a minimum of two hours of out-of-class student work each week for approximately fifteen weeks for one semester or trimester hour of credit, or ten to twelve weeks for one quarter hour of credit, or the equivalent amount of work over a different period of time; or (ii) At least an equivalent amount of work as required in paragraph (1)(i) of this definition for other academic activities as established by the institution, including laboratory work, internships, practica, studio work, and other academic work leading to the award of credit hours; and (2) Permits an institution, in determining the amount of work associated with a credit hour, to take into account a variety of delivery methods, measurements of student work, academic calendars, disciplines, and degree levels. (U.S. Department of Education, 2023).

Criteria – Statements that identify the variables that are examined and evaluated in a standard.

Critical Thinking – The process of analyzing and understanding how and why we reach a certain conclusion by examining data, gathering information from the literature, organizing observations, and drawing upon past experience.

Cultural Competence – Ability to recognize and respect cultural differences and the willingness to work with those differences in order to provide meaningful patient care.

Culture - The totality of socially transmitted behavioral patterns, arts, beliefs, values, customs, and lifeways and all other products of human work and thought characteristics of a population of people that guide their worldview and decision-making.

Curriculum – Course offerings that make up the Program of Study.

Dean of Education – See Nurse Administrator

Default Rate – The rate of student borrowers who fail to remain current on their loans.

Diploma Program – Prepares technical nurses who provide direct patient care in a variety of settings. The curriculum is designed to be completed in 3 years or less and provides an emphasis on clinical practice (Billings & Halstead, 2019).

Disease Prevention – Actions, interventions to reduce health threats prior to disease onset.

Distance Technology – Instructional methods which include one way or two way transmissions. General as well as specific course information is shared via online platforms.

Due Process – A decision making procedure that is based on published rules of procedure and is free of improper influence.

End-of-program Student Learning Outcomes– The expected measurable levels of graduate performance that integrate knowledge, skills and abilities. Competencies include specific knowledge areas, clinical judgments, and behaviors based upon the role and/or scope of practice of the graduate nurse.

Evaluation and Promotion- See Policy for Evaluation and Promotion.

Evidence-based Nursing Care/Practice – The provision of nursing care to individuals, groups and communities that evolves from the systematic integration of research findings related to a particular clinical problem. Intervention strategies are designed based on the evidence garnered through research, questions are raised about clinical practices that lead to new research endeavors, and the effectiveness of interventions are systematically evaluated in an effort to continually improve care.

Evidence-based Teaching Practice – Using systematically-developed and appropriately-integrated research as the foundation for curriculum design, selection of teaching/learning strategies, selection of evaluation methods, advisement practices, and other elements of the educational enterprise.

Expected Level of Achievement – The measurable index that reflects a desired outcome.

Faculty Development – Activities that facilitate faculty maintenance or enhancement of expertise including certification, continuing education, formal advanced education, clinical practice, research, publications, and other scholarly activities.

Faculty Handbook – Guidelines and policies needed by the faculty to effectively execute the program.

Faculty – Instructor – Used interchangeably. Person who engages students both in a teaching and/or evaluative manner.

Faculty Workload – Average number of hours that reflect the manner in which faculty responsibilities are completed over the course of the year. Categories include student contact hours, faculty organizational activities, community activities, continuing education, preparation and evaluation, and miscellaneous.

Grievance – A procedure which provides prompt, non-discriminatory settlement of differences that a student may have with other students or the faculty. This will be characterized as academic or nonacademic.

Governing Organization – Prime Healthcare Services, headquartered in Ontario, California, manages and oversees Roxborough Memorial Hospital and the School of Nursing.

Health – A continuum of wellness and illness; dynamic and ever changing state.

Health Education – Developing and providing instruction, learning experiences to facilitate health in individuals, families, and groups.

Health Promotion – Any program that fosters improvement in an individual's or a community's health and well-being. It includes formal education for patients, behavior modeling by influential people or community leaders, and mass media/communications.

Holism - Man is composed of biological, psychological, social, cultural, and spiritual needs which must be met to maintain equilibrium.

Hospital-based Program – Used interchangeably with diploma program.

Job Placement Rate – The number of graduates employed in a position as a registered nurse, one year after graduation.

Leadership- The ability to inspire others to achieve a desired outcome. In the clinical setting, this includes but is not limited to clinical coordination and management of care, priority setting, time management, conflict resolution, and team work (Assessment Technology Institute, 2019).

Life Cycle – Processes that occur from conception through senescence.

Mandatory Education – An on-line enrichment program. There may be mandatory modules for employees and students to complete that are assigned. Employees and students are able to take a wide variety of courses at their own convenience, at their own pace, at work or home, via the internet.

Mission / Philosophy – The governing organization and School of Nursing’s statement that designates fundamental beliefs and characteristics and provides guidance and direction of the program.

National League for Nursing (NLN) Competencies – Core values established by the NLN which are integrated throughout the program.

- Human Flourishing – Advocate for patients and families in ways that promote their self-determination, integrity and ongoing growth as human beings.
- Nursing Judgment – Make judgments in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care and that promote the health of patients within a family and community context.
- Professional Identity – Implement one’s role as a nurse in ways that reflect integrity, responsibility, ethical practices, and an evolving identity as a nurse committed to evidence-based practice, caring, advocacy, and safe, quality care for diverse patients within a family and community context.
- Spirit of Inquiry – Examine the evidence that underlies clinical nursing practice to challenge the status quo question underlying assumptions, and offer new insights to improve the quality of care for patients, families, and communities.

Non-attendance- A failure to attend or be present at a place where you are expected to be.

Non-Traditional Student – An individual who enters nursing as a second career and/or has a previous degree in another profession.

Nurse Administrator (Dean of Education) – Holds the overall administrative responsibilities for the School of Nursing; who reports directly to the Chief Executive Officer (CEO) of the hospital.

Nursing – Process of assisting an individual, family or community in the performance of those activities contributing to health or its recovery.

Nursing 100 – Foundations of Nursing

Nursing 200 – Medical/Surgical Nursing I & Mental Health Nursing

Nursing 300 – Medical-Surgical Nursing II

Nursing 400 – Management of Care

Nursing Education – A cooperative dynamic process involving mutual teaching and learning that promotes the development of both students and faculty.

Nursing Process – Form of problem-solving used to plan and organize care; consists of five steps: assessment (recognize cues), analysis (analyze cues), planning (prioritize hypothesis and generate solutions), implementation (take actions) and evaluation (evaluate outcomes) (Betts et al., 2019).

Pedagogical Research – Systematic inquiry into all aspects of the teaching/learning process, including how students learn, effective teaching strategies, effective assessment or evaluation methods, curriculum design and implementation, program outcomes, learner outcomes, environments that enhance learning, and other components of the educational enterprise.

Performance on NCLEX – The NCLEX examination is developed by the National Council of State Boards of Nursing to test minimum competencies of graduate nurses. First time candidates rate of successful passing will be used as an evaluation tool.

Population-based Health Care – A population health perspective encompasses the ability to assess the health needs of a specific population; implement and evaluate interventions to improve the health of that population; and provide care for individual patients in the context of the culture, health status, and health needs of the populations of which the patient is a member.

Prerequisite Course – A course that is required prior to admittance in the School of Nursing or progression to the next course within the School of Nursing.

Professional Standards – A set of standardized guidelines utilized in the evaluation of students throughout the curriculum. These include but are not limited to:

- Pennsylvania Nurse Practice Act
- The American Nurses' Association Code of Ethics
- The American Nurses' Association Scope and Standards: Nursing Practice
- The Joint Commission National Patient Safety Goals
- National League of Nursing Competencies for Graduates of Nursing Programs
- Quality and Safety Education for Nurses (QSEN)

Program Completion Rate – The number of students who complete the nursing program on time (within four semesters) beginning with enrollment in the first nursing course.

Program Length – Total time required to complete the nursing program stated in academic semesters exclusive of prerequisites.

Program Outcomes – Indicators which reflect the effectiveness of the nursing education, learning outcomes and End-of-Program Student Learning Outcomes. These include program completion rates, job placement rates, licensure/certification exam pass rates.

Program Satisfaction – Satisfaction among the students, graduates, employers, and faculty with educational offerings and services.

Quality and Safety Education for Nurses (QSEN)

- Patient-Centered Care
- Teamwork & Collaboration
- Evidence Based Practice
- Quality Improvement
- Safety
- Informatics

Reflective Thinking – is part of the critical thinking process referring specifically to the processes of analyzing, evaluating, and making judgments about what has happened. In reflective thinking, learners are aware of and in control of their learning by assessing what they know, what they need to know, and how they bridge that gap.

Retention – The process of having a student successfully complete the nursing program.

Scholar – a learned person; especially one who has a profound knowledge of a particular subject.

Scholarship – Faculty define scholarship as expanding an individual’s knowledge base and skills through education and teaching which is based on academic preparation, continuing education, service, practice, and review of current literature, as applied to the nursing faculty role.

In the discipline of nursing it is important to keep current with scientific inquiry in response to the rapidly changing academic and health care environments. Faculty’s evidence of scholarship is based upon Ernest L. Boyer (1990) and the American Association of Colleges of Nursing (1999), who reconsidered and defined the concept of scholarship for the discipline of nursing. Boyer (1990) identifies four types of scholarship: the scholarship of teaching, discovery, application, and integration that are defined below.

Teaching – provision of knowledge, insight and skills in nursing

Application – practical use of the knowledge, insight and skills in nursing

Integration – combine into a whole the body of knowledge, insight and skills relevant to nursing

Discovery of Knowledge – acquisition of the body of facts, principles, insight and skills relevant to nursing.

All are essential in the academic enterprise and must be represented by the School of Nursing faculty. However, whereas all faculty members must be involved in scholarship, all faculty need not be involved in all of Boyer’s four types of scholarship.

Faculty, therefore, integrate the terms used in their scholarship definition to expand and demonstrate their application of scholarship within their faculty role.

School Catalog – Provides information to prospective students regarding admission and curricular requirements.

Semester – A time period in which a course begins and ends; denotes a 16 week day option / 22 week evening weekend option.

Social Media- Web-based and mobile platforms for user generated content that create interactive and highly accessible, and often public, dialogues.

Staff – Non-faculty personnel who facilitate the attainment of the goals and outcomes of the nursing education.

Standard – Agreed-upon rules established by the ACEN to measure quantity, extent, value, and quality of the nursing program.

Standardized Tests – Exams used as a measurement of student progress in the curriculum.

Student Handbook – Contains those guidelines and policies pertaining to the student’s responsibilities while in the program.

Student Learning Outcomes – Statement of written expectation of what the student will know, do or think at the end of each course. Student Learning Outcomes are measurable and must be fully achieved for succession to the next course.

Synchronous Interactions- Those that occur in real time and require participants to be available at a specific time.

Systematic Plan for Evaluation (SPE) – The written document demonstrating ongoing comprehensive assessment of the student learning outcomes, program outcomes, role specific graduate competencies and the ACEN standards.

Therapeutic Intervention – Application of the nursing process in the practice of professional nursing within the standards of the Nurse Practice Act.

Traditional Student – An individual who enters nursing directly after high school and completion of college prerequisite courses.

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APPENDIX A

FORMS

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

**ANNUAL ATTESTATION OF REVIEW OF STUDENT HANDBOOK
2023-2024**

I _____ hereby attest that I have read and understand the policies set
(Print Name)
forth in the Student Handbook. I am aware that the Student Handbook can be accessed on the school's website
and hard copies are available in the School Library.

I have had the opportunity to ask questions and I accept my responsibility for abiding by the stated School
policies.

Signature: _____ Date: _____

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

DOCUMENTATION OF DISABILITY AND REQUEST FOR ACCOMMODATIVE SERVICES FORM

All accommodative service requests must be submitted according to the Special Accommodations for Disabilities Policy. The school reserves the right to request clarification and/or additional information from the requesting student and/or health care provider(s) to determine the student's eligibility for reasonable accommodations due to disability.

Student Name: _____ **Date of Birth:** _____

ALL items below MUST be completed by a qualified, licensed professional to verify disability.

Specific diagnosis(es) (the precise type of disability must be stated): _____

DSM Code(s) and Title(s) (if applicable): _____

Treatment/medication history: _____

Date of initial diagnosis and treatment: _____

Date of most recent evaluation (Attach copy of evaluation): _____

Current treatment/medication status: _____

List the diagnostic tests performed (Attach copy of results): _____

Test results and conclusions, i.e., scores and interpretations: _____

Specific recommended accommodation(s) for classroom, exams and/or clinical: _____

Rationale: _____

Professional's signature: _____ **Date:** _____

Professional's name/credentials (print clearly): _____

Professional License #: _____ **State of Licensure:** _____

Specialty certification/qualifications: _____

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING
ACCOMMODATION PLAN FORM**

This document verifies that the student whose name appears below and the Recruitment and Admissions Coordinator, have met and discussed the Documentation of Disability and Request for Accommodative Services.

The Recruitment and Admissions Coordinator and the student agree that this accommodation plan, as stated below, is reasonable and necessary according to the Documentation of Disability and Request for Accommodative Services completed by a qualified, licensed provider:

_____ By initialing, I certify that I am aware of the need for updated testing for accommodations. Furthermore, I am aware that it is my responsibility to schedule and complete the requirements as stated in the Special Accommodations for Disabilities Policy.

In accordance with the Special Accommodations for Disabilities policy, the student is responsible for meeting with instructors to discuss how the accommodation(s) will be implemented. The student is responsible for notifying the Academic Coordinator immediately regarding any concerns related to the fulfillment of Accommodations. The student signature authorizes the release and disclosure of this information to the designated Faculty member(s).

Student Signature: _____ Date: _____

Student Printed Name: _____

Signature: _____ Date: _____

Recruitment and Admissions Coordinator

cc: Student
Academic Coordinator
Student Health File

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

CONSUMER INFORMATION DISCLOSURE FORM

In December 1989, federal regulations were instituted that require all post-secondary institutions to provide all incoming students consumer information reflecting graduation, placement rates and licensure information in the career program being pursued by the student. To comply with these regulations, Roxborough Memorial Hospital School of Nursing is providing the following information based on its most recent graduate follow-up statistics.

74% of the class entering in 2020 (Class of 2022 Day option) completed the Program in 16 months (100% of the time). 57% of the class entering in 2020 (Class of 2022 Evening-Weekend option) completed the Program in 22 months (100% of the time). 100% of the respondents from the Class of 2022 Day option, were employed within twelve months of passing the Licensure Exam (NCLEX). 100% of the respondents from the Class of 2022 Evening-Weekend were employed within twelve months of passing the Licensure Exam (NCLEX).

The pass rate on the National Council Licensure Examination (NCLEX) averaged 87.1% for the Class of 2022 Day option and 100% for the Class of 2022 Evening-Weekend option. Questionnaires distributed to graduates and employers indicate a very high rate of satisfaction in the education and performance of our nurses.

Conviction of a felony or felonious act, an illegal act associated with alcohol, or an illegal act associated with substance abuse must be reported to the State Board of Nursing Office and may be cause for denial of permission to take licensure examinations. Upon orientation, the students are given the latest up-to-date consumer information disclosure.

I have read and understood the graduation rate, job placement rate, examination pass rates and licensure information associated with the nursing curriculum at Roxborough Memorial Hospital School of Nursing.

Student/Applicant Signature: _____ Date: _____

Student/Applicant Printed Name: _____

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

EVENT REPORT FORM

This form should be completed by the student and submitted to Recruitment and Admissions within 24 hours via email after an incident occurs.

Student Name: _____

Date of Event Report: _____ Date of Event: _____

Location the Event occurred: _____

Clinical Instructor: _____

Person(s) involved in the Event: _____

Event Description: _____

Equipment used during the Event: _____

Initial Action(s), (i.e., flushing, HCP assessment, etc.): _____

Describe planned follow-up action(s) (i.e., HCP Follow-up, etc.): _____

Signature of Student: _____ Date: _____ Student

Address: _____

Phone Number: _____

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING
MEDICAL CLEARANCE FORM FOR PHYSICAL INJURY/CONDITION
All fields MUST be completed by a Physician or Physician Extender**

Student Name:			
Date of Birth:	/ /	Gender:	BP: ____ / ____ P: ____
Age:		Ht: _____	Wt: _____ BMI: _____
Diagnosis:			
Date of Visit:	Date Cleared to Return:		

REQUIREMENT	ABLE TO PERFORM	UNABLE TO PERFORM
Sitting (intermittently and for extended periods)		
Standing (intermittently and for extended periods)		
Walking (intermittently and for extended periods)		
Wrist Deviation (for extended periods)		
Hand/ Wrist Repetitions (for extended periods)		
Reaching (intermittently and for extended periods)		
Lifting and carrying (up to 50 lbs.)		
Lifting and carrying with assistance (0-100 lbs. or above)		
Twisting/ Bending (intermittently and for extended periods)		
Squatting/ Kneeling/ Crawling (intermittently and for extended periods)		
Grasping (for extended periods)		
Pulling/ Pushing (up to 50 lbs.)		
Pulling/ Pushing with assistance (0-100 lbs. or above)		

PLEASE NOTE: It is an expectation of the Roxborough Memorial Hospital School of Nursing that Student Nurses are able to perform the duties listed above without restrictions. The School will attempt to address all "Reasonable Accommodations" as stipulated by the American Disability Act (ADA).

PROVIDER'S NAME	SPECIALTY	STATE LICENSE #	
STREET ADDRESS	CITY	STATE	ZIP CODE
TELEPHONE	FAX		
<p>I hereby state that the facts above set forth are true and correct to the best of my knowledge, information and belief. By signing, I acknowledge that the above named individual is medically cleared to perform the duties of a student nurse in the classroom and clinical setting with no restrictions.</p>			
PROVIDER'S SIGNATURE (INCLUDE CREDENTIALS)	DATE		

Health Care
Provider
Seal/Stamp
Here

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

MEDICAL CLEARANCE FOR ILLNESS FORM

All fields MUST be completed by a Physician or Physician Extender

Student Name: _____

Date of Birth: _____ Height: _____ Weight: _____

Temp: _____ BP: _____

HR: _____ RR: _____ Pulse Ox: _____

Diagnosis: _____

- I acknowledge that the above-named individual is medically cleared to perform the duties of a student nurse in the classroom and clinical setting **with no restrictions.**

Date Cleared to Return: _____

Provider's Name: _____

Specialty: _____ State License #: _____

Street Address: _____

Telephone: _____ Fax: _____

Provider's Signature: _____

(include credentials)

Examination Date: _____

Health Care Provider
Seal/Stamp
Here

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING
DOCUMENTATION OF CRIMINAL CHARGES FORM**

Have you ever been convicted* of any crime, felony or misdemeanor, and/or do you currently have any criminal charges pending and unresolved, in any court?

_____Yes _____No

Have you ever been convicted* of any crime associated with alcohol or drugs in any court?

_____Yes _____No

*Conviction includes judgment, found guilty by a judge or jury, plead guilty or nolo contendere, received probation without verdict, disposition in lieu of trial, or ARD.

Have you ever withdrawn an application for a license, had an application for a license denied or refused, or agreed not to reapply for a license in any state, territory, possession or country? A license includes a registration or certification.

_____Yes _____No

Have you ever had your license suspended or revoked or otherwise been the subject of disciplinary action by any licensing authority in any state, territory, possession or country?

_____Yes _____No

If the answer to any question above is “yes”, please attach an explanation and documentation.

Signature

Date

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

COUNSELING RECORD FORM

1st incident

2nd incident

3rd incident

Name of Student: _____ Date of Incident: _____

Detailed description of incident: additional pages may be added if needed

Plan of action for resolution:

Instructor's Signature

Date

Student's Signature

Date

Follow-up date: _____ Follow-up by: _____

Instructor's signature

Student's signature

Academic Coordinator

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

REQUEST FOR REFERENCE FORM

I request that _____ (name of instructor) write a letter of recommendation for me. I hold the writer of this reference responsible for submitting a letter that objectively assesses my abilities to perform in the listed nursing position. I hold the writer of this reference harmless for any effects this letter may have in my pursuit of a nursing position.

I do / do not waive my right to review this letter.

Signature of Student _____ Date _____

This reference will be sent to:

Name: _____ Position: _____ Title: _____

Address: _____

*FAX Number: _____ *E-mail address: _____

*Complete as needed.

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

**TRANSCRIPT REQUEST FORM
(CURRENT STUDENTS ONLY)**

I hereby authorize Roxborough Memorial Hospital School of Nursing to forward a copy of my School transcript to:

Signature of Requestor

Print Full Name of Requestor

Name when enrolled (if different)

Year of Graduation or Attendance

Last 4 Digits of Social Security No.

Date of Request

Address of Requestor

Current Employer

Mail completed Transcript Request Form to:

Roxborough Memorial Hospital School of Nursing
ATTN: TRANSCRIPT PROCESSING
5800 Ridge Avenue
Philadelphia, PA 19128

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

ACADEMIC RESPONSIBILITY CONTRACT FORM

PURPOSE: This contract is designed to promote a positive learning environment that facilitates learning.

POLICY: This contract will be reviewed and signed at the beginning of each Academic Year.

Students have a right to expect:

- A complete syllabus on the first day of class with clearly stated Learning Outcomes, a topic schedule for the semester, a fair grading policy and a well-defined attendance policy.
- That classes start and end on time.
- The opportunity to make an appointment to discuss the course content outside of class with the instructor.
- The grading of tests and assignments in approximately two weeks.
- The faculty to conduct themselves in a professional and civil manner.

The instructor/assigned clinical patient have the right to expect that students will:

- Arrive on time prepared for class/clinical and stay for the entire class/clinical.
- Inform the instructor of any extenuating circumstances affecting attendance.
- Be actively involved in creating a successful course/clinical experience.
- Ask for clarification or assistance when needed.
- Turn in assignments on time.
- Observe codes of academic honesty in the completion of all course work.
- Share any concerns about the class in a timely and professional and civil manner according to Chain of Command.
- Conduct themselves in a professional manner.

Human Rights and Responsibilities

- I will listen to others respectfully and not speak while others are talking.
- When I disagree with someone, I will critique his or her ideas in a respectful and constructive manner.
- I will try to understand other people's behavior and perspectives rather than simply criticizing them.
- I will respect other people's desire to learn and not interfere with the learning process.
- I will make sure that my cell phone and other electronic devices do not interfere with the classroom, clinical or testing processes.

Student's Name (PRINT)

Student's Signature

Date

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

EVALUATION AND PROMOTION ACTION PLAN

PROBLEM	ACTION PLAN	TARGET DATE	EVALUATION

Student's Name (PRINT)

Student's Signature

Date

Faculty Signature

Date

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

CLINICAL ASSIGNMENT FORM

Date: _____

Clinical Hours: _____

Clinical Faculty: _____

Contact Number: _____

Student's Name	Room #'s	Patient's Initials	Medications	Comments
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Clinical Focus:
Special Instruction
Alternate Patient Assignments:

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

CLINICAL EXPERIENCE LATENESS/ABSENCE FORM

Student nurse: _____ was

late absent

for N _____ clinical experience on date: _____

As per the School of Nursing policy on Lateness, this is a notice of:

written occurrence written warning* clinical probation**

As per the School of Nursing policy on Absence, this is a notice of:

written occurrence clinical probation**

*If there are issues contributing to this problem, it is imperative that you seek out the School counselor and the Academic Coordinator for assistance in resolving this matter. This is important so that you do not place yourself in jeopardy of failing the course.

** Policy states that when the student is placed on probation, a copy of form is to be sent to the office of the Dean of Education.

Remediation Plan:

Instructor's signature: _____

Date: _____

Student's signature: _____

Date: _____

Student's printed name: _____

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

CLINICAL EXPERIENCE ABSENCE MAKEUP FORM

Student Name: _____

1. Pay the required fee via SONIS.
 - A fee of \$50.00 will be charged for each missed Clinical Experience that is 4 hours or less.
 - A fee of \$100.00 will be charged for each missed Clinical Experience that is greater than 4 hours but less than or equal to 8 hours
 - A fee of \$150.00 will be charged for each missed Clinical Experience that is greater than 8 hours but less than or equal to 12 hours.
2. Bring the receipt to the Academic Coordinator as proof of payment.
3. Complete makeup assignment by _____ and submit as directed to designated faculty member.
4. Final grades will not be distributed without payment and the student will be unable to progress to the next semester or in N400, to graduate.

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING
CLINICAL SKILLS LAB PREPARATION WARNING FORM**

Name _____ Date _____

This student was unprepared for Clinical Skills Lab. The policy can be found in the Student Handbook. Continued warnings will be reflected on your Performance Evaluation Tool and may reflect your ability to pass this course.

The following items were missing or incorrect:

- “Nurse Pack”
- Textbook/eBook
- Skills Checklist
- Stethoscope
- Watch
- Homework
- Uniform
- Name Tag/ ID badge
- Shoes/ Socks
- Undershirt
- Jewelry
- Hair
- Nails
- Cell Phone (use of or failure to silence)
- Other: _____

1st incident

2nd incident

3rd incident

Student _____

Instructor _____

Academic Coordinator _____

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING
SKILLS LABORATORY PRESCRIPTION FORM**

Student: _____ Date Prescription Given: _____

Clinical Lab Setting: _____

Skills Lab Faculty: _____ Clinical Faculty: _____

Describe learning activities and performance criteria: _____

Initial Skills or Faculty/Clinical Faculty's Observations and Recommended Plan of Action: _____

Date that skills will be demonstrated in a satisfactory manner: _____

Date student seen in the Nursing Skills Laboratory: _____

Does Student need further follow-up in the Nursing Skills Laboratory? Yes No

Comments: _____

Coordinator, Nursing Arts Skills Laboratory: _____

Follow-Up Observations/ Recommendations: _____

Clinical Faculty Signature: _____ Date: _____

Student Signature: _____ Date: _____

Skills Lab Faculty Signature: _____ Date: _____

(If additional follow-up is needed, complete another Prescription form) After student has successfully demonstrated the clinical skills, the original should be sent to the student, and a copy to the student file, a copy to the Clinical Faculty, and a copy to the Skills Laboratory Instructor.

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING
CLINICAL WARNING FORM**

Name: _____ Course: _____

This is to inform you that you are being placed on clinical warning.

The following area (s) need to improve:

The following activities have been identified as ways to assist you with improvement:

Improvement or correction of this problem must occur by _____
or you will be placed on probation.

Faculty Signature

Date

Student Signature

Date

cc: Student
Academic Coordinator
Faculty
Student File

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING
CLINICAL PROBATION FORM**

Name: _____ Course: _____

This is to inform you that you are being placed on clinical probation.

The following area(s) need(s) improvement:

The following activities will be required during the probationary period:

Improvement must occur before _____ or a failure in the course will be received.

Faculty Signature

Date

Student Signature

Date

Academic Coordinator Signature

Date

cc: Student
Academic Coordinator
Faculty
Student File

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

CLINICAL CONFIDENTIALITY STATEMENT FORM

I understand that during my school tenure and during clinical rotations I may have access to confidential information about patients, their families and clinical facilities. I understand that I must maintain the confidentiality of all verbal, written or electronic information. This information is protected by Section 21.18 Pennsylvania Nursing Practice Act. In addition, the patient's right to privacy, by judiciously protecting information of a confidential nature, is part of the American Nurses' Association's Code for Nurses and HIPAA regulations.

Through this understanding, and its relationship to professional trust, I agree to discuss confidential information only in the clinical setting as it pertains to patient care and not where it may be overheard by visitors and/or other patients.

During each clinical rotation in the nursing program, I agree to follow each agency's established procedures on maintaining confidentiality.

I have read the Roxborough Memorial Hospital School of Nursing HIPAA Training & Confidentiality Policy, the HIPAA Training for Student Nurses' and Faculty Members, and the Clinical Confidentiality Statement and understand my responsibility as it pertains to confidential information.

This contract will be reviewed and signed at the beginning of each Academic Year.

Student Name (Please Print) _____

Signature: _____

Date: _____

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

**CLINICAL PLACEMENTS/TRANSPORTATION
ACKNOWLEDGEMENT FORM**

I have been informed of and fully understand the following:

I will be assigned to a variety of clinical facilities throughout my tenure as a student at Roxborough Memorial Hospital School of Nursing (RMHSON). Some of these facilities may be located in areas that are far from the School and from my home.

Because faculty consider a number of factors when making clinical assignments, such as previous clinical placements, faculty load and student ability, I understand that it is rare that I will be asked for my preferences for clinical placement, and I will need to go to the facility to which I am assigned.

Although the majority of clinical hours occur during the day, there may be semesters in which I am asked to participate in evening and/or weekend clinical assignments. In most of these cases, faculty will attempt to accommodate those for whom these shifts would truly present a hardship, HOWEVER, there is no guarantee that such accommodations can be made. In other words, I may be required to fulfill an evening or weekend clinical rotation.

Also, I fully understand that I must provide my own transportation to and from clinical sites. There may be the possibility of carpooling with others in my class, but this is solely my responsibility to arrange, and not the responsibility of the faculty.

I HAVE READ AND FULLY UNDERSTAND ALL OF THE ABOVE.

Student Name (Please Print) _____

Signature: _____

Date: _____

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

DRUG AND/OR ALCOHOL TESTING FORM

PLEASE READ CAREFULLY, SIGN AND RETURN

I understand that for the protection of the patients, and myself, any offer of acceptance I may receive will be conditioned upon my taking and passing a drug test, given by a physician, registered nurse, or nurse practitioner approved by Roxborough Memorial Hospital and/or School of Nursing. I also agree to take a drug or alcohol test, at such other times unannounced as required by the Hospital/School of Nursing during the period of my enrollment.

I understand that if I am found to be positive for alcohol or drugs, i.e. marijuana or other controlled substances, I will not be admitted or will be immediately expelled from the School of Nursing and forfeit all monies paid for tuition to the School.

The Roxborough Memorial Hospital School of Nursing adheres to Section 14 of the Professional Nursing Law that addresses chemical dependency and will not tolerate any circumstances in which a student or employee compromises the established standard.

Name of Student (PRINT): _____

Date: _____

Signature of Student: _____

Date: _____

Witness: _____

Date: _____

APPENDIX B

The Family Educational Rights and Privacy Act (FERPA)

The Family Educational Rights and Privacy Act (FERPA) affords eligible students certain rights with respect to their education records. (An “eligible student” under FERPA is a student who is 18 years of age or older or who attends a postsecondary institution at any age.) These rights include:

1. The right to inspect and review the student's education records within 45 days after the day the Roxborough Memorial Hospital School of Nursing [RMH SON] receives a request for access. A student should submit to the registrar, dean, head of the academic department, or other appropriate official, a written request that identifies the record(s) the student wishes to inspect. The RMH SON official will make arrangements for access and notify the student of the time and place where the records may be inspected. If the records are not maintained by the RMH SON official to whom the request was submitted, that official shall advise the student of the correct official to whom the request should be addressed.
2. The right to request the amendment of the student's education records that the student believes is inaccurate, misleading, or otherwise in violation of the student's privacy rights under FERPA.

A student who wishes to ask RMH SON to amend a record should write the School official responsible for the record, clearly identify the part of the record the student wants changed, and specify why it should be changed.

If RMH SON decides not to amend the record as requested, RMH SON will notify the student in writing of the decision and the student's right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing.

3. The right to provide written consent before RMH SON discloses personally identifiable information (PII) from the student's education records, except to the extent that FERPA authorizes disclosure without consent.

RMH SON discloses education records without a student's prior written consent under the FERPA exception for disclosure to School officials with legitimate educational interests. A School official typically includes a person employed by the School in an administrative, supervisory, academic, research, or support staff position (including law enforcement unit personnel and health staff); a person serving on the board of trustees; or a student serving on an official committee, such as a disciplinary or grievance committee. A School official also may include a volunteer or contractor outside of the RMH SON who performs an institutional service of function for which the School would otherwise use its own employees and who is under the direct control of the School with respect to the use and maintenance of PII from education records, such as an attorney, auditor, or collection agent or a student volunteering to assist another School official in performing his or her tasks. A School official typically has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibilities for the RMH SON.

Upon request, the School also discloses education records without consent to officials of another School in which a student seeks or intends to enroll. [NOTE TO POSTSECONDARY INSTITUTION: FERPA requires a School to make a reasonable attempt to notify each student of these disclosures unless the institution states in its annual notification that it intends to forward records on request or the disclosure is initiated by the student.]

4. The right to file a complaint with the U.S. Department of Education concerning alleged failures by the RMH SON to comply with the requirements of FERPA. The name and address of the office that administers FERPA is:

Family Policy Compliance Office
U.S. Department of Education
400 Maryland Avenue, SW
Washington, DC 20202

See the list below of the disclosures that postsecondary institutions may make without consent.

FERPA permits the disclosure of PII from students' education records, without consent of the student, if the disclosure meets certain conditions found in § 99.31 of the FERPA regulations. Except for disclosures to School officials, disclosures related to some judicial orders or lawfully issued subpoenas, disclosures of directory information, and disclosures to the student, § 99.32 of FERPA regulations requires the institution to record the disclosure. Eligible students have a right to inspect and review the record of disclosures. A postsecondary institution may disclose PII from the education records without obtaining prior written consent of the student —

- To other School officials, including teachers, within RMH SON whom the School has determined to have legitimate educational interests. This includes contractors, consultants, volunteers, or other parties to whom the School has outsourced institutional services or functions, provided that the conditions listed in § 99.31(a)(1)(i)(B)(1) - (a)(1)(i)(B)(3) are met. (§ 99.31(a)(1))
- To officials of another School where the student seeks or intends to enroll, or where the student is already enrolled if the disclosure is for purposes related to the student's enrollment or transfer, subject to the requirements of § 99.34. (§ 99.31(a)(2))
- To authorized representatives of the U. S. Comptroller General, the U.S. Attorney General, the U.S. Secretary of Education, or State and local educational authorities, such as a State postsecondary authority that is responsible for supervising the university's State-supported education programs. Disclosures under this provision may be made, subject to the requirements of §99.35, in connection with an audit or evaluation of Federal- or State-supported education programs, or for the enforcement of or compliance with Federal legal requirements that relate to those programs. These entities may make further disclosures of PII to outside entities that are designated by them as their authorized representatives to conduct any audit, evaluation, or enforcement or compliance activity on their behalf. (§§ 99.31(a)(3) and 99.35)
- In connection with financial aid for which the student has applied or which the student has received, if the information is necessary to determine eligibility for the aid, determine the amount of the aid, determine the conditions of the aid, or enforce the terms and conditions of the aid. (§ 99.31(a)(4))
- To organizations conducting studies for, or on behalf of, the School, in order to: (a) develop, validate, or administer predictive tests; (b) administer student aid programs; or (c) improve instruction. (§ 99.31(a)(6))
- To accrediting organizations to carry out their accrediting functions. (§ 99.31(a)(7))
- To parents of an eligible student if the student is a dependent for IRS tax purposes. (§ 99.31(a)(8))
- To comply with a judicial order or lawfully issued subpoena. (§ 99.31(a)(9))

- To appropriate officials in connection with a health or safety emergency, subject to § 99.36. (§ 99.31(a)(10))
- Information the School has designated as “directory information” under § 99.37. (§ 99.31(a)(11))
- To a victim of an alleged perpetrator of a crime of violence or a non-forcible sex offense, subject to the requirements of § 99.39. The disclosure may only include the final results of the disciplinary proceeding with respect to that alleged crime or offense, regardless of the finding. (§ 99.31(a)(13))
- To the general public, the final results of a disciplinary proceeding, subject to the requirements of § 99.39, if the School determines the student is an alleged perpetrator of a crime of violence or non-forcible sex offense and the student has committed a violation of the School’s rules or policies with respect to the allegation made against him or her. (§ 99.31(a)(14))
- To parents of a student regarding the student’s violation of any Federal, State, or local law, or of any rule or policy of the School, governing the use or possession of alcohol or a controlled substance if the School determines the student committed a disciplinary violation and the student is under the age of 21. (§99.31(a)(15))

References

The Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. § 1232g; 34 CFR Part 99 (2018)


APPENDIX C

**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING**

**ACCESSING OFFICE 365 FROM PERSONAL COMPUTER FOR PRIME HEALTHCARE
ACCOUNT**

1. Go to www.Office.com and select Sign In.
2. Enter your email address and password. This might be your personal **Microsoft** account, or the username and password you use with your work or school account.
 - Enter your PCH user log-in (username@phsi.us)>Enter
 - Enter your password >Enter
 - Click on the DUO authentication method you have programmed into DUO app [cellphone PUSH easiest to use- SEE DUO APP DOWNLOAD information from IT] and complete authentication
3. Select the App Launcher and then select any **Office** app to start using it.

ACCESSING TEAMS FROM OFFICE 365 FROM PRIME HEALTHCARE ACCOUNT

1. Start Microsoft Teams by doing one of the following:
 - In Windows, click **Start**  > **Microsoft Corporation** > **Microsoft Teams**.
 - On Mac, go to the **Applications** folder and click **Microsoft Teams**.
 - On the web, go to <https://teams.microsoft.com>.
2. Sign in with your Microsoft 365 username and password*.
 - A. Enter your PHC user log-in (username@phsi.us) >Enter
 - B. Enter your password >Enter
 - C. Click on the DUO authentication method you have programmed into DUO app [cellphone PUSH easiest to use- SEE DUO APP DOWNLOAD information from IT] and complete authentication

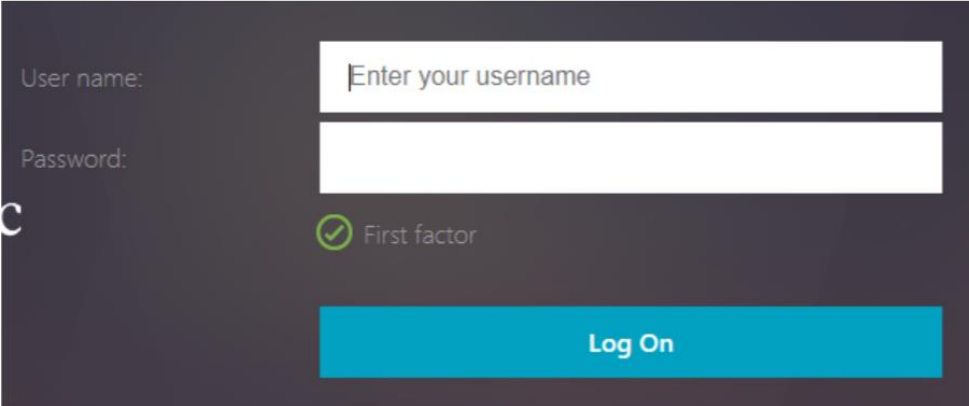
Notes:

- Teams is a part of Microsoft 365, so you need a Microsoft 365 Apps for business or Enterprise license to use it. For details, see [How do I get access to Microsoft Teams?](#)
- *Depending on your org's requirements, you might be asked for additional verification, such as a code from a mobile device, when you sign in.

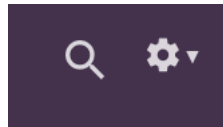
**ROXBOROUGH MEMORIAL HOSPITAL
SCHOOL OF NURSING
PRIME EXTERNAL PASSWORD RESET – CITRIX**

1. Go to <https://portal.primehealthcare.com/>
2. Log into account > username (assigned PHSI user name WITHOUT the “ @phsi.us”)

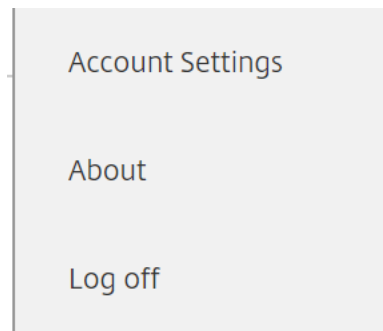
with current user ID.



3. Look for Gear in upper right corner and click on the Gear



4. Click on “Account Settings”



5. Click on “Change Password” and follow prompts



Change Password

User name: mgaglianone

Old Password :

New Password :

Confirm Password :

Submit

6. Change your password and then you will be asked to do a Duo Push for the second form of authentication.
7. Follow prompts for Duo Push
8. Log out of program

If you have ANY IT issues

📞 1-844-588-HELP

✉ Help@primehealthcare.com

🌐 <https://servicedesk.primehealthcare.com/>