



WASHINGTON HEALTH SYSTEM
School of Nursing

Student Handbook

2024-2025

Class of December 2025

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Mission: To facilitate innovative and evidence-based strategies into student learning experiences that ultimately reflects achievement of educational excellence resulting in competent, safe, and caring beginning generalists, in the profession of nursing.

Vision: The Washington Health System School of Nursing aspires to maintain its distinction as the hospital-based RN Diploma program of choice for candidates seeking nursing as a career in the Washington and surrounding counties.

Philosophy: We, the faculty of the Washington Health System School of Nursing, embrace the following beliefs:

- **Nursing:** We believe nursing is a unique human art and science that incorporates knowledge from the physical, biological, and behavioral sciences when providing care across the **developmental life process** in a vast degree of **human complexity** for individuals, families, and communities in a variety of settings impacting both their **internal and external environments**.

We believe, in congruence with the Washington Health System mission “Great Patient Care”, nursing must utilize **evidence-based practice (EBP)** to provide **safe, quality** care for **patients, families**, and communities as guided by recognized experts e.g., the **National Patient Safety Goals (NPSG)**, **Quality and Safety Education for Nurses (QSEN)**, and **Patient and Family Centered Care (PFCC)**.

We believe nursing utilizes **critical thinking** and **clinical reasoning**, to problem solve and make sound **clinical judgments** and decisions, grounded by **evidence-based practice**, through the use of the **nursing process**.

We believe the professional nurse provides care supporting the basic **human needs** for patients and families that is individualized, **holistic, culturally sensitive**, and ethically/legally sound, enabling patients, families, and communities to **flourish** in maximizing their **health potential**.

We believe nursing requires a **caring** attitude that **respects** the individual and family and preserves **dignity**.

We believe the professional identity of nursing includes aspects of being a **care provider, advocate, teacher, communicator, manager of care**, and **professional member**.

- **Education:** We believe education is grounded in core values and concepts which guide and direct the curriculum. The faculty of Washington Health System School of Nursing facilitates learning through the use of **critical thinking, clinical reasoning, clinical judgment**, and analytical inquiry which guides and strengthens the teaching-learning process supporting the theory of progressivism.

We believe the theory of behaviorism reflects our core value and belief in sequential building on previous knowledge, throughout the curriculum, culminating into a competent, safe graduate. The education learning environment stimulates critical thinking and promotes a **spirit of inquiry** which motivates the student to be a self-directed learner.

We believe education reflects current best practice standards regarding contemporary educational theories, teaching strategies, trends, research, technological advances, and global healthcare changes.

We believe the faculty assumes responsibility for curriculum development, facilitation of learning activities, and ongoing curriculum evaluation, to continually reflect upon how education is successfully delivered, optimizing program outcomes and student success.

Organizing Framework

The National League for Nursing (NLN) Outcomes and Competencies for graduates of diploma programs and the Quality and Safety Education for Nurses (QSEN) direct the fundamental sub-concepts interwoven into the framework of the curriculum.

NLN Concepts:	Human Flourishing	Nursing Judgment	Professional Identity	Spirit of Inquiry
QSEN Concepts:	Pt. Centered Care	Safety Informatics	Teamwork Collaboration	Quality Improvement Evidence-based Practice
Sub-concepts:	<u>Health Potential</u> <u>Human Complexity</u> <u>Holism</u> <u>Human Needs</u> <u>Internal/External Environment</u> <u>Cultural</u> <u>Developmental Life Process</u> <u>Patient Family Centered Care</u> <u>Dignity</u> <u>Respect</u> <u>Caring</u> <u>Self- Healing</u>	<u>Critical Thinking</u> <u>Nursing Process</u> <u>Quality Safety Education for Nurses (QSEN)</u> <u>National Practice Safety Goals (NPSG)</u> <u>Clinical Reasoning</u> <u>Clinical Judgment</u>	<u>Professional Nurse Role</u> Care Provider Advocate Teacher Communicator Manager of Care Professional Member	<u>Teaching</u> <u>Learning</u> <u>Research</u> <u>Evidence-based Practice</u>

NLN: Human Flourishing: Advocate for patients and families in ways that promote their self-determination, integrity and ongoing growth as human beings (NLN, 2022).

QSEN: Patient Centered Care: “Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient preferences, values, and needs” (QSEN, 2020).

Sub-concepts:

- **Health Potential:** The optimal achievable health, at any given moment in time.
- **Human Complexity:** Each human being is unique, intricate, and complex, reflecting various experiences, values and beliefs that are continually changing and evolving.
- **Holism:** Parts of a whole are in intimate interconnection, such that they do not exist independently of the whole. Holism views the whole as greater than the sum of its parts. Healing of the whole, multidimensional person is nursing’s goal.
- **Human Needs:** Each individual’s optimal potential occurs by striving to meet physical, psychosocial, and spiritual needs motivated by interaction with the environment.
- **Internal and External Environment:** The nurse-patient relationship exists within the interplay of internal and external environments. Humans function as a whole, in response to internal and external dynamic forces.
- **Cultural:** Relating to a particular group of people and their habits, beliefs, traditions, etc.
- **Developmental Life Process:** Human beings change over the course of their lifetime, within the context of age and across time. Developmental life processes reflect changes in motor skills, cognitive development, moral understanding, language acquisition, social change, personality, emotional development, self-concept, and identity formation.

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- **Patient Family Centered Care:** An approach to the planning delivery and evaluation of health care that is grounded in mutually beneficial partnerships among providers, patients, and families. Promotes the health and well-being of individuals and families and restores dignity and control to them. Patients and families participate fully in care and decision-making choices.
- **Dignity:** The quality or state of being worthy of honor and respect.
- **Respect:** To consider worthy of high regard.
- **Caring:** Showing compassion by exhibiting concern and empathy for others.
- **Self-Healing:** Ability to restore unity and harmony of mind, body, and spirit throughout varying degrees of health.

NLN: Nursing Judgment: Make judgments in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care and that promotes the health of patients within a family and community context (NLN, 2022).

QSEN: Safety: “Minimizes risk of harm to patients and providers through both system effectiveness and individual performance” (QSEN, 2020).

QSEN: Informatics: “Use information and technology to communicate, manage knowledge, mitigate error, and support decision making” (QSEN, 2020).

Sub-concepts:

- **Critical Thinking:** The intellectual process of applying knowledge to new situations and selecting choices of actions from possible alternatives. The student is guided to develop and employ this skill from basic problem solving toward progressive analytical inquiry.
- **Nursing Process:** A problem solving method. This process is used by the nurse, in collaboration with the patient and family, to identify and treat human responses to actual and potential health problems; it includes five phases: assessment, inferred problem, planning, implementation, and evaluation.
- **QSEN:** A resource for competencies to encourage the acquisition of the knowledge, skills, and attitudes that will enable and empower future nurses to improve the quality and safety of healthcare.
- **NPSG:** A Joint Commission initiative to help accredited organizations address specific areas of concern regarding patient safety.
- **Clinical Reasoning:** Drawing of clinical inferences or conclusions through the use of reason.
- **Clinical Judgment:** Process of formulating a clinical evaluation or outcome.

NLN: 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 (NLN, 2022).

QSEN: Teamwork and Collaboration: “Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care” (QSEN, 2020).

Sub-concepts:

- **Professional Nurse Role:** Nursing is the protection, promotion and optimization of health abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response and advocacy in the care of individuals, families, communities, and populations.

Encompassing:

Care Provider: Provides care to meet physical, psychosocial, and spiritual needs through the application of knowledge and skill of the professional nurse.

Advocate: Supports human and legal rights based on the belief individuals have the freedom and capacity to make their own decisions.

Teacher: Provides concepts and facts about health and reinforces learning through the use of the nursing process.

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Communicator: Communicates with individuals, families, and other health care team members to enhance the delivery of care.

Manager of Care: Coordinates the care of individuals, families, and groups in collaboration with other members of the health care team.

Professional Member: Demonstrates accountability for ethical, legal, and professional responsibilities relating to nursing practice.

NLN: 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 (NLN, 2022).

QSEN: Quality Improvement: “Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems” (QSEN, 2020).

QSEN: Evidence-Based Practice: “Integrate best current evidence with clinical expertise and patient/family preferences and values for diversity of optimal health care” (QSEN, 2020).

Sub-concepts:

- **Teaching:** The process by which the faculty facilitates individuals through learning experiences which promote changes in the learner’s knowledge, skills, and values to enhance achievement of specific objectives. Teaching fosters motivation, promotes self-direction, and stimulates the spirit of analytical inquiry to challenge assumptions.
- **Learning:** A change in behavior, which is the result of the acquisition of knowledge, skills, perceptions, and values within the individual’s potential for growth from both formal and informal experiences. Learning is dependent upon the student’s readiness and abilities. The student is responsible for employing self-direction and participating actively in the learning process which is life-long.
- **Research:** A detailed systematic study of a problem in the field of nursing. Nursing research is practice or discipline oriented and is essential for the combined development of the scientific evidence-based practice of professional nursing.
- **Evidence-Based Practice:** Integrate best current evidence with clinical expertise and patient/family/community preferences and values, for delivery of optimal health care.

References

National League for Nursing. (2024). *Competencies for Graduates of Nursing Programs*.

[Competencies for Graduates of Nursing Programs \(nln.org\)](https://nln.org/competencies-for-graduates-of-nursing-programs)

QSEN Institute. (2020). *QSEN competencies*. <http://qsen.org/competencies/pre-licensure-ksas/>

1982 Revised: 9/98; 5/06; 9/19; 2/2023; 11/2023; 2/2024

Reviewed: 4/14; 2/15; 6/16; 2/17; 3/18; 2/20; 3/2021; 1/2022

School Purpose

Washington Health System School of Nursing offers a 16-month RN Diploma program in professional nursing. The school assures the quality of its program by maintaining qualified faculty, providing support services which meet the needs of the student population, providing resources and facilities which are adequate for operation of the school, and offering a curriculum which enables its graduates to develop competencies necessary for the practice of professional nursing.

The Washington Health System School of Nursing provides a quality nursing education program as consistently demonstrated through the attainment of the following end of program student learning outcomes.

1956 Revised: 8/93; 3/2020; 3/2021; 3/2023

Reviewed: 4/14; 2/15; 12/15; 6/16; 2/17; 3/18; 2/19; 1/22; 2/2024

End of Program Student Learning Outcomes

The Washington Health System School of Nursing graduate:

- 1) Utilizes a **holistic** approach when managing care for a group of **dignified** individuals/families in various stages of the **developmental life process**.
- 2) Provides **culturally diverse** care to individuals /families to enable them to optimize their **health potential**.
- 3) **Respects** the **human complexity** of individuals/families through reciprocal relationships that influence the **internal and external environment**.
- 4) Utilizes the **spirit of inquiry** to improve or optimize individual/ family outcomes.
- 5) Incorporates human science and **evidence-based practice** into **critical thinking, clinical reasoning, and clinical judgment** while utilizing the **nursing process**.
- 6) Upholds the **professional nurse role** in meeting quality **human health care needs**, safe pharmacologic administration, and overall **safety** of individuals/families while in collaboration with other members of the health care team.
- 7) Demonstrates moral and ethical values that support responsible, accountable professional practice.
- 8) Functions in the role of an entry-level **professional nurse** in a variety of health care settings.

Course Learning Outcomes

	N100	N200	N300	N400
1.	Identify and select a holistic approach when preparing to care for individuals/families in various stages of developmental life processes.	Recognize and discuss application of holistic care provided for individuals/families experiencing alterations in health in various stages of developmental life processes.	Plan and implement holistic interventions during care of individuals/families experiencing complex health alterations in various stages of developmental life processes.	Incorporate holism when caring for individuals/families experiencing acute illness or crisis.
2.	Recognize cultural awareness of diversity when caring for individuals/families.	Explain culturally diverse interventions to optimize the health potential for individuals/families.	Plan culturally diverse interventions in the care of individuals/families experiencing complex alterations in health.	Create and implement culturally diverse plans of care to individuals /families experiencing acute crisis and during management of multiple patient assignments.
3.	Recognize awareness and respect for the environment as it relates to the human complexity of individuals/families in relation to health care.	Describe internal/external environmental elements integral in providing caring for individuals/families.	Consider environmental elements specific to individuals/families when planning and implementing care.	Evaluate plan of care in relation to the internal/external environmental factors experienced by individuals/families during an acute crisis.
4.	Identify evidence-based practice interventions to assist individuals/families to optimize their health potential.	Choose evidence-based practice interventions when planning care for individuals/families to optimize their health potential.	Implement evidence-based practice interventions when providing care and teaching individuals/families in order to optimize their health potential.	Create evidence-based plans of care for individuals/families to optimize their health potential.
5.	Identify the steps of the nursing process within the NCSBN Clinical Judgment Model when organizing basic plans of care.	Demonstrate basic critical thinking skills as evidenced in the NCSBN Clinical Judgment Model when formulating a plan of care.	Demonstrate clinical reasoning during provision of care as supported by the NCSBN Clinical Judgment Model.	Prioritize early clinical judgment during care provision as supported by the NCSBN Clinical Judgment Model.
6.	Identify safe pharmacological principles	Explain safe pharmacological principles when administering medication.	Utilize safe pharmacological principles when administering medication.	Utilize and perform safe pharmacological principles

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	N100	N200	N300	N400
	in administering medications.			when administering medication.
7.	Identify and utilize safety principles when providing health care needs to individuals/families.	Anticipate and plan for individualized safety needs based upon risks factors when preparing/providing care to individuals/families.	Incorporate anticipated safety needs when planning discharge for individuals/families at risk.	Guide individuals/families in identifying individualized preventative measures for anticipated safety needs, when planning discharge.
8.	Recognize legal/ethical values when caring for individuals/families experiencing alterations in health in various stages of developmental life processes	Discuss professional legal/ethical values when providing care for individuals/families experiencing alterations in health in various stages of developmental life processes.	Demonstrate professional legal/ethical values when providing care for individuals/families experiencing alterations in health in various stages of developmental life processes.	Incorporate professional legal/ethical values when planning/implementing care for individuals/families experiencing acute crisis and during management of multiple patient/family assignments.
9.	Recognize attributes of the professional nurse role.	Begin to incorporate aspects of the professional nurse role into practice.	Incorporate professional role behaviors into practice.	Exhibit professional behaviors in caring for individuals/families.

1956 Revised: 8/93; 3/2020; 3/2021; 3/2023; 11/2023

Reviewed: 4/14; 2/15; 12/15; 6/16; 2/17; 3/18; 2/19; 1/22; 2/2024

Approximate Ratio of Theory Hours to Clinical Hours in Nursing Courses

Course	Theory	Clinical Nursing Laboratory
Nursing 100	1 hour	1.0 hour
Nursing 200	1 hour	1.2 hours
Nursing 300	1 hour	1.3 hours
Nursing 400	1 hour	1.4 hours

8/1993 Revised: 4/2014, 2/2015

Reviewed: 7/2013, 12/2015, 6/2016; 3/2018; 3/2019; 3/2020; 3/2021; 1/2022; 3/2023; 2/2024

Course Descriptions

Nursing 100: The course is a foundational building block ranging from the history of nursing highlighting important figures shaping nursing over the centuries, essential legal and ethical concepts, and basic nursing skills used to care for human beings across the lifespan. Emphasis is placed on comprehensive holistic assessment, communication skills, documentation, safe nursing practice, infection control, patient-family learning needs, and the beginning application of the nursing process. Health, and alterations in health, are examined in relation to providing for basic human needs, identifying risk factors, and promoting healthy behaviors. Basic pharmacological principles and safe medication administration are learned. Students identify with the professional nurse role in a variety of clinical settings.

Theory	150 Hours
Clinical	<u>150 Hours</u>
Total Hours	300 Hours

Nursing 200: The course expands upon the use of a holistic approach when caring for individuals/families with alterations in health, throughout the lifespan. Nursing management of alterations in health across the lifespan is the focus of the course. Emphasis is placed upon the role of the professional nurse and the use of the nursing process in assisting individuals/families to move toward optimal health potential. The focus is on health alterations in medical-surgical, pregnancy, the childbearing process, pediatric variances, growth and development, and mental health/illness. Opportunities are provided to care for individuals and families in a variety of specialized settings.

Theory	135 Hours
Clinical	<u>162 Hours</u>
Total Hours	297 Hours

Nursing 300: The course focuses on the care of the acutely ill individual and their family, as they experience more complex alterations in health. Selected complex health problems across the lifespan are examined from a holistic perspective. Opportunities are provided to care for patients and families in a variety of acute care settings.

Theory	135 Hours
Clinical	<u>175 Hours</u>
Total Hours	310 Hours

Nursing 400: The course focuses on the individual and family experiencing emergency and critical healthcare problems. Students learn to holistically care for individuals and families who are in crisis, as they move along the health-illness continuum. Leadership experiences are provided to enhance assessment skills, problem-solving, decision-making, prioritization, delegation, and collaboration while managing complex multiple patient/family assignments.

Theory	135 Hours
Clinical	<u>189 Hours</u>
Total Hours	324 Hours

All nursing courses must be taken in sequence.

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Curriculum Plan**Level I**Semester I 15 Weeks

Nursing 100 13 Credit Equivalents + 3 Credit (General Psychology)

Theory 150 Hours

Clinical 150 Hours

300 Total Hours

Semester II 15 Weeks

Nursing 200 12 Credit Equivalents + 3 Credit (Introduction to Sociology)

Theory 135 Hours

Clinical 162 Hours

297 Total Hours

Level I Total: 25 Credit Equivalents + 6 Credit General Education = 597 Hours

Level IISemester III 15 Weeks

Nursing 300 12 Credit Equivalents + 3 Credit (Essentials in Nutrition)

Theory 135 Hours

Clinical 175 Hours

310 Total Hours

Semester IV 15 Weeks

Nursing 400 13 Credit Equivalents + 3 credit (Introduction to Ethics)

Theory 135 Hours

Clinical 189 Hours

324 Total Hours

Level II Total: 25 Credit Equivalents + 6 Credit General Education = 634 Hours

Total credits provided by Washington Health System School of Nursing	50 Credits
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Total hours provided by Washington Health System School of Nursing	1,231 Hours
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Total Non-Nursing Credits/Courses	Integrated through Portage Learning/Geneva College
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3 Credits = English Composition

3 Credits = Anatomy and Physiology I

1 Credit = Anatomy and Physiology I Lab

3 Credits = Anatomy and Physiology II

1 Credit = Anatomy and Physiology II Lab

3 Credits = Lifespan Developmental Psychology

3 Credits = General Psychology

3 Credits = Introduction to Sociology

3 Credits = Essentials in Nutrition

3 Credits = Introduction to Ethics

Total College Credits = 26 Credits

Credit Conversion: Theory = 15 Hours / 1 Credit
 Clinical = 45 Hours / 1 Credit

Program Length

16 months

Confidentiality Policy

Confidential information is a term used to classify that information contained in the medical record that is based on examination, treatment, observation, or conversation with the patient and any information in the Washington Health Systems computers. The term “confidential information” also applies to that class of information contained in reports, records, evaluations, proceedings, notes, interviews, statements, memoranda, or other data of the Hospital or hospital-organized medical staff committee consisting of medical or nursing audits, departmental evaluations, research studies, or corrective action investigations. The exchange of any information as described above is restricted solely to those “who need to know” in order to safely and effectively carry out their duties. Information concerning patients or Hospital business shall be held in strict confidence and shall never be discussed or conveyed to any persons not authorized by the President to have such information or material. A breach of this responsibility will be grounds for immediate dismissal. Health Insurance Portability and Accountability Act (HIPAA) will be fully enforced. *(For further information related to FERPA, refer to Student Records Policy.)*

All students will be required to complete/comply with the expected Confidentiality module via Symplr.

12/1997 Revised: 1/2006, 5/2014; 3/2018; 4/2020; 3/2023; 2/2024 Reviewed: 5/2013, 2/2015; 12/2015; 6/2016; 2/2017; 2/2019; 2/2021; 2/2022; 2/2024

Workplace Civility Policy

WHSSN is committed to maintain a teaching/learning environment where students treat each other civilly and adhere to the Standards of Behavior. Inappropriate behaviors such as bullying, harassment and sexual harassment will be considered a violation of the policy along with other behaviors deemed inappropriate on a case-by-case basis. WHSSN will comply with federal and state laws that prohibit discrimination based on race, color, religion, disability, ancestry, national origin, age, genetic information, sex, gender identity or expression, or sexual orientation.

Civility

Civility involves treating others with dignity and respect and acting with regard to other's feelings. Civility means that even the most critical feedback must be delivered respectfully, privately, and courteously.

The following prohibited behaviors, while not all encompassing, characterize behaviors that undermine a civil environment and are inconsistent with WHS Standards of Behavior:

- **Bullying**

WHSSN defines bullying as repeated inappropriate behavior, direct or indirect, verbal, physical or otherwise, conducted by one or more persons against another or others, in all WHSSN facilities and clinical settings. Such behaviors violate Washington Health System's Standards of Behavior, which clearly states that all students will be treated with dignity and respect.

Bullying includes, but is not limited to, conduct that shows hostility, lack of civility, improper behavior toward others, or aversion toward an individual. The following types of behavior are examples of bullying:

- **Verbal bullying:** Slandering, ridiculing or maligning a person or their family; persistent name calling that is hurtful, insulting or humiliating; using a person as butt of jokes; abusive and offensive remarks. Making profane, false or slanderous statements, epithets, slurs, negative stereotyping. Threatening, intimidating or hostile acts. Participating directly or due to negligence and inattention to facts, in the spread of false rumors or claims about others.
- **Written:** Written or graphic material that shows hostility or the lack of civility and respect toward an individual, that is placed on, or circulated in, the WHSSN premises.
- **Physical:** Pushing, shoving, kicking, poking, tripping, assault or threat of physical assault, damage to a person's work area or property.
- **Actions/Gestures:** Nonverbal threatening gestures [looks that can convey threatening messages]. Creating an intimidating, hostile, or offensive environment. Unreasonably interfering with an individual's school performance.
- **Exclusion:** Socially or physically excluding or disregarding a person in school-related activities.

- **Harassment Including Sexual Harassment**

A hostile environment can result from the unwelcome conduct of anyone with whom the victim interacts with, and the unwelcome conduct renders the atmosphere intimidating, hostile, or offensive. Examples of behaviors that may contribute to an unlawful hostile environment include:

- Discussing sexual activities;
- Telling off-color jokes concerning race, sex, disability, or other protected bases;
- Unnecessary touching;
- Commenting on physical attributes;
- Displaying sexually suggestive or racially insensitive pictures;
- Using demeaning or inappropriate terms or epithets;
- Using indecent gestures;
- Using crude language;
- Sabotaging the victim's schooling;
- Engaging in hostile physical conduct

A student who believes that they are a victim of another violating the *Workplace Civility Policy* should, if possible, immediately inform the person committing the perceived violation that the behavior is inappropriate. If the student feels uncomfortable discussing the behavior directly, then they should follow the chain of command.

Because of the need to conduct a fair, impartial and thorough investigation of all complaints, WHSSN cannot promise that complaints and other matters relating to harassment investigations will be kept confidential. Information necessary to complete the investigation of harassment, including the identity of the individual(s) who allegedly is engaging in the harassing conduct, the individual(s) who has been subjected to such conduct, and the content of the accusations will be disclosed only as necessary during the investigation, including during interviews with witnesses.

The Director or Assistant Director, Staff Education/School of Nursing will make the final determination if behaviors fit the adopted definitions.

Violation of this policy may result in discipline up to and including permanent dismissal from the program.

1/2013 Revised: 2/2019; 2/2021; 2/2022; 2/2023

Reviewed: 6/2014, 2/2015, 6/2016, 2/2017; 3/2018; 4/2020; 2/2024

Non-Discrimination Policy

It is the policy of the WHSSN that admissions, the provision of services, the availability and use of facilities and referrals of persons shall be made without regard to age, race, color, religious creed, physical or intellectual disability, ancestry, national origin (including limited English proficiency), sex, gender identity or expression, sexual orientation, AIDS or HIV status or socioeconomic status.

A Request for Accommodations shall be made accessible to eligible individuals with disabilities. Please refer to the *Students with Disabilities Policy*.

4/1970 Revised: 3/1999, 5/2011; 2/2021; 2/2023

Reviewed: 5/2013, 5/2014, 2/2015, 6/2016, 2/2017; 3/2018; 2/2019; 4/2020; 2/2022; 2/2024

Academic Policies

Clinical Evaluation Policy

Clinical Evaluation Tool (Students)

PURPOSE:

1. To provide students with objective weekly feedback regarding their performance.
2. To allow the student to self-evaluate their clinical performance.

TIME FRAME:

The Clinical Evaluation Tool will be used throughout the course during weeks of direct patient care experiences.

WEEKLY CLINICAL EVALUATION GUIDELINES:

The student will:

1. Obtain the Weekly Clinical Evaluation Tool from the electronic resource file.

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2. Review the behavioral criterion for each core competency to prepare to successfully achieve the criterion detailed by the core competency.
3. Electronically submit the Nursing Process Worksheet (NPW) by the due date and time to satisfy the behavioral criterion associated with the NPW. (Submit only through the assigned instructor's whs.org address and verify it has been received).
4. Electronically submit any assignments (as defined each semester on the FCET) along with a copy of the appropriate Rubric for scoring (if applicable). Scores from the Rubric will be recorded in the designated column on the FCET.
5. Review faculty comments and average scores for each core competency on the returned Weekly Clinical Evaluation Tool.

If remediation is required, the student is to meet with the clinical instructor prior to the next clinical experience for their remediation assignment.

LATE / UNACCEPTABLE PAPERWORK:

1. Direct Clinical Experience Paperwork (NPW) will receive a zero (0) in the professionalism competency on the WCET.
2. Assignments (as defined each semester on the FCET) when submitted late will receive a one (1) point deduction from the student score if submitted past the due date and time and each academic day there after (not all assignments require a rubric).

ARRIVING LATE FOR CLINICAL EXPERIENCES:

Arriving late to a direct clinical experience will result in a zero (0) in the professionalism competency on the WCET. Clinical experiences may continue, and hours will not be recorded as an absence if the student arrives within the allotted 30 minute time frame. Arriving late to an observational clinical experience will result in a (-1) point deduction on the Rubric for Written Assignment score. Inappropriate call off for observational experience will result in a (-2) point deduction on the Rubric for the Written Assignment score. Refer to the *Attendance Policy Grid*.

MID CLINICAL AND FINAL CLINICAL EVALUATION GUIDELINES:

The student will be assigned to a faculty member who will perform a mid-clinical and final-clinical evaluation with the student based on the Final Clinical Evaluation Tool.

The student will:

1. Transfer the average weekly **faculty** scores from each Weekly Clinical Evaluation Tool and assignments to the unofficial Final Clinical Evaluation Tool to keep track of performance progress. Failure to achieve the course minimum expected level of performance for any core competency at mid-clinical is deemed unsatisfactory in progressing towards clinical achievement and will require demonstration of improvement over the remainder of the course. Failure to achieve the course minimum expected level of performance for any core competency by the Final Clinical Evaluation will result in a failure for the clinical component of the course due to inability to meet the minimum expected level of performance of the core competencies. This will result in immediate dismissal.
2. Schedule a mid-clinical and final-clinical evaluation meeting with the assigned clinical instructor
3. Complete the appropriate portion of the Student Self-Evaluation. Circle a rating reflective of the perceived performance for each of the core competencies. Write a self-evaluation to support the rating and commenting on progress towards achieving the behavioral criterion.
4. Electronically send the completed Student Self-Evaluation document to the appropriate clinical instructor prior to the scheduled evaluation. Failure to electronically send the document to the clinical instructor will result in a delayed evaluation.
5. Review with the clinical instructor the clinical performance related to the core competencies at the mid-clinical meeting and final evaluation.
6. Document any necessary comments in the comment box and electronically sign the Mid-Clinical and Final-Clinical Evaluation.

Clinical Evaluation Tool Scoring Criteria**4 = Self-Directed (SD)/professional (P)****At this level of performance, the student:**

- Performs ***independently***
- ***Achieves*** and ***exceeds*** expectations and requirements
- Engages ***consistently*** in self-direction in approach to learning.
- Recognized by staff, peers, patients, or families, as practicing above and beyond expectations for course outcomes.
- Functions ***independently*** within the student nurse role once approved by the clinical instructor
- Demonstrates ***consistent*** safe practices

3 = Supervised (S)**At this level of performance, the student:**

- Needs ***minimal*** cues from the instructor
- ***Achieves*** expectations with ***minimum*** prompting or cueing
- ***Identifies own*** learning needs and seeks appropriate assistance.
- Demonstrates adequate knowledge and requires ***minimal*** assistance in integrating knowledge with skills.
- Provides evidence of ***preparation*** for ***all*** clinical learning experiences.
- ***Follows*** directions and performs safely.
- Demonstrates consistent ***continued improvement*** during the semester

2 = Assisted (A)**At this level of performance, the student:**

- Needs ***occasional*** cues from the instructor
- Achieves ***minimum*** expectations with ***occasional*** prompting or cueing
- Requires ***some*** direction in recognizing and utilizing learning opportunities.
- Demonstrates adequate knowledge and requires ***moderate*** assistance in integrating knowledge with skills.
- Is ***prepared*** and has ***moderate insight*** into own behavior.
- Functions safely with a ***moderate*** amount of guidance in the clinical situation.

1 = Novice (N)**At this level of performance, the student:**

- Needs ***frequent*** cues from the instructor
- Achieves ***minimum*** expectations with ***frequent*** prompting or cueing
- Requires ***frequent*** and ***detailed*** instructions regarding learning opportunities and is often unable to utilize them.
- Demonstrates gaps in necessary knowledge and requires ***frequent*** assistance in integrating knowledge and skills.
- Is ***frequently*** unprepared and has ***limited insight*** into own behavior.
- Is ***frequently*** unsafe and ***only able*** to demonstrate the behavior with direct supervision
- Varies from periods of 'competent' to periods of unsatisfactory performance

0 = Dependent (D)/absent/unprofessional (UP)**At this level of performance, the student:**

- ***100% Dependent*** on instructor for assistance
- Does not meet minimum reasonable expectations
- Requires ***constant*** and ***detailed*** instructions regarding learning opportunities and is often unable to utilize them.
- Demonstrates gaps in necessary knowledge and requires ***constant*** assistance in integrating knowledge and skills.
- Is ***often*** unprepared and has ***limited insight*** into own behavior.
- Is ***constantly*** unsafe and ***unable*** to demonstrate the behavior with direct supervision
- Is late for unit clinical experience (Refer to Attendance Policy)

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Grading System Policy

Final course grades are determined by converting the percentage (points earned ÷ total possible points) to a letter grade.

The letter grade system is as follows:

93-100%	A
85-92%	B
77-84%	C
69-76%	D
68% and Below	F
Incomplete	I
Withdrawal	W
Program Dismissal	PD
Program Dismissal Permanent	PDP

Note: Only whole numbers will be used. Grades will not be rounded up.

In order to progress to the next semester or to graduate, the student must achieve a grade of “C” (2.0) or better in each required course. A student may repeat no more than one nursing course. A repeat failure of the same nursing course or failure of two different nursing courses will result in permanent dismissal. Students who have not achieved the minimum required score for clinical at the end of any nursing course receive a failure for that nursing course and the grade recorded will be a failing (F) grade regardless of the theory grade earned. Failures resulting from extenuating circumstances impacting on the student’s ability to successfully complete the course will be considered on an individual basis.

At the discretion of the instructor, an incomplete (I) grade may be assigned for a student who is passing a course but for valid reasons is unable to fully meet all course requirements by the end of the course. The method of removal for the incomplete grade will be determined by the instructor and course coordinator. If the incomplete grade is not satisfactorily removed prior to the beginning of the next semester, the grade will become a failure (F) and the student cannot progress to the next semester.

1957 Revised: 12/2013, 5/2014, 3/2015; 12/2015; 6/2016; 3/2023

Reviewed: 5/2012; 2/2017; 3/2018; 3/2019; 3/2020; 3/2021; 1/2022; 2/2024

Grade Point Average Policy

The grade point average is computed on all courses the student has attempted while enrolled in the given semesters and is based on the following grade point values:

A	B	C	D	F
4.0	3.0	2.0	1.0	0

When a student receives a grade of “I” and later removes the incomplete grade, the grade-point average is then recalculated to reflect the new grade.

Courses with a “W” or “I” status will not be used to calculate the grade point average. Courses for which the student has been granted exemption will be identified on the final transcript as transfer credits but will not be considered when calculating the grade point average.

Courses are weighted in value according to the number of hours of instruction and nature of the learning experience in each course to determine the grade point average.

15 lecture hours = 1 Unit or Credit

3 laboratory hours = 1 Lecture Hour

Note: The cumulative grade point average* includes the grade point average at the end of each of the first three semesters and following the five unit and math exams in the Nursing 400 semester. The courses attempted while enrolled in the program will determine the Valedictorian and Salutatorian of the graduating class.

*Grade Point Averages are not rounded up

1957 Revised: 7/2013, 5/2014, 3/2015, 6/2016; 3/2018; 3/2019, 3/2021; 1/2022; 3/2023; 11/2023; 2/2024

Reviewed: 5/2012; 12/2015; 2/2017; 3/2020

Honors Policy

Students are awarded honors on the basis of their cumulative grade point average* at the end of each of the first three semesters and following the five unit and math exams in the Nursing 400 semester as follows:

Highest Honors3.5 to 4.0

High Honors3.0 to 3.49

Honors2.5 to 2.99

*Grade Point Averages are not rounded up

1957 Revised: 3/2011, 3/2015, 3/2021; 11/2023; 2/2024

Reviewed: 5/2013, 5/2014; 12/2015; 6/2016; 2/2017; 3/2018; 3/2019; 3/2020; 1/2022; 3/2023

Attendance Policy

Attendance reflects the student's sense of professionalism, accountability, and commitment to their education which is essential to learning and to the application of knowledge. All students are expected to attend all classes and clinical experiences. It is every student's responsibility to plan a personal schedule around class and clinical assignments, which include clinical laboratory and community experiences. The program is planned to meet the educational needs of the entire student body and cannot be adjusted to an individual's convenience.

In order for optimal learning experiences, relative to absenteeism and tardiness, the following policy is in effect:

1. Classroom attendance is recorded in accordance with federal financial aid regulations. This information becomes part of the student's permanent record.
2. The maximum theory absenteeism that is allowed, without penalty, is 7% of the **total program hours**, or 38 hours. It is the student's responsibility to obtain any information missed during their absent theory time.
3. The maximum clinical absenteeism that is allowed, without penalty, is 5% of the **total program clinical/lab hours** or 33 hours.
 - A. A student who is more than 30 minutes late for a direct clinical experience is not to report for the experience. The entire time missed will be counted against the total absent time. Any clinical tardiness carries consequences. Being tardy for clinical on a hospital nursing unit will result in a "0" for professionalism on the Weekly Clinical Evaluation Tool.
 - B. Being tardy for an observational experience will result in a one-point (-1) deduction; inappropriately calling off will result in a two-point (-2) deduction on the score from the Rubric for Written Assignments. A makeup experience or assignment will be required at the instructor's discretion.
 - C. Being tardy for Simulation/Skills experiences will result in a dismissal from the experience; inappropriately calling off will result in a Conduct Form. A makeup assignment will be required.
 - D. If tardy for Clinical Conferences the student may only enter during break; time missed is counted as absent time; and a makeup assignment will be required. Inappropriately calling off for Clinical Conferences will result in a Conduct Form and a makeup assignment will be required.
 - E. Students are not permitted to switch schedules for non-direct or direct clinical experiences.
 - F. During the N400 leadership clinical rotation, the student must complete 168 hours of direct patient care. Any time missed during the student's scheduled 12-hour shifts with preceptors will count as 12 hours of missed clinical time for the day. Time missed during N400 will still be counted towards the maximum clinical absenteeism of 33 hours for the total program. Any missed clinical time must be made up to total 168 direct care hours to graduate. Clinical attendance during N400 is crucial for attainment and assessment of clinical learning outcomes.
4. Once class has begun the classroom doors will be shut. Students who arrive after class has begun must wait until the next class break to enter the room. The time in which the student is out of the room will be counted as absent time.

If there are specific reasons why a student must leave in the middle of class, the student, if possible, should inform the instructor ahead of time. It is not acceptable to leave the classroom to make or receive phone calls or texts. Unless there is an emergency, phone calls and texts should be made/returned at the next scheduled break. Repeatedly leaving, once class has started, will result in lost time. Adherence to this policy demonstrates respect for the faculty member as well as fellow classmates.
5. Students re-entering the program will have their maximum theory and clinical time pro-rated to reflect the remaining hours in the program. (mitigating circumstances)

Theory and clinical absent time will accumulate from one semester until the next, throughout the length of the program. Students will be notified in writing, by the Assistant Director, when they have reached 50% of the allowed absent time in clinical and/or theory. Once the maximum hours have been reached the student will be given a final written warning from the Assistant Director. Any further absenteeism occurring after the final warning will result in dismissal from the program.

1. Extenuating circumstances will be taken into consideration. The Assistant Director has the final word on what is considered extenuating. Extenuating circumstances cannot result in the accumulation of more than two weeks absent time over the maximum that is allowed in the Attendance Policy. It is felt that any time beyond two weeks, plus the maximum absent time allowed, will result in the student's inability to meet the course/program outcomes. Students are not penalized for absences related to immediate family death or military service.
2. Clinical make-up time may be required by clinical faculty who feel the student is not meeting the clinical outcomes, due to the absence for which the student calls off appropriately. Clinical make-up is not utilized for inappropriate direct clinical call offs. Clinical makeup does not erase the absent time.

Individuals, including children, who are not enrolled at Washington Health System School of Nursing, are not permitted to attend school theory or clinical sessions. This is to promote an optimal learning environment free of disruption.

Revised: 6/2016; 2/2017; 9/2017; 3/2020; 1/2022; 11/2023; 2/2024

Reviewed: 3/2018; 3/2019; 3/2021; 3/2023

Attendance Policy Grid

Student Learning Experience	Call off requirements	Repercussions if student calls off appropriately	Repercussions if student does NOT call off appropriately	Tardy arrival
	<u>Hours lost plus:</u>	<u>Hours lost plus:</u>	<u>Hours lost plus:</u>	
Theory	Not required	No repercussions for N100-N400	None for N100-N400	- No entrance until break - Time will be counted as absent time - Repeatedly leaving once class has started may result in lost time
Exams (Theory and ATI)	Absent or late Call off to the Course Coordinator prior to the start of the exam *An ATI Assessment will not be considered for rescheduling in advance of the date noted on the calendar.	<u>Theory Exams</u> - Contact Course Coordinator <u>first</u> day back to school - Exam make up immediately upon return to school unless otherwise directed 3 points deduction from the raw score of the exam <u>ATI</u> - Contact Course Coordinator <u>first</u> day back to school - Make-up ATI exam will be rescheduled	<u>Theory Exams</u> - Conduct Form - Contact Course Coordinator <u>first</u> day back to school - Exam make up immediately upon return to school unless otherwise directed 3 points deduction from the raw score of the exam <u>ATI</u> - Conduct Form - Contact Course Coordinator <u>first</u> day back to school - Make-up ATI exam will be rescheduled	<u>Theory Exams</u> - Students arriving late may choose to enter and take the exam with the time remaining, only if no student taking the exam has completed the exam and left the room. <u>ATI</u> - Exam will be rescheduled
Direct Clinical Experience (WHS)	Clinical Instructor prior to the start of the experience	- WCET is scored based on performance on clinical days attended that week - If no other days, WCET is scored as 'NA' in all competencies including professionalism - Clinical make-up time may be required by clinical faculty who feel the student is not meeting the clinical outcomes due to the absence Clinical make-ups do NOT erase absent time	<u>One Day Clinical</u> - WCET is scored as 'NA' in all competencies "0" in Professionalism for no call/no show - No clinical make-up permitted <u>Two or More Day Clinical</u> "0" in Professionalism for no call/no show - WCET is scored based on performance on days attended that week - WCET is scored as 'NA' if student is absent all clinical	- Students have 30 minutes past the scheduled start time to arrive at pre-conference - A '0' in professionalism will be score on the WCET for that week {A tardiness of greater than 30 minutes is considered a clinical absence (Refer to column: Repercussions if student does NOT call off appropriately)}

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Student Learning Experience	Call off requirements	Repercussions if student calls off appropriately	Repercussions if student does NOT call off appropriately	Tardy arrival
	<u>Hours lost plus:</u>	<u>Hours lost plus:</u>	<u>Hours lost plus:</u>	
			days for that week in all competencies No clinical make-up permitted	
Clinical Observation Experience	Clinical Instructor prior to the start of the experience	A make-up experience or assignment will be assigned at the instructor's discretion	- A make-up experience or assignment will be required at the instructor's discretion -2 points will be deducted from the rubric scoring	-1 point will be deducted from the rubric scoring
Simulation*	Absent or late call off to the Course Coordinator prior to the start of the experience	Make up assignment <u>required</u>**	- Conduct Form - Make up assignment <u>required</u>	- Dismissed from experience - Make up assignment <u>required</u> - Time will be counted as absent time
Skills*	Absent or late call off to the Course Coordinator prior to the start of the experience	Make up assignment <u>required</u>**	- Conduct Form - Make up assignment <u>required</u>	- Dismissed from experience - Make up assignment <u>required</u> - Time will be counted as absent time
Clinical Conferences*	Absent or late call off to the Course Coordinator prior to the start of the experience	Make up assignment <u>required</u>**	- Conduct Form - Make up assignment <u>required</u>	- No entrance until break - Time missed will be counted as absent time - A make-up assignment will be required

*Make up may be required prior to being permitted to attend clinical experiences scheduled following the Skills/Simulation Experience.

**Same repercussions apply if the student is not prepared, fails the pre-test exam, or does not adhere to the dress code policy.

Maximum theory absenteeism without penalty is 38 hours of the **total program hours**

Maximum clinical absenteeism without penalty is 33 hours of the **total program clinical/lab hours**

Clinical Experiences Include:

Direct Clinical Experiences

Clinical Observational Experiences

Simulation

Skills Lab/Clinical Conferences

Revised: 2/2017; 3/2020, 3/2021; 1/2022; 3/2023; 2/2024

Reviewed: 3/2018

Examination Policy

General

1. Students are required to take examinations as scheduled.
2. Students are to exit the classroom 30 minutes prior to the exam. At this time, students are **not** to enter the classroom until 10 minutes prior to the exam start time as listed on the class schedule.
3. Students are expected to retrieve their assigned I-Pad; scratch paper and a pencil is permitted and will be distributed by the proctor. Nothing else should be on the desk.
4. Prior to entering the classroom, students will be scanned for their ID badge. Once a badge check has taken place, a pencil will be given to the student by the proctor. Smart watches are not permitted during the exam session.
5. All personal items such as textbooks, notebooks, bags, purses, coats, hats, and drink containers must be left in your locker or the Student Center for the duration of the exam session. All personal items should be secured. The school is not responsible for any lost or stolen items.
6. Once the student has entered the classroom, no talking is permitted. The door will shut 5 minutes prior to the start of the exam to allow students to quietly prepare for the examination. If a student is having an issue and/or problem, the student should raise their hand and a proctor will be of assistance.
7. Access Exemplify and follow instructions to download the examination.
8. Upon completion, follow instructions to upload answers, end examination, and quietly exit the classroom.
9. Any form of misconduct during the exam session will be immediately addressed.
10. All exam sessions will be proctored.
11. Students will not be permitted to reenter the room until the exam session is completed.
12. Only individual questions concerning grammar, punctuation, and spelling will be addressed during the exam session.
13. Students arriving late may choose to enter and take the exam with the time remaining, only if no student taking the exam has completed the exam and left the room.

*Late arrival for ATI exams will result in rescheduling. Refer to the *Attendance Policy Grid*.

Missed Examinations

1. Appropriate call off is required for all exams. Inappropriate call off will result in a Conduct Form. Refer to the *Attendance Policy Grid*.
2. It is the student's responsibility to contact the Course Coordinator on the first day back to school via oral or written communication concerning the make-up examination. Students are expected to take the exam on the first day back unless otherwise directed by the Course Coordinator.
3. Any exam missed will have 3 points deducted from the raw score of the exam. Extenuating circumstances will be reviewed by the Director or Assistant Director, Staff Education/School of Nursing.
4. The type of alternate examination will be determined by the individual faculty member or teaching team.

Exam Grades

1. Results will be available to the student posted to EDU 2.0 within 24 hours after a unit examination has been given at the discretion of the faculty.
2. Results are to be released only to the student and appropriate school officials.
3. No e-mail or telephone disclosure of grades will be given.
4. Failure of a final examination with successful course completion requires satisfactory remediation prior to the start of the next course. For N400, remediation must be completed in order to graduate.

Exam Review

An exam review will be scheduled for each unit and final examination. The exam review will be conducted in a manner that facilitates maximum test security and student learning. The purpose of the exam review is to reinforce learning of course content, enhance test-taking skills and to maximize the student's educational experience. Student attendance is highly recommended for the reasons stated. After the exam review, the student will be given the opportunity to ask questions related to the rationale for both correct and incorrect answers from the appropriate faculty member. The student will need to make an appointment.

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The exam review is an optional privilege, however, highly recommended and will be conducted in a manner that facilitates maximum test security.

8/2014 Reviewed: 2/2015; 12/2015; 6/2016; 3/2018 Revised: 2/2017; 3/2019; 3/2020, 3/2021; 1/2022; 4/2022; 6/2022; 3/2023; 2/2024

Exam Test Plan Policy

All unit exams are to be reviewed for adherence to the WHSSN Exam Test Plan. The overall test plan may vary somewhat across each unit exam with an overall goal of the course average reflecting the test plan specifics.

All unit exams should attempt to meet the test plan specifics in the following categories:

1. **Nursing Process/Clinical Judgment:** The overall unit exam should equally disseminate questions across the Nursing Process/Clinical Judgment categories. Please refer to the test plan for the designated Nursing Process/Clinical Judgment dissemination of questions for Nursing 100. Nursing 100 is primarily an assessment and diagnosis course introducing the student to the planning and implementation stages. The concept of evaluation is only briefly discussed. The goal for the overall course exam average for N200, N300 and N400 should be within a +/- 3% variation from the Nursing Process/Clinical Judgment category number reflected on the WHSSN Exam test plan.
2. **Cognitive Domain:** All unit exam questions should fall into one of the two levels of the Cognitive Domain. As students' progress through the program, a larger percentage of questions should fall into the higher cognitive domain category. The goal for the overall course exam average should be within a +/- 3% variation from the Cognitive Domain WHSSN Exam Test Plan.
3. **NCLEX category:** The 2023 NCLEX Test Plan category should be represented on all unit exams with a goal for the overall course averaging a +/- 3% variation from the NCLEX exam test plan. The NCLEX test plan category should be equally disseminated through all levels of the course.
4. **Alternate format questions:** All unit exams should include the minimum number of alternate format questions defined by the Exam Test Plan and increase in number as the student progresses through the curriculum. Alternate format questions are defined by NCLEX as follows:
 - Multiple response questions - select all that apply questions
 - Hotspot questions – ask the student to identify an area on an illustration
 - Fill in the Blank questions
 - Chart/exhibit questions – contains an exhibit (rhythm strip, drawing, chart information) for reference when answering the question
 - Drag and drop questions – prioritizing or placing a list in order. Without computers this can be achieved by listing options in varying hierarchical patterns
 - Audio Questions – Answer options are in response to audio played
 - Graphic Option Questions – Answer options are all graphic choices

All unit exams will contain 50 questions (with the exception of one unit exam in N400 which will contain 25) and students will be given an average of one minute per question to complete each unit exam. As the student progresses through the curriculum, the increase in percentage of questions in the higher cognitive domain as well as the increase in number of alternate question types while maintaining the same limit on completion time, increases the level of difficulty within each course level.

The Exam Test Plan Policy does not apply to alternate exams.

8/2014 Reviewed: 2/2015; 12/2015; 6/2016; 3/2018 Revised: 2/2017; 3/2019; 3/2020, 3/2021; 1/2022; 4/2022; 6/2022; 3/2023; 2/2024

WHSSN's Exam Test Plan

Nursing Process	N100	N200*	N300*	N400*
Assessment/Recognizing Cues	20	10	10	10
Diagnosis/Hypothesis	15	10	10	10
Planning/Generating Solutions	5	10	10	10
Implementation/Take Action	7	10	10	10
Evaluation/Evaluate Outcomes	3	10	10	10

***N200, N300 and N400 should equally disseminate questions across the nursing process categories.**

Cognitive Domain	N100	N200	N300	N400
Foundational (Remember/Understand)	80% - 40	60% - 30	40% - 20	20% - 10
Critical Thinking/Clinical Judgment (Apply/Analyze)	20% - 10	40% - 20	60% - 30	80% - 40

As students' progress through the program, a larger % of questions should fall into the higher cognitive category.

NCLEX Category	N100	N200	N300	N400
Management of Care (20%)	10	10	10	10
Safety & Infection Control (12%)	6	6	6	6
Health Promotion & Maintenance (10%)	5	5	5	5
Psychosocial Integrity (8%)	4	4	4	4
Basic Care & Comfort (10%)	5	5	5	5
Pharmacy/Parenteral (14%)	7	7	7	7
Risk Reduction (12%)	6	6	6	6
Physiological Adaptation (14%)	7	7	7	7

The 2023 NCLEX Test Plan category should be represented on all unit exams.

Question Total # & Time	N100	N200	N300	N400
# of Questions averaging one minute per question	50	50	50	25/50
# of Alternate Format Questions	5 (10%)	5 (10%)	6 (12%)	8 (16%)

8/2014 Reviewed: 2/2015; 12/2015; 6/2016; 3/2018 Revised: 2/2017; 3/2019; 3/2020, 3/2021; 1/2022; 4/2022; 6/2022; 3/2023; 2/2024

ATI Content Mastery Series Assessments and Remediation Policy

The ATI Standardized Testing Program is used by Washington Health System School of Nursing to identify group and individual knowledge strengths and weaknesses; provide essential data regarding a student's mastery of concepts in relation to specific nursing content areas; and to support change in the curriculum when patterns are identified.

The responsibility for reviewing ATI group test results, and identifying patterns supporting the need for curriculum changes, belongs to the faculty.

The responsibility for individual student remediation belongs to the student under the supervision of their Academic Advisor.

Before taking a Standardized Proctored Assessment, the students will be required to demonstrate command of information and have the ability to apply patient needs categories by completing Practice Assessments.

For all content areas, students must complete Practice Assessment A by the due date/time indicated on the class schedule. Following Practice Assessment A, students are required to create a *Focused Review*® based upon the results of

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the first attempt to guide remediation, through recommended use of the Content Mastery Series Review Modules and Active Learning Templates to review content deficiencies. Once the remedial time frame has been satisfied by the student, the student will need to submit two (2) critical facts learned for each missed topic to their Academic Advisor by the due date and time indicated on the class schedule. Failure to submit the assignment on time will result in a conduct form. The student will then be required to assess their better understanding of the content by completing Practice Assessment B by the due date/time indicated on the class schedule. Students are again required to create a *Focused Review*® based upon the results of the first attempt to guide remediation, through recommended use of the Content Mastery Series Review Modules and Active Learning Templates to review content deficiencies. Once the remedial time frame has been satisfied by the student, the student will need to submit two (2) critical facts learned for each missed topic to their Academic Advisor by the due date and time indicated on the class schedule. Failure to submit the assignment on time will result in a conduct form. Satisfactory *Focused Review*® remediation from Practice Assessment A and B is to be completed prior to sitting for the Standardized Proctored Assessment. If a student does not satisfactory complete the *Focused Review*® remediation from Practice Assessment A and B, the student will be awarded zero (0) points.

All students are required to take Standardized Proctored Assessment. Any students scoring below the Level III proficiency cut score, reflected in the composite percentage scores below, will be required to create a *Focused Review*® to guide remediation, through recommended use of the Content Mastery Series Review Modules and Active Learning Templates to remediate content deemed deficient. Once the remedial time frame has been satisfied, the student will need to submit two (2) critical facts learned for each missed topic to the Course Coordinator by the due date and time indicated on the class schedule. Failure to submit the assignment on time will result in a conduct form. If a student does not satisfactory complete the *Focused Review*® remediation from the Standardized Proctored Assessment, the student will be awarded zero (0) points. The Remedial Proctored Assessment will be administered as noted on the class schedule. Any student scoring below a Level II on the Standardized Proctored Assessment is required to take the Remedial Proctored Assessment.

ATI Content Mastery Series assessment scores count for 10% or less of a student's grade determined each semester by the number of Standardized Proctored Assessments administered. Points will be awarded according to the Content Mastery Series Grading Rubric and the Comprehensive Predictor Grading Rubric. Partial points will **NOT** be awarded. If the Remedial Standardized Proctored Assessment score falls below the Level II proficiency cut score, the student's Academic Advisor will review the weak areas assessed by their results and direct them to resources for further remediation. A score of a Level II proficiency or higher on the Remedial Standardized Proctored Assessment will be awarded points equivalent to a 77%. Please refer to the *Student ATI Assessment and Review Policy and Grading Rubrics* below for further information.

Students who are absent from an ATI Proctored Assessment and who have called off appropriately will be reschedule by the Course Coordinator.

As with any exam, an ATI Proctored Assessment will **not** be considered for rescheduling in advance of the date noted on the calendar.

Refer to the *Attendance Policy Grid* for repercussions if the student does not call off appropriately or is tardy to the Proctored Assessment.

Student ATI Assessment and Review Policy

The comprehensive ATI review program offers the following to students:

- A comprehensive, assessment-driven review program designed to enhance student NCLEX® success.
- Multiple assessment and remediation activities. These include assessment indicators for academic success, critical thinking, and learning styles. Additionally, online tutorials, online practice tests, and proctored tests are provided and span major content areas in nursing. These ATI tools, in combination with the nursing program content, assist students to prepare effectively, helping to increase their confidence and familiarity with nursing content.
- ATI Orientation resources, such as the ATI Plan that can be accessed from "My ATI" tab. **It is highly recommended that you spend time navigating through these orientation materials.**

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REVIEW MODULES/EBOOKS

ATI provides Review Modules in eBook formats that include written and video materials in key content areas. Students are encouraged to use these modules to supplement course work and reading. Instructors may assign chapter reading either during a given course and/or as part of active learning/remediation following assessments.

TUTORIALS TO SUPPORT ASSESSMENT AND REMEDIATION PROCESS

ATI Pulse introduces new predictive capabilities that build on existing Pulse functionality by generating dynamic predictions of the likelihood of students to achieve at least a Level 2 proficiency on the first attempt for each Content Mastery Series (CMS) proctored assessment – providing faculty and students with even earlier insights into future performance on the proctored assessments that ultimately are used to predict NCLEX success, as well as earlier warning for students not on track to succeed. Predictions of likelihood to succeed will generate as students complete coursework and practice assignments within each of the CMS areas, before they even attempt the proctored exam. Additionally, ATI Pulse provides prescriptive, data-backed recommended ATI learning activities for students to improve their likelihood of proctored CMS assessment success.

For example, ATI offers unique tutorials that are designed to teach nursing students how to think like a nurse, how to take a nursing assessment, and how to make sound clinical decisions. Nurse Logic is an excellent way to learn the basics of how nurses think and make decisions. Learning System offers practice quizzes in specific nursing content areas that allow students to apply valuable learning tools from Nurse Logic. ATI is committed to increasing student confidence by providing students with experience answering NCLEX-style questions in a variety of quizzing formats. With Learning System, students can assess their knowledge through pre-set quizzes, build a customized quiz that focuses on specific categories, or test their category-specific comprehension in an adaptive quizzing environment.

ASSESSMENTS

The Content Mastery Series Assessments (CMS) provide essential data regarding a student's mastery of concepts in relation to specific nursing content areas, including a series of Targeted Medical Surgical assessments that address individual body systems to provide formative evaluation of content prior to the final medical surgical course. There are practice assessments available for students as well as standardized proctored assessments that may be scheduled during courses. These assessments will help students identify what they know, in addition to areas requiring remediation (called Topics to Review).

FOCUSED REVIEWS/ACTIVE LEARNING/REMEDIATION

ATI Focused Review facilitates the post CMS assessment remediation experience for students. This personalized learning experience uses a student's performance on the CMS practice and proctored assessments to drive focused student learning. Once the student has completed a CMS practice assessment, Focused Review automatically assesses the student's learning gaps and generates a personalized learning experience. Focused Review provides ATI Review Module content in an eBook experience while highlighting the specific elements of content that a student should review. The forms of content include text, image, sound, and video. When the student has completed their first round of remediation (practice assessments only), they can take a post-remediation quiz that provides similar questions on identified content gaps. Upon completion of the quiz, the student can review their knowledge gaps and study updated eBook content. The post-remediation quiz is intended to provide feedback on remediation impact. If the student has completed a CMS proctored assessment, Focused Review provides ATI Review Module content in an eBook experience that is viewed by chapter versus a specific highlighted presentation. There is no post-remediation quiz generated for proctored assessments.

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ATI RECOMMENDED CUT SCORES

RN CMS 2023 PROCTORED ASSESSMENTS	LEVEL 1 CUT SCORE	LEVEL 2 CUT SCORE	LEVEL 3 CUT SCORE
Adult Medical Surgical (90 items)	56.7% to 68.8%	68.9% to 82.1%	82.2% to 100.0%
Community Health (50 items)	58.0% to 73.9%	74.0% to 83.9%	84.0% to 100.0%
Fundamentals (60 items)	50.0% to 64.9%	65.0% to 81.6%	81.7% to 100.0%
Leadership (60 items)	60.0% to 76.6%	76.7% to 89.9%	90.0% to 100.0%
Maternal Newborn (60 items)	55.0% to 66.6%	66.7% to 81.6%	81.7% to 100.0%
Mental Health (60 items)	56.7% to 66.6%	66.7% to 84.9%	85.0% to 100.0%
Pediatric Nursing (60 items)	51.7% to 64.9%	65.0% to 78.2%	78.3% to 100.0%
Nutrition (60 items)	48.3% to 66.6%	66.7% to 83.2%	83.3% to 100.0%
Pharmacology (60 items)	53.3% to 71.6%	71.7% to 86.6%	86.7% to 100.0%

CONTENT MASTERY SERIES GRADING RUBRIC
(This sample assumes a course worth 100 points)

PRACTICE ASSESSMENT	
4 POINTS	
Complete Practice Assessment A <i>Remediation:</i> For each topic missed, complete a focused review identifying two (2) critical points to remember	Complete Practice Assessment B <i>Remediation:</i> For each topic missed, complete a focused review identifying two (2) critical points to remember

STANDARDIZED PROCTORED ASSESSMENT			
<i>Level 3 = 4 points</i>	<i>Level 2 = 3 points</i>	<i>Level 1 = 1 point</i>	<i>Below Level 1 = 0 points</i>
No remediation <u>required</u>	Remediation = 2 points: For each topic missed, complete a focused review identifying two (2) critical points to <u>remember</u>	Remediation = 2 points: For each topic missed, complete a focused review identifying two (2) critical points to <u>remember</u>	Remediation = 2 points: For each topic missed, complete a focused review identifying two (2) critical points to <u>remember</u>
10/10 points	9/10 points	7/10 points	6/10 points
PROCTORED ASSESSMENT RETAKE			
<i>No retake required</i>	<i>No retake required</i>	<i>Retake required</i>	<i>Retake required</i>
STANDARDIZED PROCTORED REMEDIAL ASSESSMENT			
Score of a Level 2 or higher will be awarded points equivalent to a 77% No changes to points will be awarded for a score of Level 1 or below			

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COMPREHENSIVE PREDICTOR GRADING RUBRIC
(This sample assumes a course worth 100 points)

PRACTICE ASSESSMENT			
4 POINTS			
Complete Practice Assessment A		Complete Practice Assessment B	
Remediation:		Remediation:	
For each topic missed, complete a focused review identifying two (2) critical points to remember		For each topic missed, complete a focused review identifying two (2) critical points to remember	

STANDARDIZED PROCTORED ASSESSMENT			
95% or above Passing predictability = 4 points	90% or above Passing predictability = 3 points	85% or above Passing predictability = 1 point	84% or below Passing predictability = 0 points
No remediation required	Remediation = 2 points:	Remediation = 2 points:	Remediation = 2 points:
	For each topic missed, complete a focused review identifying two (2) critical points to remember	For each topic missed, complete a focused review identifying two (2) critical points to remember	For each topic missed, complete a focused review identifying two (2) critical points to remember
10/10 points	9/10 points	7/10 points	6/10 points

PROCTORED ASSESSMENT RETAKE			
No retake required	No retake required	Retake required	Retake required

STANDARDIZED PROCTORED REMEDIAL ASSESSMENT			
Score of a 90% or above passing predictability will be awarded points equivalent to a 77% No changes to points will be awarded for a score of 89% or below passing predictability			

5/1994 Reviewed: 2/2024 Revised: 11/2001; 3/2012; 7/2013; 4/2014; 3/2015; 10/2015; 6/2016; 2/2017; 3/2018; 1/2019; 3/2019; 3/2020; 3/2021; 1/2022; 6/2022; 3/2023; 12/2023

Assignment Submission Policy

Clinical Paperwork

All clinical paperwork must be electronically submitted no later than 8:00 A.M. on the assigned due date unless otherwise directed. The instructor must be notified of any request for extensions prior to the due date/time. A maximum limit of two (2) assignment extension requests per semester is permitted. The student will be notified by the instructor as to the extension stipulations. Assignment extension requests will be documented on the FCET and monitored throughout the course. Extenuating circumstances will be determined by the School of Nursing Assistant Director when deemed appropriate. It is the responsibility of the student to verify with the instructor that the assignment has been received by the due date/time.

Failure to electronically submit an assignment on time will result in:

1. Direct clinical experience paperwork (NPW) - a zero (0) in the professionalism competency.
2. Assignments identified on the FCET (-1) point will be deducted from the student's score if submitted past the due date and time and each academic day there after (not all assignments require a rubric).

1/2013 Revised: 2/2015; 12/2015; 6/2016; 3/2018; 1/2019; 3/2019; 3/2020

Reviewed: 7/2013, 7/2014; 2/2017, 3/2021; 1/2022; 3/2023; 2/2024

Student Documentation Policy

WHS requires nursing students and clinical instructors to document in the electronic medical record (Sunrise) in a manner that reflects complete and accurate assessment data and care provided during the clinical experience on all assigned patients and/or care provided to other patients as directed by the clinical instructor or registered nurse. It is required that WHS provide education/training on the electronic medical record (Sunrise) to the nursing students and clinical instructors prior to the implementation of documentation. It is also required that WHS provide education/training regarding the purpose and proper usage of the Knowledge Based Medication Administration (KBMA)

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prior to the administration of medications within the WHS. WHS requires education/training on the Pyxis System prior to the utilization of the medication dispensary.

Sunrise Charting

WHSSN students are required to attend Information System (IS) training provided by the staff of the WHS IS department prior to being provided with their individual secured sign-on code to gain access to the Sunrise system. Once the student has successfully completed each module assigned per course, the student is deemed responsible to document via the electronic system in areas instructed in the training session. The student's sign-on code becomes their electronic signature which appears with each entry. The instructor is responsible for reviewing each student charting for completeness and accuracy. The student assumes accountability for any documentation recorded in the Sunrise system. In addition to the student's electronic entry, the nurse assigned to the patient also records their assessment data.

The IS schedule for the WHSSN student's module training is as follows:

MODULE A –

Nursing100 – 3 hours

Vital Signs/I&O/Pain Assess/Result Retrieval:

1. Flowsheet Power Point Presentation
2. Chart Vital Signs (VS)
3. Chart Heights and Weights
4. Chart Intake and Output (I&O)
5. Chart Pain Assessment (Vitals Flowsheet)
6. Error Data (Flowsheets)
7. Retrieve VS, Weight, I&O
8. Locate Patients
9. Retrieve Results
10. Chart Tab Overview
11. Lab – Adding Specimen and Status Collection
12. Blood Administration VS Charting on Flowsheet

Clinical Assessment Documentation:

1. KBC Power Point Presentation
2. CPG Power Point Presentation
3. KBC – Knowledge Based Charting
4. CPG – Clinical Practice Guideline Retrieval
5. Error Data
6. Retrieve KBC

*****NOTE: SN's cannot initiate Clinical Practice Guidelines (CPG's)**

MODULE B –

Nursing 100 – 2 hours

Medications: KBMA/Worklist

1. Chart Scheduled Medications
2. Chart Unscheduled Medications
3. Chart AC, PC, HS Scheduled Meds
4. Retrieve Medication Charting
5. Order Message Manager
6. KBMA Power Point Presentation
7. KBMA Hands-on Demonstration
8. Chart Parenteral with KBMA- Begin
9. Chart Parenteral on Worklist - Observe, End, In Place From,
10. Intravenous (IV) Assessment Charting
11. Retrieve IV Charting
12. Micromedex
13. Lippincott- Patient Information Sheets
14. Info Button Information Sheets

MODULE C– Nursing 400 – 2 hours

1. Charting Health Assessment Summary
2. Chart Health History
3. Chart Admission Assessment
4. Updating Allergies and Health Issues
5. Structured Notes (i.e. Event Note, Transfer/Discharge)
6. CPG Education
7. General Nursing Education Documentation

Pyxis and KBMA Documentation

WHSSN students are required to attend a one-hour training session with a staff member of the WHS Pharmacy prior to being provided with an individual secured sign-on code and fingerprint for the Pyxis Medication Dispensary. The student's sign-on code becomes their electronic signature which appears upon each access attempt and is documentation of medications obtained, returned, and wasted. Once the students have attended the training session, they are granted access to the Pyxis units on the WHS departments. The instructor monitors and evaluates the individual student's ability to accurately retrieve medication from the Pyxis and provides remediation as appropriate.

The student's sign-on code, which is their network sign-on, becomes their electronic signature which appears with each entry. WHSSN students are to utilize the KBMA with each medication being administered as per the WHS policy for safe medication handling. By using the KBMA, the medication is automatically charted electronically along with the name of the individual administering. The student assumes accountability for medications administered and is held to the same standard as the registered nurse.

DOO: 10/22/96 Reviewed: 12/6/96, 12/98, 11/99, 12/09, 02/10, 1/12, 3/12, 5/13, 1/14, 1/15, 2/2016, 2/2017; 3/2018; 3/2020, 3/2021; 1/2022; 3/2023; 2/2024

Student Medication Administration Policy

Special Considerations

1. Students are responsible for demonstrating safe medication practices at all times in accordance with the safe standards of nursing practices. These practices include:
 - Knowledge of the six rights of medication administration
 - Knowledge of medication action
 - Knowledge of safe dosage for adults, seniors, and children
 - Knowledge of side effects and special considerations for administration
2. Students must demonstrate preparedness by performing the following:
 - Having all medications to be administered readily available prior to interaction with the instructor for the verification process.
 - Having assessed the patient for any additional information that may be required before medication administration, e.g., apical heart rate, blood pressure, lab values, routes for delivery.
 - Demonstrating organization and knowledge of medication(s) to be administered
3. Failure to demonstrate safe medication practices or preparedness may result in the student being unable to administer medication for that clinical experience and may result in a "0" on the weekly evaluation tool for the behavioral criterion reflecting medication safety. Direct supervision may be required depending on the discretion of the instructor.
4. Students are not permitted to access narcotics or waste narcotics without the presence of an instructor/preceptor.
5. Insulin dosages and high alert medications must be prepared and witnessed with the instructor/preceptor.
6. At no time will a student flush an IV that has stopped infusing without direct supervision of instructor/preceptor.
7. The changing of peripheral IV dressings may be done by a student under the direct supervision of the clinical instructor. (Nursing 400 only - may also be supervised by a registered nurse preceptor.)
8. Hyperalimentation solutions via central lines and blood products will be administered by the RN only.
9. Students are not to witness or verify the information contained on the Product Identification Form and the Patient Identification Form prior to administration of blood products.
10. Students cannot administer the following IV medications. This includes phenytoin, haloperidol, propofol, iron dextran, and panhematin.

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11. Student administration of vesicant medications will be at the discretion of the instructor. (Refer to *WHS Medication Management-Medications Policy*)

Nursing 100/200

- A. All medications require direct verification with the nursing instructor prior to administration.
- B. All medications require direct supervision by the instructor during the administration process.
- C. During Nursing 100/200 students are responsible for the following in the administration of intravenous medications:
 - 1) Primary Intravenous (IV)- Peripheral and Central Lines
 - a) Verifying the order. If any concern about the order is noted, check the health care providers order entry.
 - b) Identifying proper solution.
 - c) Documenting date/time administered on IV label when applicable.
 - d) Calculating and monitoring the IV rate.
 - e) Changing primary bag with direct instructor supervision.
 - f) Regulating IV rate with direct instructor supervision.
 - g) Assessing IV site.
 - h) Discontinuing IV or IV plug when ordered with direct instructor supervision.
 - i) Documenting per hospital policy.
 - 2) IV Mini-Bag
 - a) Calculating and monitoring drop rate when applicable.
 - b) Assessing the IV site.
 - c) Adding Mini-Bag to primary IV line or IV plug with direct instructor supervision.
 - d) Flushing IV plug with normal saline per shift order and/or before and after administering medication with direct instructor supervision.
 - e) Changing tubing according to current hospital policy.
 - f) Regulating IV rate with direct instructor supervision.
 - g) Documenting per hospital policy.
 - 3) Blood Transfusions
 - a) Monitoring IV rate.
 - b) Assessing IV site and for signs of transfusion reaction.
 - c) Regulating IV rate with direct instructor supervision.
 - d) Documenting per hospital policy.

Nursing 200

- A. All medications require direct verification with the nursing instructor prior to administration.
- B. All medications require direct supervision by the instructor during the administration process.
- C. During Nursing 200, in addition to the requirements and identified responsibilities for intravenous medications in Nursing 100/200, the Nursing 200 student will also be responsible for the following regarding intravenous medications:
 - 1) Monitoring Peripheral Parenteral Nutrition (PPN).
 - 2) Administering PPN under direct instructor supervision.
 - 3) Discontinuing mid-line catheters as per hospital policy with direct instructor supervision.
 - 4) Administering IV solutions or medications via mid-line catheters with direct instructor supervision.
 - 5) Monitoring patient-controlled analgesia (PCA).

Nursing 300

- A. All medications require direct verification with the nursing instructor prior to administration.
- B. During Nursing 300, in addition to responsibilities identified for Nursing 100 and Nursing 200 regarding intravenous medications, the student will be responsible for:
 - 1) Initiating, changing, and discontinuing Patient Controlled Analgesia (PCA) under direct instructor supervision.
 - 2) Administering IV push medications and flush solutions under direct instructor supervision.
 - 3) Documenting per hospital policy.

Nursing 400

- A. All medications require direct verification with the nursing instructor and/or assigned RN preceptor prior to administration.
- B. During Nursing 400, in addition to responsibilities identified for Nursing 100 through Nursing 300 regarding intravenous medications, the student will be responsible for:
 - 1) Monitoring Total Parenteral Nutrition (TPN)/hyperalimentation.
 - 2) When assigned to the Critical Care Unit or Emergency Department, administering IV medications under direct supervision of the instructor and/or assigned RN preceptor.
 - 3) Adding medications to IV solutions via peripheral lines after being verified by the clinical instructor and follow the *WHS IV Medication Policy for Registered Nurses/LPNs*.
 - 4) Students will insert intravenous (IV) angiocaths once the IV insertion skill is completed. Students will perform IV procedures under the direct supervision of the Instructor and/or RN Preceptor.
- C. Students will prepare and administer medications with observation of RN preceptor/instructor according to hospital policy.
- D. During Nursing 400, in addition to responsibilities identified for Nursing 300 regarding intravenous medications, the student will be responsible for:
 - 1) Administering IV solutions via peripheral line after being verified by the clinical instructor or a registered nurse.
 - 2) Administering IV solutions and medications via central lines under direct instructor or RN preceptor (may also be supervised by a registered nurse).
 - 3) Administering IV push medications and flushing solutions via peripheral and central lines under direct supervision of instructor or RN preceptor (may also be supervised by a registered nurse).

Medication Errors

Students are responsible for demonstrating safe medication practices at all times in accordance with the safe standards of nursing practices. In the event a medication error occurs, the clinical instructor and student will follow the procedure outlined in the *WHS Medication Management-Medications Policy*. In addition, the student will be required to complete a Medication Error Remediation Sheet. An instructor must accompany the student to give medications after a medication error. The clinical instructor will also be responsible for completing a Confidential Report of Medication Error form and submitting to the Assistant Director Staff Education/SON.

MEDICATION ERROR REMEDIATION SHEET**Washington Health System School of Nursing**
Medication Error Remediation Sheet

This remediation sheet is to be completed for actual ☐ and potential ☐ medication errors.

Student's Name: _____ Date: _____

Instructor's Name: _____ Date: _____

Course: Nursing 100 ☐ Nursing 200 ☐ Nursing 300 ☐ Nursing 400 ☐

Please respond to the following questions:

1. Identify what factor or factors led up to this medication error.
2. Identify which of the "6 Rights of Medication Administration" that were not followed.
3. Describe how you would improve your medication administration process.
4. Describe the effect of medication error on patient safety.
5. Describe any follow-up that was done. (i.e. another medication had to be given; the physician had to be contacted).

The first time after an actual medication error, an instructor will accompany the student to give medications.

Signature of Instructor Accompanying Student to Give Medications
Following Actual Medication Error

Date: _____

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CONFIDENTIAL REPORT OF MEDICATION ERROR FORMThe Washington Hospital School of Nursing
CONFIDENTIAL REPORT OF MEDICATION ERROR**TO:** Assistant Director/Director, School of Nursing**FROM:** _____**DATE:** _____**STUDENT NAME:** _____**DATE & TIME OF OCCURRENCE:** _____**UNIT:** _____**NAME OF MEDICATION:** _____**DETAILS OF INCIDENT:**

Alteration of Theory/Clinical Experiences Policy

All theory and clinical practice which has been cancelled, postponed, or changed by Washington Health System School of Nursing due to unanticipated circumstances such as inclement weather, labor disputes, natural disaster, low patient census, overcrowding of clinical units, change in the licensure status of an agency, outbreak of communicable disease, instructor illness, etc. will be rescheduled. The make-up for missed experiences and/or assignments will be determined by the individual faculty member and/or the teaching team.

Note: The School of Nursing does not expect any student to place themselves in danger while traveling to the school during inclement weather. Students are expected to evaluate for themselves the potential for these hazards as they may occur. However, students must also be aware that the hospital does not have the luxury of closing their doors for inclement weather, and as students are preparing to function in this health care system, it is important for them to develop good attendance and punctuality habits. Every effort within good reason and sound judgment should be made to attend classes and clinical experiences. Cancellation or delay of school for a particular day refers to both classes and clinical experiences. Announcements of these schedule changes will be through EDU 2.0.

*If no announcement is made on EDU 2.0 and the student fails to come to theory and clinical, then the hours will be counted as absent hours. See *Attendance Policy/Attendance Policy Grid*.

11/1995 Revised: 7/2013, 2/2015, 6/2016; 3/2019; 1/2022; 3/2023 Reviewed: 5/2012, 4/2014; 12/2015; 2/2017; 3/2018; 3/2020; 3/2021; 2/2024

Professional Development Criteria Policy

The student is expected to behave in a professional manner as evidenced by:

1. using acceptable language.
2. interacting respectfully with others.
3. accepting and implementing constructive criticism in a positive manner.
4. submitting assignments as directed.
5. promptly reporting incidents or errors.
6. preparing adequately for assignments.
7. adhering to the Call Off Procedure.
8. adhering to the highest standards of honesty, integrity, and accountability with clinical and theory assignments

Offenses to the Professional Development Criteria Policy in clinical are cumulative within each course and are included for evaluation on the Weekly Clinical Evaluation Tool for each nursing course under professionalism.

Violation of the Professional Development Criteria Policy outside of clinical experiences evaluated on the final clinical evaluation tool (FCET) will result in implementation of the *Student Conduct Policy*.

6/1993 Revised: 1/2013, 7/2013, 5/2014; 6/2016; 2/2017; 3/2019; 3/2023

Reviewed: 5/2012, 2/2015; 12/2015; 3/2018; 3/2020; 3/2021; 1/2022; 2/2024

Academic Warning Policy

A student whose performance is unsatisfactory (less than 77%) in the theory components will be given an *Academic Warning Form* to be completed and signed after each occurrence.

Academic Warning Process**First occurrence of unsatisfactory performance**

The student is encouraged to meet with their Academic Advisor to discuss performance and develop a plan for improvement as appropriate.

Subsequent occurrence of unsatisfactory performance

The student is ~~required~~ to meet with their Academic Advisor or designated WHSSN faculty as necessary to review a plan for improvement and performance, until goal is accomplished, the student withdraws from the program, or the student fails to satisfactorily meet the course outcomes.

8/1969 Revised: 4/2014, 2/2015, 2/2017; 3/2018; 3/2021; 3/2023; 2/2024

Reviewed: 5/2012, 7/2013; 12/2015; 6/2016; 3/2019; 1/2022

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Academic Warning Form

Washington Health System School of Nursing
Academic Warning Form

Student: _____ Unit Exam Number: _____
 Course: _____ Year: _____ Occurrence Number: _____
 Total number of points needed to pass: _____
 Signature of Student/Date: _____

(Student signature verifies that they are aware of the total number of points needed to pass.)

Issue _____

Meeting Date and Location: _____

Signature of Faculty: _____ Date: _____

Plan for Improvement:

Student: Student will review their individual exam report, that outlines their strengths and areas for improvement. The student will meet with their advisor prior to next exam.

Faculty: It is suggested that the student will: review their exam report, complete required readings, and utilize suggested and required resources.

Faculty/Student agree to the plan for improvement.

Signatures:

Student: _____ Date: _____

Faculty: _____ Date: _____

Test review attended (date) _____

Follow-up session will be scheduled as appropriate.

Copy of document to the student. Original copy in student's file.

Student Conduct Policy

All students are expected to adhere to School of Nursing and hospital policies and procedures. If a student violates a standard and/or policy (not reflected through the FCET), action will be taken according to the Conduct Procedure as outlined below.

Conduct Procedure

A Conduct Form will be completed for each individual offense and forwarded to the Course Coordinator and the Assistant Director, School of Nursing. The third Conduct Form within a semester will result in Program Dismissal. School administration will consider extenuating circumstances on an individual basis.

Conduct Forms will be progressive through each semester but will not carry over from semester to semester.

The student is *required* to meet with the Course Coordinator after they have received two (2) *Conduct Forms*.

A copy of the document is to be given to the student and the Assistant Director, Staff Education/School of Nursing. The Course Coordinator is to receive a copy of the document as soon as it is written by the instructor. Original copy goes in student's file.

The completed Conduct Form will be placed in the student's permanent record and the student will be given an electronic copy.

Serious Offense Violations, as defined below, will result in Program Dismissal Permanent (PDP), unless mitigating circumstances occur. If signs of impaired behavior are observed, the *Alcohol and Drug Abuse Policy* will be followed.

Serious Offense Violations

The following Serious Offense Violations will result in immediate PDP unless mitigating circumstances occur:

- Falsification of information
- Plagiarism
- Verbal, physical, and/or sexual abuse of others
- Theft or destruction of hospital or school property
- Breach of Confidentiality
- Misuse of communication technology; written or verbal communication (including, but not limited to, video, texting, electronic devices, and internet use).

The Assistant Director will review the mitigating circumstances and make a final decision.

A Conduct Form will be completed for Serious Offense Violations and placed in the student's permanent record. The student will be given an electronic copy.

Students who wish to dispute the findings may use the *Student Fair Treatment/Grievance Procedure*.

1975 Revised: 5/2014, 2/2015, 6/2016; 3/2019; 1/2022; 3/2023 Reviewed: 5/2012, 7/2013; 12/2015; 2/2017; 3/2018; 3/2020, 3/2021, 1/2022; 2/2024

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CONDUCT FORM

WASHINGTON HEALTH SYSTEM SCHOOL OF NURSING
CONDUCT FORM

STUDENT: _____

COURSE: _____ **DATE:** _____

POLICY IN VIOLATION:

ISSUE:

MEETING DATE AND LOCATION: _____

STUDENT COMMENTS:

SIGNATURES: FACULTY: _____ **DATE:** _____

STUDENT: _____ **DATE:** _____

A copy of the document is to be given to the student, Assistant Director, Staff Education/School of Nursing, and Course Coordinator.

Original copy goes in student's file.

Leave of Absence Policy

A student desiring to take a leave of absence must submit the request in writing to the current Course Coordinator in which the student is enrolled and include the beginning and ending dates and the reason for desiring a leave of absence. The Director or Assistant Director, Staff Education/School of Nursing will determine the terms of the leave of absence.

A leave of absence of any length that prohibits the student from completing the semester in which the leave of absence is started must be extended until the beginning of the next semester that same course is offered. After that time, the student will be considered withdrawn from the school and must apply for readmission and follow the *Readmission and Placement Policy*.

Revised: 5/2014, 2/2015; 12/2015; 6/18, 1/2022 Reviewed: 5/2012, 7/2013; 6/2016; 2/2017; 3/2018; 3/2019; 3/2020, 3/2021; 3/2023; 2/2024

Withdrawal Policy

Students may withdraw from the nursing program one time. Exceptions are at the discretion of the Director or Assistant Director, Staff Education/School of Nursing.

A student who wishes to withdraw must notify the Course Coordinator of this intention. The official withdrawal date will be the date of notification.

If a student is absent for five (5) consecutive school days, a certified letter will be mailed to the student indicating that they must contact the School of Nursing within the specified time frame indicated in the letter in order to declare their status in the program. If the student does not respond within the time period indicated, they will be considered officially withdrawn. The withdrawal date will be the response deadline indicated in the certified letter.

Grade transcripts of students who withdraw from the program will be marked as follows:

W- Withdrawal.

For financial aid purposes, the withdrawal date will be the last day of documented attendance.

Addition: A student has the opportunity to withdraw from the program at any time prior to the last three weeks of the course enrolled in. If the student is failing without ability to attain a passing score within the last three (3) weeks of the course, the request for withdraw will be denied and a failure (F) will be awarded as the course outcome.

Revised: 9/2013, 5/2014; 10/2019, 3/2021, 1/2022; 3/2023 Reviewed: 5/2013, 2/2015; 12/2015; 6/2016; 2/2017; 3/2018; 3/2019; 3/2020; 2/2024

Dismissal Policy

Students who are dismissed will receive either a Program Dismissal (PD) or Program Dismissal Permanent (PDP).

Students who receive a PDP will not be considered for readmission. Refer to the *Student Conduct Policy*.

1957 Revised: 5/2007, 3/2010 Reviewed: 5/2014, 2/2015; 12/2015; 6/2016; 2/2017; 3/2018; 3/2019; 3/2020; 3/2021; 1/2022; 3/2023

Readmission and Placement Policy

All candidates seeking readmission must meet current admission criteria. An application for readmission must be submitted, along with a \$40.00 non-refundable readmission fee, by the established deadline date via check or money order.

A student who is dismissed for academic reasons, failure to meet clinical requirements, or voluntarily withdraws is no longer considered a student of the school, but may apply for readmission. All readmission requests will be considered on an individual basis but are very limited; students are not guaranteed readmission. The student's previous record will be reviewed and final determination for readmission will be made by the Recruitment and Admissions Committee.

The readmission application must be completed prior to Recruitment and Admissions Committee consideration. The applicant must be in good standing with the school of nursing, must have met any financial obligations, and must have submitted the application fee 12-weeks prior to the admission date.

The Recruitment and Admissions Committee Chairperson will notify the applicant in writing of the committee's decision regarding provisional readmission including any stipulation requirements.

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Once provisional readmission is approved, the student must comply with the following in a timely manner to attend scheduled mandatory theory and clinical testing and any mandatory hospital or school orientations. Failure to meet testing dates may cause the student's readmission to be eliminated for this specific upcoming course.

1. Provide proof of current BLS certification, (American Heart Association Basic Life Support for Health Care Providers Course) that is valid through the end of the program.
2. Submit a completed health record including health history, physical examination, urinalysis, and immunization record.
3. Complete a urine and hair follicle drug screen through WHS EHS. A positive drug screen will eliminate the possibility of readmission.
4. Obtain a flu vaccine if the readmission start is granted for January.
5. Apply for current Pennsylvania State Police Request for Criminal Record Check Online site for Pennsylvania Clearances (only if greater than 5 years):

<http://keepkidssafe.pa.gov/resources/clearances/index.htm>

- Pennsylvania State Police Request for Criminal Record Check
- *Child Abuse History Clearance*
- Pennsylvania Department of Public Welfare *FBI Fingerprint-Based Background*

The original certificates must be provided to the School of Nursing following completion of Criminal Record Check, Child Abuse History Clearance, and FBI Fingerprint-Based Background Check.

6. Submit proof of compliance with any readmission stipulations placed upon the student.
7. Attend the orientation sessions to satisfactorily complete any Symplr modules, Information Systems computer training, etc. as deemed appropriate by the school.

Following satisfactory completion of the requirements, the student will:

1. Attain a 77% or better on a comprehensive assessment given to determine placement in the program. The comprehensive assessment contains information from previous nursing courses in which the student would need to demonstrate mastery prior to being placed in a particular course. The percentage achieved on the placement exam will determine ranking for acceptance for admission if seating is limited.
2. Satisfactorily complete selected clinical skills specific to each nursing course.
 - a. Clinical competency remediation will be videotaped in accordance with the Rice Energy Family Simulation Center Audiovisual/Photo Policy.

The Administration of the Washington Health System School of Nursing (WHSSN) reserves the right to limit enrollment due to class size, job market, and faculty and/or clinical site availability.

Suggested placement of students returning or transferring into the program pending the outcome of the theory and clinical testing.

1. Nursing 100-400 returning student will be readmitted within the respective course following successful theory and clinical placement challenges.
2. If the student has been out of the program for two (2) years or more, they may apply for admission to Nursing 100.
3. Transfer students will have courses reviewed on an individual basis to determine placement in the appropriate course.
4. No transfer student will be accepted into Nursing 400.

1957 Revised: 7/2013, 4/2014, 3/2015, 6/2016, 2/2017, 9/2017; 3/2018; 6/18; 3/2019; 10/2019; 3/2020; 3/2022; 2/2023; 3/2023; 3/2024 Reviewed: 5/2012; 12/2015; 3/2021; 1/2022; 3/2022

Graduation Policy

The diploma and pin of the Washington Health System School of Nursing are awarded to the student upon satisfactory completion of the school program once the following criterion are met:

- A cumulative grade point average of 2.0 must be achieved in theory and satisfactory completion of all clinical outcomes with a minimum score of 3.0 in each.
- Completion of 168 hours of direct patient care during the leadership clinical rotation.

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- Remediation of final exam if applicable.
- Completion of the Maternal Newborn module in the ATI Virtual Tutor completed as prescribed.
- All financial obligations (tuition, library loans, etc.) must be met.
- Mailbox keys and name badges must be returned.

All students are **required to attend** graduation unless mitigating circumstances exist determined by the Director or Assistant Director, Staff Education/School of Nursing.

1957 Revised: 3/1999, 5/2014, 2/2017; 3/2020; 1/2022; 12/2023; 2/2024

Reviewed: 7/2013, 2/2015; 12/2015; 6/2016; 3/2018; 3/2019; 3/2021; 3/2023

Licensure Policy

Washington Health System School of Nursing graduates are eligible to file an application to take the National Council Licensure Examination for Registered Nurses (NCLEX®-RN) and to file for licensure in Pennsylvania or in another state. Each state has the right to regulate licensure within its own jurisdiction. Satisfactory completion of this examination enables the graduate to practice as a registered nurse (RN) in the state in which the examination was taken or indicated by a compact license.

Graduates are required to complete the post-graduation Virtual-ATI Review up to and including the Virtual-ATI Comprehensive Practice exam. Upon successful completion, the graduate's name will be released to the State Board of Nursing in validation of meeting the program outcomes and requirements of the Washington Health System School of Nursing's 16-month RN Diploma program.

A person convicted of any felonious act may be prohibited from licensure by the Board of Nursing at any time.

As of January 1, 1986, the State Board of Nursing will not issue a license to an applicant who has been:

1. Convicted of a felonious act prohibited by the act of April 14, 1972 (P.L. 233, No. 64), known as "The Controlled Substance, Drug, Device and Cosmetic Act", or
2. Convicted of a felony relating to a controlled substance in a court of law of the United States or any other state, territory, or country unless:
 - A. At least ten years have elapsed from the date of conviction;
 - B. The applicant satisfactorily demonstrates to the Board that they have made significant progress in personal rehabilitation since the conviction such that licensure of the applicant should not be expected to create a substantial risk of harm to the health and safety of patients or the public or a substantial risk of further criminal violations; and
 - C. The applicant otherwise satisfies the qualifications contained in or authorized by this act.

As used in this subsection the term "convicted" shall include a judgment, an admission of guilt, or a plea of nolo contendere. An applicant's statement on the application declaring the absence of a conviction shall be deemed satisfactory evidence of the absence of a conviction, unless the Board has some evidence to the contrary.

(Source: Pennsylvania State Board of Nursing Professional Nursing Law, Section 6, *amended June 29, 2002, P.L. 651, No.99*)

Revised: 6/1998; 3/2021; 1/2022; 4/2022; 2/2024

Reviewed: 5/2014, 2/2015; 12/2015; 6/2016; 2/2017; 3/2018; 3/2019; 3/2020; 3/2023

Bereavement Policy

For the death of immediate family members: mother, father, foster parent or legal guardian, parents-in-law, brother, sister, daughter-in-law, son-in-law, step-parents, spouse, children, step-children, grandparents and grandchildren the student will not be penalized for days of bereavement. The student will be given up to three consecutive bereavement days for immediate family. One of these days must be the day of the funeral. The other two days may be taken no earlier than two days prior to the funeral day, but no later than two days after the funeral. If there are non-traditional funeral arrangements, cremations, memorial services, etc. that may take place outside the normal time frames, the student must provide adequate documentation of the arrangements in order to be eligible for bereavement time.

"Immediate family" shall also include a "life partner" who shall be defined as a non-related individual of the same or opposite sex who has cohabitated with the student/faculty/staff for a minimum of one (1) year immediately preceding the date of death, and who has maintained a committed emotional relationship with the student/faculty/staff for reasons other than convenience or financial benefit. The hospital may require tax returns, mailing data or other appropriate documentation to substantiate the cohabitation for the prescribed period and the life partner relationship.

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In the death of the grandparents-in-law, brothers and sisters-in-law, aunts, uncles, nieces, and nephews, students are permitted to be off the day of the funeral only.

*Curriculum obligations remain however the time missed is excused.

5/1994 Revised: 4/2014, 10/2014, 2/2017; 3/2020; 1/2022; 3/2023 Reviewed: 7/2013, 2/2015; 12/2015; 6/2016; 3/18; 3/2019, 3/2021; 2/2024

Pregnancy Policy

If a student becomes pregnant, they must submit a form/slip from their physician identifying any health restrictions to the course coordinator. Updated physician forms must be submitted prior to each subsequent semester to the course coordinator. If the student is unable safely lift a minimum of 50 pounds, they will not be able to attend direct patient care activities. If it is necessary for the student to interrupt their educational program, the *Leave of Absence* policy or *Withdrawal* policy would apply.

Revised: 5/2014, 2/2015; 12/2015; 3/2021; 3/2023

Reviewed: 5/2012, 7/2013, 6/2016, 2/2017; 3/2018; 3/2019; 3/2020; 1/2022; 2/2024

Student Health Service Policy

Purpose

The Student Health Service is provided through the Employee Health Service (EHS) of Washington Health System to assist each student in maintaining optimal health. Emphasis is placed on the maintenance of wellness and safety for all students. It is the student's responsibility to practice good health habits throughout the program. This service is under the supervision of a Washington Health System staff physician/physician assistant and a registered nurse, available between the hours of 7:00 a.m. and 4:00 p.m., Monday through Friday. This service functions to treat minor illnesses or injuries sustained during school hours, as well as, to monitor student health via physical examinations. Employee Health does not provide treatment for non-related work health problems (colds, sore throats, etc.).

All students should be covered by a health insurance plan. The student is financially responsible for any health services received, including emergency care that are not covered by the student's health insurance plan.

Guidelines for Utilization

1. If a student is injured or becomes ill while at school between the hours of 7:00 a.m. and 4:00 p.m., the student is to report to the Employee Health Nurse. If an emergency, the student reports to the emergency room. If necessary, an appointment will be made for the student to see the EHS medical provider.
2. If an illness or emergency situation arises while at the school between the hours of 4:00 p.m. and 11:30 p.m., the Administrative Nursing Supervisor of the hospital will be notified. Students should follow the instructions of the Administrative Nursing Supervisor during this time. If students elect to go to the Emergency Department on their own, they will be responsible for any expenses incurred.
3. A student who calls off ill for more than three (3) consecutive days and/or has a non-school related problem that results in the student needing to have casts, braces or limited duty restrictions is to be seen in EHS **PRIOR** to return to class or clinical. EHS is to be contacted for an appointment time. Students may be required to present a doctor's permission slip to the EHS to return to school. The EHS medical provider may need to examine the student to verify return to clinical duties. Students who have had surgery, childbirth, and any other serious medical conditions will be required to be seen in EHS. If the student has an injury or condition that prevents them from lifting fifty pounds they will not be able to participate in direct patient care experiences.

Services Not Covered by the Student Health Service

1. Pregnancy or conditions due to pregnancy
2. Pre-existing medical conditions
3. Chronic gynecological conditions
4. Dental treatment
5. Chronic dermatological conditions
6. Conditions of the eye
7. Psychiatric treatment
8. Medical services and therapy not under the direction of the Student Health Service
9. Treatment for non-related work health problems (colds, sore throats, etc.)

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Emergencies or Serious Illness

1. Emergency services are available in Washington Health System Emergency Department by referral of EHS or Administrative Nursing Supervisor when EHS is closed.
2. Students are to notify a relative unless they request the personnel to do so.
3. The Assistant Director, Staff Education/School of Nursing will be notified of emergencies or serious illnesses.

Medications

1. Students are not to take medications for personal use from the Pyxis System in the hospital.
2. Unauthorized use of medications is illegal and cause for dismissal.
3. Students may purchase personal prescription medications from the Hospital Pharmacy.

Consent to Treatment

Effective April 14, 1970, Act N. 10 of 1970 of the Pennsylvania Legislature provides that any minor who is under 18 years of age and has graduated from high school or has married, or has been pregnant, may give effective consent to medical, dental, and health services for themselves. It also provides that a minor who has been married or has borne a child may give effective consent for such service for their child. Any minor can give consent to determine and treat pregnancy, venereal diseases and other reportable diseases; and consent is unnecessary when, in the physician's judgment, an attempt to secure consent would increase the risk to the minor's life or health.

Reviewed: 2/2021

Revised: 6/2016; 2/2017; 3/2018; 2/2019; 2/2022; 3/2023; 2/2024

Health Record Maintenance Policy

Cumulative student health records will be maintained by EHS throughout the enrollment of the student.

Health Records are kept ad infinitum on medical electronic file.

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Revised: 5/2014, 2/2015, 6/2016, 2/2017; 3/2018; 3/2021

Reviewed: 12/2015; 3/2018; 2/2022; 3/2023; 2/2024

Students with Disabilities Policy

Students, who have been identified by their physician as having a disability, which requires special accommodations for them to complete the School of Nursing program of study, are responsible for providing the school with the following:

1. A statement from their physician identifying the diagnosed disability and specific information about what type of accommodations will be required.
2. A completed *Request for Accommodations* form which can be obtained from the Course Coordinator.

Submitting a *Request for Accommodations* does not necessarily mean that the request will be granted since the school may not be able to provide the necessary accommodations. The Assistant Director, Staff Education/School of Nursing evaluates the request. The Course Coordinator(s) of the nursing course(s) and student will be notified of the final decision. If a student wishes to modify or rescind their original request for accommodations prior to the time the accommodation is approved, written notification must be provided to the Assistant Director, Staff Education/School of Nursing. If the student wishes to modify or rescind part or all of an already approved accommodation, written notification must be provided to the Assistant Director, Staff Education/School of Nursing. Students who have been granted accommodations are required to submit documentation from their attending clinician prior to each semester that accommodations are still necessary.

2/2009

Revised: 5/2012, 2/2015; 2/2019; 2/2021; 2/2022; 3/2023 Reviewed: 7/2013, 5/2014; 12/2015; 6/2016; 2/2017; 3/2018; 4/2020; 2/2024

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Request for Accommodations Form

Please be aware that submitting a *Request for Accommodations* does not necessarily mean that the request will be granted. The Assistant Director, Staff Education/School of Nursing will evaluate the request. The Course Coordinator of the nursing course(s) and the student will be notified as to the final decision. If a student wishes to modify or rescind their original request for accommodations prior to the time the accommodation is approved, written notification must be provided to the Assistant Director, Staff Education/School of Nursing. If the student wishes to modify or rescind part or all of an already approved accommodation, written notification must be provided to the Assistant Director, Staff Education/School of Nursing. Students who have been granted accommodations are required to submit documentation from their attending clinician prior to each semester that accommodations are still necessary.

Section 1 – TO BE COMPLETED BY THE STUDENT WHO IS REQUESTING ACCOMMODATIONS

Name: _____ Class of: _____
 Course(s): ☐ Nursing 100 ☐ Nursing 200 ☐ Nursing 300 ☐ Nursing 400

Indicate specific accommodations being requested:

Reason:

Students who have been granted accommodations are required to submit documentation from their attending clinician prior to each semester that accommodations are still necessary.

Section 2 – TO BE COMPLETED BY ASSISTANT DIRECTOR OF THE SCHOOL OF NURSING

The request for Accommodations has been: ☐ Approved ☐ Not Approved

If not approved, reason:

Notification provided to Course Coordinator(s) for:

☐ Nursing 100 ☐ Nursing 200 ☐ Nursing 300 ☐ Nursing 400 [Click here to enter a date.](#)

Notification provided to Student: [Click here to enter a date.](#)

Signature of Assistant Director, Staff
 Education/School of Nursing:

[Click here to enter a date.](#)

Section 3 – TO BE COMPLETED BY DIRECTOR OF THE SCHOOL OF NURSING IF MODIFICATION TO ORGINAL REQUEST IS MADE

Modification:

Reason:

☐

Approved

☐

Not Approved

If not approved, reason:

Notification provided to Course Coordinator(s) for:

☐ Nursing 100 ☐ Nursing 200 ☐ Nursing 300 ☐ Nursing 400 [Click here to enter a date.](#)

Notification provided to Student: [Click here to enter a date.](#)

Signature of Assistant Director, Staff
 Education/School of Nursing:

[Click here to enter a date.](#)

2/2009 Revised: 10/2011, 2/2015 2/2017;2/2019; 2/2022 Reviewed: 7/2013, 5/2014; 12/2015; 6/2016; 3/2018; 4/2020; 3/2021; 3/2023; 2/2024

Tuition and Fees

Breakdown of tuition and fees by term can be found in the School Bulletin and on the website.

Program Costs and Financial Aid Policies

The School of Nursing will provide an estimate of total expenses, including tuition, fees, and charges. These expenses may be changed by the respective institutions periodically.

All tuition, fees, and charges must be paid in full to the institution providing the courses in which the student is enrolled, except in those situations where financial aid is involved.

Students will comply with all policies and procedures regarding tuition, fees, and refunds applicable to the institution providing the course.

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Financial aid arrangements for all terms, including affiliate college charges, will be made through the School of Nursing. The School of Nursing will be the controlling institution for purposes of financial aid and will receive all payments of financial aid awards.

No student may be enrolled, graduate, or receive grade reports or transcripts until all financial obligations are met.

Financial Statements

Students will be issued financial statements prior to the beginning of each semester. These statements will indicate tuition and fees due to Washington Health System School of Nursing and any affiliate colleges, if applicable and will include any known amount of financial aid the student will receive for the semester. All Washington Health System School of Nursing tuition and fees, not covered by financial aid, must be paid by the due date indicated on the financial statement for the semester. Students will not be permitted to remain in the program if financial obligations to the School of Nursing are not met.

Financial Obligations

Students must reconcile all bills incurred as a student by the end of each semester. Students who fail to meet this requirement will not be permitted to progress to a subsequent semester or to graduate.

Financial Aid

Various types of financial aid are available to students attending Washington Health System School of Nursing. Financial aid is intended to assist those students who would otherwise be unable to afford the cost of an education beyond high school. The primary responsibility for financing all educational costs rests with the student and family; financial aid is intended to supplement the family contributions. Most types of aid are awarded based on demonstrated financial need which is the difference between the cost of attending school and the total amount of money that the student and family can be expected to provide.

All students who wish to apply for federal/state financial aid, grants, and/or loans, must file the Free Application for Federal Student Aid (FAFSA) annually. Financial aid may be in the form of scholarships, grants, loans, or a combination of these. Various civic, medical, and nursing groups also have scholarships and loans available.

Application procedures and deadlines vary depending on the type of aid. Students should contact their high school counselor or the School of Nursing Financial Aid and Recruitment Coordinator for information relevant to the specific type of aid. The Financial Aid and Recruitment Coordinator is available to students Monday through Friday from 8:00 a.m. to 4:00 p.m.; evening hours availability can be set, as requested. Financial aid counseling and determination of awards are based on guidelines and regulations of the funding agencies.

Satisfactory Academic Progress (SAP) Policy

Federal regulations require all institutions to establish a policy to determine whether a student is making satisfactory academic progress toward the educational goal. This policy must apply to all students whether or not they were recipients of financial aid previously at Washington Health System School of Nursing or at any other college. Failure to meet the following requirements for SAP in coordination with Federal SAP Guidelines may result in the loss of financial aid. These standards are for financial aid purposes only and do not replace or override the academic policies of Washington Health System School of Nursing. The review of the student's SAP standing will be based on academic performance during the semesters.

Satisfactory Academic Progress Standards

Students must maintain at least a 2.0 Grade point average (GPA) and attain diploma/certificate within 150% of the published length of program.

Percentage of Completion

The maximum time frame for completion is 150% of the published length of the program. For instance, the published length of the program is 60 credits/units, then the student must complete the program by the time the student reaches 90 credits/units (60 credits/units x 150% = 90 credits/units).

Financial Aid Warning

Students will be evaluated at the end of each semester to determine if they are meeting the SAP standards listed above. Students who do not meet the credits/unit's SAP standards will be placed on Financial Aid Warning for the subsequent semester. During the Warning status, the student is eligible to receive financial aid. At the end of the semester, progress will be reviewed to determine if the student now meets the SAP standards. If the student satisfies all conditions outlined above, they will be removed from Financial Aid Warning.

Attempted and Completed Credits/Units

Completed credits/units are enrolled credits/units for which credit is received. Courses in which a student receives a grade of "D", "F", "I", or "W" will not be counted as completed credits/units for satisfactory academic progress purposes but will be counted as attempted credits/units.

Students may receive financial aid for repeated courses taken to improve a grade and raise the cumulative GPA; however, all prior attempts will still be considered as attempted credits/units when calculating the maximum timeframe for financial aid purposes.

Transfer Credits/Units

Transfer credits/units from all accredited institutions will be counted as both attempted and completed credits/units towards maximum time frame.

Ineligibility

Students who fail to satisfactorily complete the warning period will not be eligible to receive financial aid. In order to be considered for reinstatement, students are required to raise their cumulative GPA and percentage of credits/units completed to meet the standards without the receipt of financial aid.

Students who meet or exceed 150% of the published required credits/units for their programs will be ineligible for financial aid without being placed on warning. If a student wishes to continue receiving federal financial aid, an appeal must be submitted to the Financial Aid and Recruitment Coordinator.

Notifications

If you are placed on warning or suspension according to the terms of this policy, you will receive a certified registered letter.

Appeal Process

Students who do not meet SAP requirements and have been determined ineligible may appeal for re-establishing eligibility by submitting a written appeal to the Financial Aid and Recruitment Coordinator.

Appeals must include the reason why the student was not able to meet SAP and what has changed that will allow the student to make SAP progress at the next evaluation.

Appeals must include: Dates, details and documentation of any extenuating circumstances. Examples of extenuating circumstances:

1. Death of an immediate family member
2. Documented Illness
3. Major accident or injury (Self, child, parent)
4. Victim of a crime or unexpected disaster

Appeals will be reviewed by the Financial Aid and Recruitment Coordinator to determine if the student's circumstances warrant probationary reinstatement, request that the student provide additional information, or continued ineligibility. Students will be notified by mail.

Students, whose SAP appeals are reviewed and approved, will be placed on financial aid probation for the subsequent semester in which they enrolled. A financial aid probation period allows a student, who does not meet SAP but has successfully petitioned, to continue to receive aid.

PA State Grant

In addition to the general Satisfactory Academic Progress (SAP) guidelines, students receiving PA State Grant funding are subject to a separate satisfactory academic progress review. The review begins when the first semester state grant is awarded. In the event, a student is unsuccessful in completing a minimum of at least 12 credits in a semester, the

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student automatically becomes ineligible for further state grant funding until the student demonstrates successful completion of a minimum of 12 credits and meets program requirements for academic progression.

The review of student SAP eligibility is based on academic performance during each of the four semesters within the program.

Students demonstrating unsatisfactory academic progress will be notified in writing as to their individual SAP standing.

For additional information regarding this policy, please contact the Financial Aid and Recruitment Coordinator.

Financial Aid Suspension

If a student fails to achieve the minimum earned credit hour standard and/or the minimum grade point average at the end of the academic year (Fall, Spring, and Summer), the student will be placed on financial aid suspension. Students placed on financial aid suspension will become ineligible for future Title IV assistance until their SAP deficiency is resolved.

Appeal Procedure

If a student feels that an academic deficiency that has led to loss of eligibility for financial aid is due to extenuating circumstances (such as illness or injury), a written appeal must be submitted to the Financial Aid and Recruitment Coordinator which details the situation. The written appeal must be received within two weeks of readmission notification. The Financial Aid and Recruitment Coordinator may, if the circumstances warrant, grant a maximum of one semester of financial aid to a student who does not meet the requirements for academic progress.

Refund Policy

Students may be eligible to receive a financial aid refund when their financial aid/scholarships exceed the charges on their student account for each semester. Once the refund amount is determined, the funds will be returned to the student after the student has successfully completed more than 60% of the semester.

Withdrawal Refund Policy

Students who withdraw from the program may be eligible for a refund of charges. A student who wishes to withdraw must notify the Director or Assistant Director, Staff Education/School of Nursing of this intention. The official withdrawal date will be the date of notification. Refunds will be based on the official date of withdrawal.

If a student is absent for five (5) consecutive days, without calling off, a letter will be emailed to the student indicating that they must contact the School of Nursing within one week of receipt in order to declare status in the program. If the student does not respond within the time period indicated, the student will be considered officially withdrawn. The withdrawal date will be the response deadline indicated in the certified letter.

Grade transcripts of students who withdraw from the program will be marked as follows: W – Withdrawal.

A student has the opportunity to withdraw from the program at any time prior to the last three (3) weeks of the course enrolled in. If the student is failing without ability to attain a passing score within the last 3 weeks of the course, the request for withdraw will be denied and a failure (F) will be awarded as the course outcome. *See Withdrawal Policy.*

The number of calendar days from the first day of classes to the withdrawal date is the number of days completed by the student (excluding breaks of five days or longer).

To calculate a refund, the school shall first determine how much of the period in question has been completed by the student. This percentage is calculated by dividing the number of days in the semester (excluding breaks of five days or longer) into the number of days completed prior to the withdrawal (excluding breaks of five days or longer). If the student has completed more than 60% of the period in question, then no refund will be given. If the student has completed 60% or less of the period in question, then the amount of the refund shall be equal to the amount remaining in the period. The percentage of completion shall be rounded to the nearest whole percent.

Once the amount of the federal funds to be returned has been calculated, the funds will be returned in the following order:

1. Federal Direct Unsubsidized Stafford Loans
2. Federal Direct Subsidized Stafford Loans
3. Federal Direct Plus Loans

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4. Federal PELL Grant
5. State Grants
6. Private Aid
7. The Student

Example:

of days completed _____

of days in semester = % of Aid Earned

100% of Aid Earned = % of Funds to be returned

Student withdraws on the 30th day of Semester I. There are 105 calendar days in the semester.

30

105 = 29% of Aid Earned

100% - 29% = 71% of Funds to be returned

If students would like to see an actual *Return of Federal Funds Worksheet*, they may request one from the Financial Aid and Recruitment Coordinator at the School of Nursing.

Student Activity Fee

An activity fee of \$50 will be charged in each of the four semesters (Nursing 100 – Nursing 400) to all Washington Health System School of Nursing students. As with tuition, this fee is payable prior to the beginning of each semester. The Activity Fee is utilized for the following purposes:

- Health Services Fee – to support services provided by the Employee Health Service.
- School Services Fee – to support activities for students, student/faculty functions, and minor equipment needs.

5/1998 Revised: 6/2004, 5/2010, 2/2017; 3/2023; 3/2024

Reviewed: 5/2012, 5/2013; 12/2015, 6/2016; 3/2018; 3/2019; 3/2020; 3/2021; 3/2022; 3/2024

Scholarships / Scholarship Application

The Washington Health System School of Nursing provides several scholarship opportunities to students. The Recruitment and Admissions Committee of the School of Nursing selects qualified applicants to receive these awards. Applications will be distributed to students to apply for the following scholarships:

The Washington Hospital School of Nursing (WHSN) Alumni Scholarship

The Alumni Scholarship is endowed each year through contributions from The Washington Hospital School of Nursing Alumni. Awards are based on financial need and academic achievement.

The Frances M. Andrew Scholarship

This scholarship is endowed in memory of Frances M. Andrew, Class of 1935. This scholarship is based on financial need and academic achievement.

W. Pauline Spangler Scholarship

The Spangler Scholarship is endowed through contributions from the family of W. Pauline Spangler, Class of 1935. First preference is given to residents of Greene County.

Corrine Black McClay Memorial Scholarship

This scholarship is endowed through contributions made to a memorial fund established in memory of Corrine Black McClay, Class of 1935. This scholarship is based on academic achievement.

3/1995 Revised: 7/2013, 3/2015, 6/2016; 3/2020; 11/2023; 03/2024

Reviewed: 5/2012; 12/2015; 2/2017; 3/2018; 3/2019; 3/2021; 3/2022; 3/2023

Student Scholarship Application

**WASHINGTON HEALTH SYSTEM
SCHOOL OF NURSING
STUDENT SCHOLARSHIP APPLICATION**

SCHOLARSHIP(S) YOU ARE APPLYING FOR:

NAME _____

ADDRESS

CLASS OF

COUNTY: _____

MARITAL STATUS: Single Married Divorced Separated

NUMBER OF FAMILY MEMBERS IN HOUSEHOLD:

NUMBER OF CHILDREN _____ **AGES:** _____

HOUSING STATUS:

Live With: _____ Parents _____ Spouse _____ Self _____ Other
 Rent Own

STUDENT EMPLOYMENT:	Full Time	Part Time	Hours/Week
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ADJUSTED GROSS INCOME: (Year)

HOW IS YOUR EDUCATION BEING FUNDED?

POST-SECONDARY EDUCATION:

ESSAY:

Please describe why you would be the best candidate for this scholarship (include financial obligations, family obligations, long range plans, your work ethic, etc.). Note: In addition to content, factors such as spelling, grammar, appearance, clarity, and sentence structure will be taken into consideration when the essay is reviewed.

[No more than five (5) typed pages]

Return by _____

No applications received after this date will be considered.

Student Bill of Rights and Responsibilities

1. Students have the right to expect quality education including appropriate facilities and resources, qualified instructors, and courses relevant to today's nursing education.
2. Students have the right to direct representation on School of Nursing committees that formulate policies affecting academic and student affairs.
3. Students have the right to protection against prejudiced or capricious academic evaluation, but they are responsible for maintaining standards of academic performance established for each course in which they are enrolled.
4. Students have the right to orderly procedures that ensure fair treatment in the resolution of issues.
5. Students have the right to take reasoned exception to the data or views offered in any course of study, but they are responsible for learning the content of any course for which they are enrolled.
6. Students are free to examine and discuss all questions of interest to them provided there is no violation of confidentiality.
7. Students have the right to not be discriminated against on the basis of race, religious creed, color, national origin, sex (including gender identity), age, marital status, sexual orientation, or disability.
8. Students have the right to expect that information about personal views, beliefs, sexual orientation, and political associations, which instructors and students acquire in the course of their working together, is considered confidential and not released without the knowledge or consent of the party involved.
9. Students have the right to be informed as to what information is a part of a student's permanent educational record and conditions of disclosure.
10. Students have the right to have access to a Student Handbook. It is the student's responsibility to know the information contained in the handbook.
11. Students have the right to participate in evaluations of the School of Nursing to include but not be limited to curriculum, individual courses, instructors, services, and facilities.

9/1997 Revised: 5/2010, 5/2014; 2/2021 Reviewed: 5/2012, 7/2013, 3/2015; 12/2015; 6/2016; 2/2017; 3/2018; 2/2019; 4/2020; 2/2022; 3/2023; 2/2024

WHSSN Student Organization By-Laws**ARTICLE I: Organization**

The name of this organization shall be the Student Organization of Washington Health System School of Nursing.

ARTICLE II: Purpose and Functions**SECTION A:** The purpose of the Student Organization shall be:

1. To create a sense of unity and fellowship among students of the school.
2. To provide the opportunity for students to share in the democratic processes of self-government.

SECTION B: The functions of the Student Organization shall be:

1. To channel to the appropriate student committee representative those ideas and/or problems presented by individual students or groups of students.
2. To encourage student interest in and to plan for school activities.
3. To stimulate growth by encouraging student awareness of and participation in professional organizations.
4. To promote a cooperative relationship among students and faculty.
5. To review the by-laws of the Student Organization as required.

ARTICLE III: Membership and Voting Privileges**SECTION A**

1. All students from Semester I through Semester IV are members of the Student Organization.

SECTION B

1. All members have full voting privileges.

ARTICLE IV: Membership on School Committees**SECTION A**

1. All students have representation on the Faculty Organization through student membership on the

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Curriculum Committee, Technology Committee, and Library Committee.

2. All students have representation to the meetings of the current course in session.
3. Student committee members and alternates and class representatives and alternates will be elected prior to mid-term of Semester I.
4. Term of office is two semesters. Students may serve an additional two semesters if after the second semester, the following criteria are met. The attainment of:
 - a. An 80% or greater in theory.
 - b. No greater than one conduct form (behaviorism)
 *Mitigating circumstances determined by administration.
5. During Nursing 300, those students interested in class president/secretary will have the opportunity for consideration.

ARTICLE V: Officers of the Student Organization

SECTION A: Officers:

1. Officers of the Student Organization shall be the President and the Secretary/Treasurer for each class.

SECTION B: Officers, Elections, and Term of Office:

1. Level I Class will elect a President and Secretary/Treasurer of the Student Organization.
2. The election will occur prior to mid-term of Semester I.
3. A meeting of all the officers will be held with the Assistant Director, School of Nursing within one (1) month following election for the purpose of clarifying responsibilities and procedures.

SECTION C: Duties of the Student Organization Officers:

1. The Level I Class President shall:
 - a. Call and preside at class meetings.
 - b. Call special meetings when necessary.
 - c. Call and preside at combined meetings of the Student Organization, in the absence or resignation of the Level II Class President
 - d. Attend meetings of the Curriculum Committee.
 - e. Report pertinent information from the Curriculum Committee to all students.
 - f. Secure members to serve on Faculty Organization standing committees and class representatives for course meetings if necessary.
 - g. Investigate concerns of the class and provide appropriate feedback.
 - h. Act as a Representative of the Grievance Committee for Student Fair Treatment.
 - i. Deliver the benediction during the Level II graduation ceremony.
2. The Level II Class President shall:
 - a. Call and preside at class meetings.
 - b. Call special meetings when necessary.
 - c. Call and preside at combined meetings of the Student Organization, in the absence or resignation of the Level I Class President, when necessary.
 - d. Attend meetings of the Curriculum Committee.
 - e. Report pertinent information from the Curriculum Committee to all students.
 - f. Secure members to serve on Faculty Organization standing committees and class representatives for course meetings if necessary.
 - g. Investigate concerns of the class and provide appropriate feedback.
 - h. Act as Chairperson of the Grievance Committee for Student Fair Treatment.
 - i. Deliver the invocation during the graduation ceremony.
3. The Secretary/Treasurer shall:
 - a. Maintain a record of all class proceedings.
 - b. Ensure that copies of the minutes of each class meeting are signed and electronically filed.
 - c. Maintain an accurate record as to the source of the amount of funds received and dispersed.

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- d. Deliver an accurate report of class funds to the class.
- e. Assume responsibility for collection of monies.

ARTICLE VI: Meetings

SECTION A

1. Student Organization meetings by class will be scheduled monthly.
2. A signed copy of the minutes will be placed on the School of Nursing Shared Site.

ARTICLE VII: Majority Rule

SECTION A: The Student Organization shall rule by majority vote of the members present.

ARTICLE VIII: Amendments

SECTION A: Amendments to the by-laws shall be referred to the Student Organization.

SECTION B: Amendments shall be acted upon in the following manner:

1. A two-thirds (2/3) vote of Student Organization shall be required for the amending or revising of the by-laws, provided the proposed amendments have been sent in writing to all members one week prior to the meeting.

ARTICLE IX: Parliamentary Procedure:

SECTION A: Matters of procedure not covered by the by-laws of this organization shall be governed by the New Robert's Rules of Order.

1973 Revised: 7/2013, 5/2014, 3/2015, 6/2016; 2/2019; 2/2021, 2/2022; 3/2023; 2/2024 Reviewed: 5/2012; 12/2015; 2/2017; 3/2018; 4/2020

Student Representation (School Committees) Policy

Curriculum Committee

This committee is responsible for all aspects of the curriculum. In addition, the committee addresses selected faculty policies and faculty professional development. Students are represented on this committee by the Presidents of both classes.

Technology Committee

This committee is responsible for identification of and implementation of use of technology in the classroom. Students are represented on this committee by a Student Representative from both classes selected by the Class Presidents.

Library Committee

This committee is responsible for addressing the information resources utilized by the students/faculty and to discuss matters of related policies and procedures. Students are represented on this committee by a Student Representative from both classes selected by the Class Presidents.

Course Meetings

The Course Coordinators and instructors meet periodically to discuss course planning, issues, evaluation, and progress. Students are represented at those meetings by a Student Representative.

*Students will be dismissed from any meeting when FERPA applies.

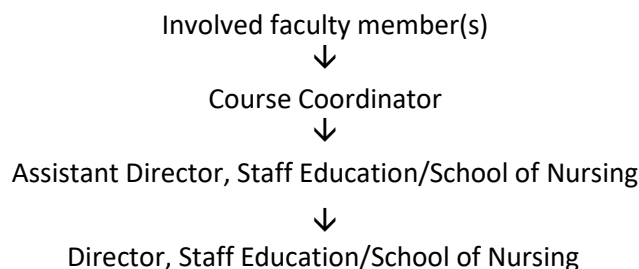
12/1998 REVISED: 5/2009, 5/2012; 5/2013; 6/2016; 2/2019; 3/2023

REVIEWED: 5/2014, 3/2015; 12/2015; 2/2017; 3/2018; 4/2020, 3/2021; 2/2022; 2/2024

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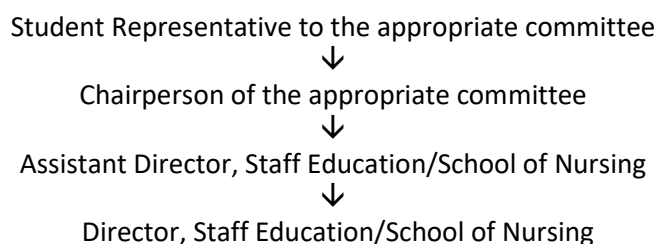
Channels for Resolving Issues Policy

General Course Concerns: If students have concerns related to a specific nursing course, the following communication network is to be utilized:



Student Nurse Course representatives may also bring any concern to the teaching team meetings scheduled throughout the course.

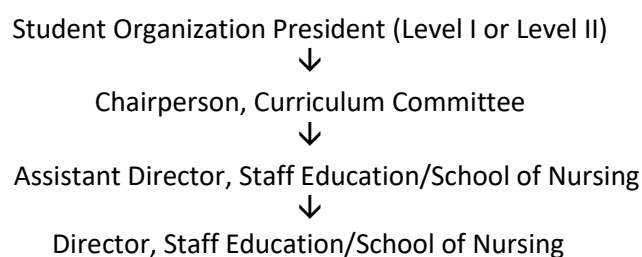
Academic Policies: If students have concerns related to academic policies, the following communication network is to be utilized:



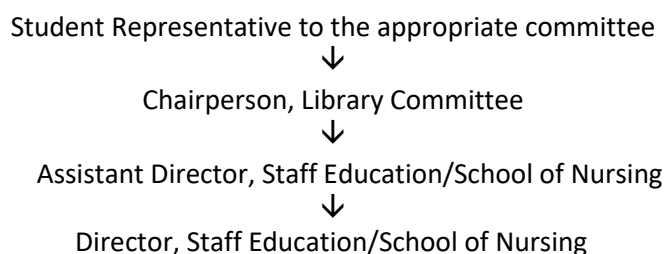
Non-Academic Policies: Any student concerns involving non-academic policies should be directed to the Assistant Director, Staff Education/School of Nursing.

Physical Facilities: Issues concerning the physical facilities within the School of Nursing building should be directed to the Assistant Director, Staff Education/School of Nursing.

Student Organization: If students have concerns relating to issues involving the student organization, the following communication network is to be utilized:



Library Services: If students have issues relating to accessing library materials, etc., the following communication network is to be utilized:



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Transcripts: Transcript issues are to be directed to the Admissions and Student Support Coordinator.

Financial Aid: If students have issues relevant to financial aid, the following communication network is to be utilized:

Financial Aid and Recruitment Coordinator



Assistant Director, Staff Education/School of Nursing



Director, Staff Education/School of Nursing

Unresolved Issues/Concerns: See Student Fair Treatment/Grievance Procedure

12/1989 Revised: 5/2013, 5/2014, 3/2015; 2/2019; 4/2020; 2/2022; 3/2023 Reviewed: 5/2012; 12/2015; 6/2016; 2/2017; 3/2018; 2/2021; 2/2022; 2/2024

Student Fair Treatment / Grievance Policy

The Grievance Committee for Student Fair Treatment functions to hear grievances, interpret and clarify student rights as stated in the *Student Bill of Rights and Responsibilities*, and to advise on issues related to the *Student Conduct Policy* which cannot be resolved through usual channels. The committee is composed of one Student Representative from each class and equal representation of faculty.

The *Student Bill of Rights and Responsibilities* and information describing the procedures for students to follow when a perceived injustice occurs is contained in the Student Handbook which is found on the EDU website <http://twhson.edu20.org/> under each specific class.

7/1999 Revised: 5/2014, 3/2015; 6/2016; 4/2020; 3/2023 Reviewed: 5/2012, 5/2013; 5/2015; 2/2017; 3/2018; 2/2019; 2/2021; 2/2022; 2/2024

Student Fair Treatment/Grievance Procedure Policy

An issue is a perceived injustice of concern which, in the mind of the student, is an infringement of their right(s) as stated in the *Student Bill of Rights and Responsibilities*. Resolution will proceed in the sequence of Steps 1-3.

Step 1

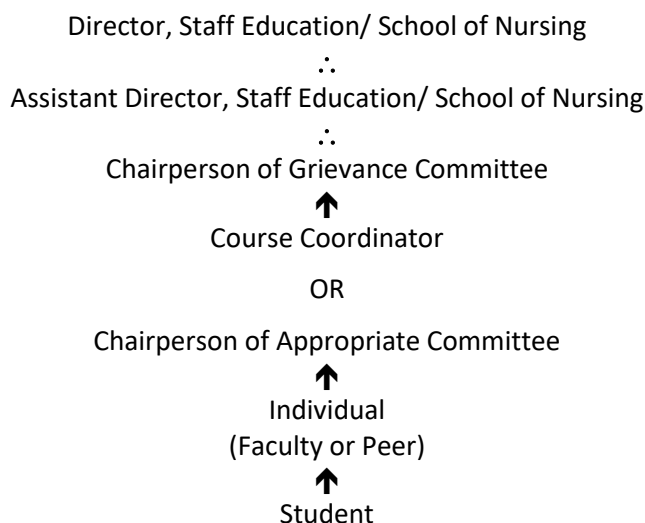
1. The student **must** notify the individual(s) involved within two (2) school days of the occurrence and establish a meeting in order to attempt resolution of the issue.
2. If the meeting does not produce a resolution, the student must go to Step 2.

Step 2

1. The student must notify individual(s) involved and the appropriate Course Coordinator or Faculty Committee Chair in writing within five (5) school days of the meeting in Step 1.
2. This written statement needs to include a summary of the issue to be resolved, the right perceived to be infringed upon, and the result(s) of the meeting in Step 1. The Course Coordinator or Faculty Committee Chair will meet with the student and involved parties within five (5) school days and will notify the student(s) in writing of the resulting plan for resolution.
3. If the plan for resolution is unacceptable and the issue remains unresolved, the student **must** notify, in writing, the Course Coordinator or Faculty Committee Chair within five (5) school days after receiving the written plan for resolution and go to Step 3.

Step 3

1. The student **must** notify the Chairperson, Grievance Committee for Student Fair Treatment in writing within five (5) school days of receiving the written plan in Step 2. This written statement **must** include the specific right(s) involved, information supporting violation of these rights, and a summary of the actions in Step 1 and 2. At this point, the By-laws of the Grievance Committee for Student Fair Treatment are enacted. The student may have a supporting person present at any time, with the exception of an attorney.



Code: ∴ = Advisory
 ↑ = Channels

7/1999 Revised: 3/2015; 6/2016; 3/2018; 2/2021; 2/2022; 3/2023

Reviewed: 5/2013; 5/2014; 12/2015; 2/2018; 2/2019; 4/2020; 2/2024

Student Fair Treatment / Grievance Committee By-Laws

- I. NAME: Grievance Committee for Student Fair Treatment
- II. PURPOSE AND FUNCTION: The purpose and function of the Grievance Committee for Student Fair Treatment is to hear appeals, interpret and clarify student rights as stated in the *Student Bill of Rights and Responsibilities*, and to advise on issues which cannot be resolved through usual channels.
- III. MEMBERSHIP: This is a joint committee, approved by the Student Organization and the Faculty Organization, made up of eight (8) members:
 - A. President of each class of the Student Organization.
 - B. Two (2) other student members, one (1) person from each class appointed by the Presidents for each class.
 - C. Four (4) faculty members, appointed by the Assistant Director, School of Nursing.
 - D. In the event there is no Level I President, Student Organization, the Level II Class President, Student Organization will appoint a representative for the vacant Level I Class President position and one (1) student representative from the Level I class.
- IV. ALTERNATES: Alternates will be selected for each committee member. The Director or Assistant Director, Staff Education/School of Nursing will select one (1) faculty alternate. The President of each of the classes of the Student Organization will select a student alternate from the respective classes currently at the School of Nursing. Alternates will serve in the absence of a committee member or in the event that a committee member is involved in an issue.
- V. CHAIRPERSON: The committee will be chaired by the Level II Class President of the Student Organization. In the event that the Level II Class President is involved in an issue, the Level I Class President will chair the committee meeting. If there is no Level I Class President, the student representative to the Curriculum Committee from the Level II class will assume the duties of the Chairperson.
- VI. MEETINGS
 - A. A meeting to determine if student(s) rights have been involved will be held within five (5) school days upon receipt of the student(s) request for an issue to be brought before the committee. The committee will use the student(s) written statement and all other information in student(s) records relative to the issue to determine if student(s) rights were involved.

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- B. If it is determined student(s) rights are involved, a Fair Treatment hearing of all concerned parties will be held within five (5) school days of the above meeting.
- C. Additional meetings may be scheduled by the Chairperson as deemed necessary or advisable.
- VII. QUORUM: A quorum for the formal transaction of business shall consist of four (4) faculty members and four (4) student members. In the event that a regular committee member is unable to attend the meeting, the Chairperson will notify an alternate from the respective representative group (student or faculty) until a quorum is obtained.
- VIII. FAIR TREATMENT HEARING: The committee will discuss the issue immediately following the presentation of the evidence of the hearing. A decision will be made as to whether or not student(s) rights have been violated. Minutes will be recorded by a designated non-member. All decisions of the committee must be made in writing and submitted to the party or parties concerned. The Director or Assistant Director, Staff Education/School of Nursing, will then take appropriate action based on the advisement of the Grievance Committee for Student Fair Treatment.
- IX. RECOMMENDED ACTION: Decisions will be determined by a majority vote of the committee membership present. In the event of a tie, it will be assumed student(s) rights were violated.
- X. CONFIDENTIALITY: It is mandatory that all written records, forms, discussions, and informal discussions of any issues or business of this committee be kept in absolute confidence within the committee. Violation of confidentiality will result in removal from the committee and potential disciplinary action.

The Student Fair Treatment/Grievance Issue Form is to be completed for all issues regardless of when they were resolved. Forms are to be submitted to the Admissions and Student Support Coordinator, School of Nursing, to be kept in each student's file.

8/1978 REVISED: 5/2011, 3/2015; 4/2020; 2/2021; 2/2022; 3/2023

REVIEWED: 7/2013, 6/2014; 12/2015; 6/2016; 2/2017; 3/2018; 2/2019; 2/2024

Student Fair Treatment/Grievance Issue Form**Student Fair Treatment/Grievance Issue Form**

Date: _____ Cohort/Year: _____

Student ID Number: _____

Brief description of issue: (include date of occurrence)

Date Received:

Signature:

At which step was resolution achieved? 1 2 3

Student ID Number: _____ Date: _____

Signature: _____ Date: _____

(Note: If resolution was achieved at Step 1 or 2, either the faculty member involved or the Director or Assistant Director, Staff Education/School of Nursing, can complete and sign the form. If resolution is not achieved until Step 3, the Chairperson of the Student Fair Treatment/Grievance Committee will complete and sign the form.)

1/2002 Revised: 4/2003, 3/2015; 6/2016; 4/2020; 2/2022 Reviewed: 5/2013, 6/2014; 12/2015; 2/2017; 3/2018; 2/2019; 2/2021; 3/2023; 2/2024

Counseling and Guidance Program Policy / Counseling Form

The Counseling and Guidance Program is offered when the individual first contacts the school and continues throughout the educational program. The program includes counseling concerning application and admission, financial aid, academic concerns, peer interaction and adjustment, health issues, professional goals, and career development. If a student requires counseling for a non-academic issue, a record of the counseling form as well as a goal plan may be developed utilizing the Washington Health System School of Nursing *Counseling Form*. During orientation, the student is provided with an explanation of all aspects of the *Counseling and Guidance Program*.

Pre-Admission Counseling

The Financial Aid and Recruitment Coordinator and the Chairman of the Recruitment and Admissions Committee provide counseling services to applicants. Assistance is provided with application procedure, financial aid, and curriculum planning.

Academic Advisement**Academic Advisor Role**

Purpose: To facilitate the student's academic progress through the program.

Guidelines

1. The Recruitment and Admissions Committee Chairperson will randomly assign each student to an Academic Advisor during their first semester.
2. The student and/or faculty may request reassignment at any time by contacting the Recruitment and Admissions Committee Chairperson.
3. Advisees must schedule a meeting with the assigned Academic Advisor each semester following the first unit exam and prior to midterm.
4. Future meetings may be scheduled by Advisor/Advisee based on individual needs.
5. The student is encouraged to meet with the assigned Academic Advisor following failure of any unit exam. A plan for improvement will be developed as appropriate utilizing the Washington Health System School of Nursing *Academic Warning Form*.
6. Students who are experiencing academic difficulties in specific theoretical content areas will be directed to seek assistance from the appropriate classroom instructor.
7. Academic Advisors will discuss achievement, exam results, and recommendations for content areas to review.
8. The Academic Advisor will make appropriate professional referrals regarding problems beyond the scope of the Advisor.

Financial Aid:

The Financial Aid and Recruitment Coordinator provides assistance to incoming and current students concerning financial aid. Guidance is provided regarding sources of aid, application, and financial aid status.

Career

The faculty provide students with assistance in establishing their professional goals and developing professional materials and skills. Guidance may be provided in scheduled theory application opportunities and individual counseling.

Employee Assistance Program

The Washington Health System Employee Assistance Program (EAP) is available to all Washington Health System School of Nursing (WHSSN) employees and students.

Students enrolled in the WHSSN program will have use of the EAP, with the following modifications:

- I. The Washington Health System EAP is available to students only. No family members of students are covered under the program.
- II. Referrals to the EAP may come via the following:
 - A. Self-Referral – Students themselves make direct contact with the EAP. In this case, no feedback is necessary to School of Nursing management personnel.

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- B. Faculty-Assisted Referral – Any WHSSN faculty member or staff can determine the need for a student to seek personal counseling. Faculty-assisted referrals may necessitate that School of Nursing Administration be made aware of student's initial contact with EAP and continued participation in EAP recommended treatment.
- III. Students in the School of Nursing receive information concerning the EAP during orientation.
- IV. Students may be required to meet with the EAP Counselor.

All School of Nursing students are encouraged to use the EAP when necessary.

1960

Revised: 7/2013, 5/2014, 2/2015, 6/2016; 3/2018; 2/2019; 3/2023; 2/2024

Reviewed: 5/2012; 12/2015; 2/2017; 4/2020; 2/2021; 2/2022

Counseling Form

**Washington Health System School of Nursing
COUNSELING FORM**

(To be completed for a non-academic issue)

STUDENT: _____

SEMESTER: _____ **COURSE:** _____

STATEMENT OF CONCERN: _____

MEETING DATE AND LOCATION: _____

GOAL PLAN: _____

STUDENT COMMENTS: _____

FOLLOW-UP SESSION DATE: _____

SIGNATURES:	FACULTY _____	DATE: _____
	STUDENT _____	DATE: _____

FOLLOW-UP SESSION: _____

SIGNATURES:	FACULTY _____	DATE: _____
	STUDENT _____	DATE: _____

Copy of document to Assistant Director, School of Nursing, Student, and Academic Advisor. Original copy in student's file.

4/11/1995

Revised: 3/2013; 2/2015; 3/2023 Reviewed: 7/2013, 5/2014; 12/2015; 6/2016; 2/2017; 3/2018; 4/2020; 2/2021; 2/2024

Career Counseling Policy

The School of Nursing provides students with assistance in acquiring the information and skills needed to successfully secure employment as an RN. The School of Nursing does not provide job placement. Services provided range from individual counseling to seminars and fairs. Any of the following services *may* be provided by the School of Nursing:

1. Washington Health System Employment Opportunities:
Representatives from Hospital Administration and Human Resources speak with Level II students regarding job opportunities within the Washington Health System.
2. Individual Career Counseling:
Students may discuss career plans and have applications, résumés and correspondence evaluated on an individual basis.
3. Job Opportunities:
Known job opportunities are communicated as information becomes available.

1987 Revised: 7/2013, 5/2014, 2/2015, 6/2016; 3/2018; 2/2019; 4/2020 Reviewed: 5/2012; 12/2015; 2/2017; 3/2018; 2/2021; 2/2022; 2/2023; 2/2024

Dress Code Policy

The Dress Code at Washington Health System School of Nursing is established in order to maintain the following standards:

1. School of Nursing students have the responsibility to maintain an environment which adheres to established infection control and safety standards.
2. School of Nursing students have the responsibility to maintain an aesthetically pleasing environment and professional image for patients who are receiving nursing care. In addition, attire is one method by which the patient and family can identify groups of caregivers.

Identification Badge:

Photo ID Badges will be issued by WHS according to standards set forth in the hospital's policy and are to display the first name and last initial of the wearer. Students will not falsify, counterfeit, alter, tamper with or allow another person to use their photo ID badge. The badge **MUST** be visibly worn above the waist at all times the student is in the hospital or School of Nursing building. These are to be returned to the School of Nursing when the student leaves the program or graduates.

While the Health System recognizes the employee's right to make choices regarding their appearance, not all choices are appropriate for the workplace. Consequently, the following list, while not all inclusive, defines **unacceptable** practices for grooming and appearance of all employees while at work. Since opinions may vary on the definition of "extreme" or "excessive", a reasonable person standard will be applied by the Health System when assessing employees' compliance.

- Long hair that is not pulled back and creates patient contact during patient care or transporting of patients
- Heavy/excessive makeup
- Excessive use of perfume, cologne or aftershave
- Offensive body odor and poor personal hygiene
- Odor related to tobacco use or smoking
- Any jewelry that is restrictive or presents safety hazard
- Wearing more than a total of two rings when working in a patient care position
- Wearing facial/oral jewelry such as eyebrow rings, nose rings, lip rings or studs, tongue studs, ear bars/rods and ear gauging (except for solid gauges). A single nose stud or eyebrow stud (not a ring) may be worn.
- Facial tattoos except for permanent make up, i.e. eyeliner, lip liner, eyebrows.
- Tattoos that are, in the sole opinion of the leadership team, inappropriate for the workplace, i.e. religious, demonic, racial, profane, sexual, or gang related by example and not an exhaustive list
- Artificial fingernails for patient care providers as further defined in the Infection Control Policy
- Mustaches and beards that are not clean and well-trimmed or that inhibit proper respirator fit

Classroom and School Building:

Students are to adhere to all aspects of the *Dress Code Policy* as described above and be appropriately attired at all times. It is assumed that the student will use good taste in a modest appearance in accordance with each setting, i.e. – no bare midriff or low-cut tops, short-shorts, etc. No article of clothing is to be shorter than four inches above the knee. Rubber flip-flops are not permissible footwear. Failure to adhere to the *Dress Code* will result in a conduct form, as well, students in violation of this policy will be sent home for the remainder of the day unless the violation can be corrected immediately. Students will be permitted to return to the classroom once the violation is corrected.

Rice Energy Family Simulation Center

The approved student uniform is to be worn.

Hospital - Non-Clinical Days:

When visiting the nursing units for patient assignments, students are required to wear either a student uniform or professional attire (jeans, sweat pants, leggings, jeggings, shorts are not considered professional attire) with a warm-up jacket with the school insignia. No open-toed shoes are permitted. Identification badge is to be worn and visible at all times above the waist. School of Nursing faculty and administration have the right to require students to modify their attire if it is determined to be inappropriate. Unless the violation can be corrected immediately, the student will be sent home.

Clinical Days:

The School of Nursing adheres to Washington Health System Dress Code as amended for students:

1. The faculty has the responsibility to assure that the above standards are enforced on the area of assignment.
2. The basic uniform is as follows:
 - A. Approved student uniform. Pants are to be altered if necessary so the hem of the pants does not touch the floor.
 - Clean, solid shoes that are of non-absorbent material, have a slip resistant rating, and have enclosed toes and heels
 - Warm-up jacket with school insignia
 - Watch with second hand or smart watch (Refer to the Cellular Telephone/Electronic Devices Policy)
 - Stethoscope
 - Bandage scissors
 - Pen Light
 - Specific clinical site items as per WHS policies (i.e. goggles & masks)
3. Inherent in the basic uniform code are the following factors: (In addition to the previous policy)
 - Identification badge is to be worn above the waist and visible at all times.
 - Uniforms must be loose enough and of appropriate length to allow performance of activities modestly. Pants are to be altered if necessary so the hem of the pants does not touch the floor.
 - Undergarments should not be visible through uniforms. Students may wear a white or black camisole, tank top, or long-sleeved shirt, or t-shirt under the uniform top.
 - External artificial cosmetic enhancements (i.e. eye lashes, hair pieces, etc.) are not to be worn.
 - Maternity uniform must be consistent in style with the student uniform and must be approved by School Administration.
4. Noncompliance with the established *Dress Code*, for direct clinical experiences, will result in the student being sent off clinical for the rest of the day unless the violation can be corrected within 30 minutes. (Students are not permitted to miss more than 30 minutes of clinical experience). In addition, the infraction will be reflected on the scoring of the Weekly Clinical Evaluation Tool under Professionalism. For Simulation/Skills experiences, a conduct form will be issued for a violation, the student will be dismissed from the experience, and make-up is required. For clinical experiences not evaluated on the WCET, failure to adhere to the *Dress Code* will result in a conduct form.

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Library Utilization Policy

Library Hours

The Health Services Library is open Monday through Friday, 7:30am-4:00pm. After-hours access will be via security code (542).

Classifications

Materials are catalogued according to the *National Library of Medicine Classification System*.

Journals

The Health Service Library subscribes to a variety of electronic databases which are available for use by physicians, staff, faculty, and students on the hospital intranet. Several journals are subscribed to and hard copies are received in the library. The hard copies are shelved in alphabetical order according to the title. All journals are for in Library use only.

Books

Reference books may be borrowed for one week. Physicians, faculty, staff, and students of WHS may borrow books. The borrower must sign the card and provide their name, an e-mail and phone number. Required textbooks for the WHS School of Nursing are in-Library use only. Signage indicates they are required textbooks.

Returning Materials

All materials must be returned to the library on or prior to, its due date. Students of WHS must return all borrowed books prior to progression to the next semester or graduation. If not returned, administrative disciplinary action may be taken.

Reference Services

Professional reference assistance and computer searches are available during Library hours utilizing a variety of electronic data bases. Interlibrary loans for materials not available in the hospital Library are available. Contact the WHS Education Department (x3688) for assistance.

Computers

Computers in the Health Services Library are available for physicians, faculty, staff, and students of WHS primarily for research and academic purposes. The hospital intranet is available on computers for access to electronic databases and professional use.

Printers

Printers are available in the library. The individual must bring paper for printing.

Acquisition and Withdrawal of Reference Materials

Administrators, physician, faculty, staff, and students of WHS are encouraged to suggest materials for the library references. Suggestions for the School of Nursing materials will be discussed and decided upon by the SON Library Committee.

Books and journals are kept for five (5) years and may be kept longer if they meet any of the following criteria: of historical value; a classic in the field; no material available; there is limited coverage in the field.

1957. Revised: 5/2013; 5/2014; 12/2015; 6/2016; 3/2018; 1/2018; 2/2019; 2/2023; 3/2023; 2/2024

Reviewed: 2/2015; 2/2017; 4/2020; 2/2021; 2/2022

Social Networking Guidelines Policy

I. POLICY

It is the policy of Washington Health System (WHS) to implement standards regarding social networking media. Social networking media may be used by WHS workforce members for approved business-related purposes only, when accessing from WHS equipment, subject to the restrictions set forth in this policy. These restrictions are intended to ensure compliance with legal, regulatory restrictions, privacy, and confidentiality agreements. Social networking media includes, but is not limited to, blogs, podcasts, discussion forums, and social networks sites including but not limited to; Facebook, MySpace, LinkedIn, Instagram, SnapChat, Twitter, TikTok, and YouTube.

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II. PURPOSE

The purpose of this policy is to provide WHS workforce members with guidelines for participation in social networking media, including WHS-hosted social media network(s), and non-WHS social networking media in which the workforce members affiliation with WHS is known, identified, or presumed.

III. DEFINITIONS

Blog Short for "Web log," means a site that allows an individual or group of individuals to share a running log of events and personal insights with online audiences.

Podcast means a collection of digital media files distributed over the Internet, often using syndication feeds, for playback on portable media players and personal computers.

RSS feeds or Syndication feeds means a family of different formats used to publish updated content such as blog entries, news headlines or podcasts and "feed" this information to subscribers via e-mail or by an RSS reader. This enables users to keep up with their favorite Web sites in an automated manner that's easier than checking them manually (known colloquially as "really simple syndication").

Social networking media includes but is not limited to blogs, podcasts, discussion forums, on-line collaborative information and publishing systems that are accessible to internal and external audiences (i.e., Wikis), RSS feeds, video sharing, twitter, and social networks like MySpace and Facebook.

Wiki allows users to create, edit, and link Web pages easily; often used to create collaborative Web sites (called "Wikis") and to power community Web sites.

Workforce members means employees, volunteers, and other persons whose conduct, in the performance of work for a covered entity, is under the direct control of such entity, whether or not they are paid by the covered entity. This includes full time, part time and per diem employees, affiliates, associates, students, volunteers, trainees, physicians, and staff from third party entities who provide services to the covered entity.

IV. PROCEDURE

A. PARTICIPATION GUIDELINES

This policy applies to all workforce members using social networking media at any time, whether the workforce members is at work or away from work, when the workforce members WHS affiliation is identified, known, or presumed. It does not apply to content that is clearly non-health care related or is otherwise unrelated to WHS. Workforce members are expected to adhere to WHS compliance requirements and WHS Notice of Privacy Practice, Code of Conduct and WHS Confidentiality Agreement when using or participating in social networking media. Workforce members must always be mindful of other WHS policies when using social networking media. All the rules that apply to other WHS communications apply here, specifically: respecting employees, patients, customers, and one another; protecting confidentiality, privacy and security; and safeguarding and proper use of WHS information.

B. WHS SPONSORED SITES

Social media may only be used by WHS employees and workforce members who have:

1. Approval from Administration,
2. Specific assigned job responsibilities for WHS business-related purposes, and;
3. Subject to the guidelines and restrictions set forth in this policy to ensure compliance with legal and regulatory restrictions and privacy and confidentiality laws and agreements.

By posting any comments, posts, or other material on WHS-sponsored sites, you give WHS the irrevocable right to reproduce, distribute, publish, display, edit, modify, create derivative works from, and otherwise use your submission for any purpose in any form and on any media.

WHS reserves the right, in its sole discretion, to:

1. Remove communications that are abusive, illegal, or disruptive, or that otherwise fail to conform to this policy.
2. Edit or delete any communications posted on the site feature, regardless of whether such communications violate these standards.

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3. Direct workforce members, who have specific assigned job responsibilities and business-related purposes of WHS sponsored sites, to; post stories, photos, video or audio recordings of patients and workforce members pursuant to the following:
 - Marketing and Community Relations Department **must be** notified prior to photography of patients and workforce members for general publicity purposes.
 - **Must** obtain written authorization of the patient or the patients legal representative and workforce members using the *WHS Consent and Release for Taking and Publication of Photographs and Audiovisual Recordings of Patients consent form #2138*.
 - **Must** adhere to the **Taking and Publication of Photographs and Audiovisual Recordings of Patients Policy** and the **Cell Phone and Electronic Communication Devices Use Policy**.

Workforce members may **NOT**:

1. Disclose any employee/patient identifiable information of any kind (including photos, live feed videos or recordings, and live feed audio, or recordings) on any social networking media. Even if an individual is not identified by name within the information you wish to use or disclose, if there is a reasonable basis to believe that the person could still be identified from that information, then its use or disclosure could constitute a violation of the Health Insurance Portability and Accountability Act (HIPAA) and/or WHS – Confidentiality of Protected Health Information policy.
2. Post material or conduct any activity that fails to conform to any and all applicable state and federal laws or infringes on the rights of any third party, including intellectual property, proprietary information, privacy, or publicity rights. It is critical that everyone abide by the copyright laws by ensuring that they have permission to use or reproduce any copyrighted text, photos, graphics, video, or other material owned by others.
3. Post material that is unlawful, obscene, defamatory, profane, libelous, threatening, harassing, abusive, or slanderous to any other person or entity as determined by WHS in its sole discretion.
4. Post advertisements or solicitations of business.
5. Post chain letters or pyramid schemes.
6. Impersonate another person.
7. Allow any other person or entity to use your identification for posting or viewing comments.
8. Post the same note more than once or "spam."
9. Post information on subjects not related to the organization.
10. Disclose any confidential or proprietary information of or about WHS, its affiliates, vendors, partners, or suppliers, including but not limited to business and financial information.
11. Cite or reference clients, partners, or suppliers without the prior written approval of both your supervisor and the client, partner, or supplier. When the company wishes to communicate publicly – whether to the marketplace or to the general public – it has well-established processes to do so. Only those officially designated by WHS have the authorization to speak on behalf of the company.
12. Disclose or use WHS confidential or proprietary information or that of any other person or company on any site. For example, you must ask for express, written permission to publish someone's picture or a conversation that was meant to be private.
13. Disclose or otherwise discuss any confidential information or details of your communications with clients, partners, or suppliers. If you are blogging about your work for WHS, we encourage you to use your real name, be clear who you are, and identify that you work for WHS. You are strictly prohibited from using a false name or the name of another WHS workforce members.

C. NON-WHS SITES

When posting any comments or other material on Non-WHS hosted sites workforce members **must**:

1. Where your connection to WHS is apparent, make it clear that you are speaking for yourself and not on behalf of WHS. Workforce members must not say or suggest that the views and opinions they express related to WHS, and health care topics represent the official views of WHS.
2. Use your personal e-mail address (not your whs.org email address) as your primary means of identification. Just as you would not use WHS stationery for a letter to the editor with your personal views, do not use your WHS e-mail address for personal views.

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When posting any comments or other material on Non-WHS hosted sites workforce members may **NOT**:

1. Disclose any employee/patient identifiable information of any kind (including photos, live feed videos or recordings, and live feed audio or recordings) on any social networking media. Even if an individual is not identified by name within the information you wish to use or disclose, if there is a reasonable basis to believe that the person could still be identified from that information, then its use or disclosure could constitute a violation of the Health Insurance Portability and Accountability Act (HIPAA) and/or WHS – Confidentiality of Protected Health Information policy.
2. Disclose any confidential or proprietary information of or about WHS, its affiliates, vendors, partners, or suppliers, including but not limited to business and financial information.
3. Cite or reference clients, partners, or suppliers without the prior written approval of both your supervisor and the client, partner, or supplier. When the company wishes to communicate publicly – whether to the marketplace or to the general public – it has well-established processes to do so. Only those officially designated by WHS have the authorization to speak on behalf of the company.
4. Disclose or use WHS confidential or proprietary information or that of any other person or company on any site. For example, you must ask for express, written permission to publish someone's picture or a conversation that was meant to be private.
5. Disclose or otherwise discuss any confidential information or details of your communications with clients, partners, or suppliers.

D. POLICIES

WHS workforce members must follow all applicable WHS policies. Among the policies most pertinent to this discussion are:

1. Cell Phone and Electronic Communication Devices Use Policy
2. Confidentiality of Protected Health Information Policy
3. Internet/e-Mail Use Policy
4. Sanction Policy for HIPAA Violations
5. Taking and Publication of Photograph and Audiovisual Recording of Patients Policy
6. Workplace Civility Policy

Workforce members must have prior, written approval from their administration before setting up a WHS-hosted site or other WHS social media site.

Ensure that your blogging and social networking activity does not interfere or conflict with your work commitments. Workforce members will be required to indemnify WHS against any damages, losses, liabilities, judgments, costs or expenses (including reasonable attorneys' fees and costs) arising out of a claim by a third party relating to any material you have posted.

Please remember that when you post a comment, photos and/or videos to a blog or site, it is published for the world to see. For your own privacy and that of your family, you should consider carefully how much detailed personal medical information linked to your name you want published on the Internet.

Failure to adhere to any part of this policy or to use social networking media in a manner not consistent with this policy may result in discipline, up to and including discharge.

Violation of any part of this policy or to use social networking media in an otherwise inappropriate manner will be reported to the Assistant Director, Staff Education/School of Nursing and the infraction will be subject to the *Student Conduct Policy*.

Standards for Typewritten Work Policy

Washington Health System School of Nursing developed the standards of typewritten work to provide consistency in the use of reference material and to prevent plagiarism. Referencing is used to give credit to the ideas and words of another person, researcher, author, or editor. Paraphrasing is summarizing a passage or rearranging the order of a sentence and changing some of the words (American Psychological Association, 2020). Each time you use a direct quotation or paraphrase an author, you need to credit the source in the text. Direct quotations must be placed in quotation marks.

Plagiarism is the act of taking the writings or works of another person and using them as your own.

Plagiarism by students, professors, or researchers is considered academic dishonesty or academic fraud. Electronic text has made the physical act of copying the work of others much easier.

All of the following are examples of plagiarism:

- Submitting someone else's work as your own
- Copying words or ideas from someone else without giving credit
- Failing to put a quotation in quotation marks
- Giving incorrect information about the source of a quotation
- Changing words but copying the sentence structure of a source without giving credit
- Copying so many words or ideas from a source that it makes up the majority of your work, whether you give credit or not
- Sharing of one's work with or without knowledge of intent to plagiarize

<http://www.plagiarism.org/plagiarism-101/what-is-plagiarism/>

In order to verify the student understands plagiarism, they will be responsible for completing the SON Plagiarism Net Learning Module and test within the first week of their start of the program.

The student will be encouraged to use current APA standards in all designated written work. Most written assignments will be guided by a Rubric and indicate point value for each aspect of professional submissions. The current APA Standards can be found within the following resources:

1. American Psychological Association. (2020). Publication manual of the American Psychological Association (7th ed.). Washington, DC: Author
2. <http://www.apastyle.org/index.aspx>

10/1994 Revised: 8/2011, 4/2015; 6/2016; 1/2019; 2/2019; 10/2019; 2/2022 Reviewed: 7/2013, 5/2014; 12/2015; 2/2017; 3/2018; 2/2021; 3/2023; 2/2024

Copyright Disclaimer Policy

The Washington Health System School of Nursing (WHSSN) reserves all rights to the information/presentations/activities/ simulations/examinations developed by WHSSN Faculty utilized for instruction and evaluation. In the interest of protecting this property, sharing outside of the WHSSN unless written permission is obtained from the school administration or faculty is prohibited. Any unauthorized broadcasting, public performance, copying, or re-recording will constitute an infringement of original copyrights. Students wishing to utilize any property developed by the SON for utilization within the school shall obtain permission of the creator and provide proper citation.

Revised: 3/2020; 2/2022 Reviewed: 3/2021; 3/2023; 2/2024

Audio/Visual Reproduction Policy

Students are not permitted to take photographs or make video reproductions during theory or clinical sessions. Students are not permitted to make audio reproductions during clinical sessions.

The following rules govern the use of audio reproduction during theory sessions:

1. Students must ask permission of each faculty member/guest lecturer/peers prior to audio reproducing any theory session. Any faculty member/guest lecturer/peer has the right to refuse this request.
2. Student audio reproductions are:
 - a. Not to be duplicated for any reason.

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- b. Not to be audible in the presence of anyone that could constitute a breach in confidentiality.
- c. To be destroyed no later than the end of the semester in which they were made.
- d. To be used for individual study only.

Faculty, staff and the Washington Health System Washington Hospital assume no responsibility for inappropriate use of student made audio reproductions.

1/1995 Revised: 5/2010, 7/2013; 2/2022 Reviewed: 5/2014, 2/2015; 12/2015; 6/2016; 2/2017; 3/2018; 2/2019; 4/2020; 2/2021; 3/2023; 2/2024

Communications Policy

Only ***Emergency*** telephone calls from individuals trying to reach students will be accepted (724-223-3167).

It is expected that students check their mailboxes each day that they attend classes.

Students must have their mailbox key to get mail – WHSSN staff cannot retrieve mail for a student.

Students are responsible for all email correspondence Monday through Friday during the hours of 08:00 to 16:00.

The address for receiving mail at the School of Nursing is:

Your Name Mailbox Number Washington Health System School of Nursing 155 Wilson Avenue Washington, PA 15301
--

Cell Phone/Electronic Communication Devices

Picture taking is strictly prohibited in all areas of the Hospital and satellite locations, unless prior authorization has been obtained from the Administration.

Students may not make or receive calls/text via their personal cell phones or smart watches during clinical experiences and must be silent and stowed in purses, totes, and backpacks unless otherwise directed.

In the School of Nursing Building, cellular telephones and all other electronic devices, with the exception of the required electronic device as specified (minimum of a 7.5" screen, 32 GB memory, camera, microphone, and Microsoft Word), must be silent and stowed in purses, totes, and backpacks unless otherwise directed.

4/1/2004 Revised: 5/2013, 5/2014, 8/2014, 6/2016; 3/2018; 2/2021; 2/2022; 2/2023 Reviewed: 5/2012, 3/2015; 12/2015, 2/2017; 2/2019; 4/2020; 2/2024

Computer/Internet Usage Policy

Disclaimer of Liability for use of Internet

The Washington Health System Washington Hospital is not responsible for material viewed or downloaded by users from the Internet, which is a worldwide network of computers containing millions of pages of information. Users are cautioned that many of these pages include offensive, sexually explicit, and inappropriate material. In general, it is difficult to avoid at least some contact with this material while using the Internet. Even innocuous search requests may lead to sites with highly offensive content. In addition, having an e-mail address on the Internet may lead to receipt of unsolicited e-mail containing offensive content. Users accessing the Internet do so at their own risk.

Students Duty of Care

Students should endeavor to make each electronic communication truthful and accurate. E-mail communications should be drafted with the same care and attention as any other written communication.

Since important school-related communications will be delivered through this medium, it will be required that students check their e-mail on a regular basis, as delineated below. Failure to regularly check e-mail will result in appropriate actions being taken through the progressive discipline policy.

No Expectation of Privacy

The computers are to assist them in school performance. Students should not have an expectation of privacy in anything they create, store, send, or receive on the computer system. The computer system belongs to the Hospital and may only be used for school purposes.

Monitoring of Computer Usage

The school has the right, but not the duty, to monitor any and all aspects of its computer system, including, but not limited to, monitoring sites visited by students on the Internet, monitoring chat groups and newsgroups, reviewing material downloaded or uploaded by users to the Internet, and reviewing e-mail sent and received.

Blocking of Inappropriate Content

The Hospital may use software to identify inappropriate or sexually explicit Internet site. Such sites may be blocked from access by Hospital networks. In the event you nonetheless encounter inappropriate or sexually explicit material while browsing the Internet, immediately disconnect from the site regardless of whether the site was subject to Hospital blocking software.

Prohibited Activities

Material that is fraudulent, harassing, embarrassing, sexually explicit, profane, obscene, intimidating, defamatory, or otherwise unlawful or inappropriate may not be sent by e-mail or other form of electronic communication (bulletin board systems, newsgroups, chat groups), downloaded from the Internet, or displayed on or stored in The Washington Hospitals' computers. Students encountering or receiving this kind of material should immediately report the incident to their supervisor and to Information Systems Management.

Games and Entertainment Software

Students may not use the Hospital's Internet connection to download games or other entertainment software, including screen savers, or to play games over the internet.

Illegal Copying

Students may not illegally copy material protected under copyright law or make that material available to others for copying. Students are responsible for complying with copyright law and applicable licenses that may apply to software, files, graphics, documents, messages, and other material you wish to download or copy. Students may not agree to a license or download any material for which a registration fee is charged without first obtaining permission in writing from the Director and Information Systems Management.

Virus Detection

Students who suspect that a virus has been introduced into the Hospital's network should immediately notify school administration.

Use of Encryption Software

No encryption software may be installed by students other than those authorized to do so by Information Systems management.

Enforcement of Other Policies

All other Hospital policies are incorporated into the document by reference. In their use of the Internet, students must observe and comply with all other policies and guidelines of the Hospital, which are incorporated here by reference.

Amendments and Revisions

This policy may be amended or revised from time to time as the need arises. Users will be provided with copies of all amendments and revisions. Violations of this policy will be taken seriously and may result in disciplinary action, including possible dismissal from the program.

Computers are available in room N-167 and the Student Center. In order to maintain the integrity of the computers, students are not permitted to:

- Have food or beverages near computers.
- Save files to the computers (all files must be saved to a virus checked external storage device).

Use of SON WHS Mobile is restricted to examinations on the iPad only. All other internet usage will be done by WHSNET. A confidential password will be assigned by Information Technology at the start of the program.

Any violation of this amendment will result in a conduct form per the misconduct policy.

Student Orientation (Committee / Teaching Team) Policy

- I. **Introduction:** Assistant Director, Staff Education/School of Nursing to provide an orientation to the students appointed to be members or class representatives for committee or course meetings (Teaching Teams).
 - A. Purpose
 1. Present the functions of committees and teaching teams in student education.
 2. Explain role of students on committees and teaching teams.
 3. Obtain commitment from students who serve on committees and teaching teams.
 - B. Committee and Teaching Team Functions:
 1. Conduct the business of the School of Nursing.
 2. Make recommendations to Faculty Organization on all aspects of School of Nursing policy, procedure, etc.
 3. Keep School of Nursing current in nursing education and meet standards for accreditation and approval.
 4. Implement actions of committees following Faculty Organization approval.
 - C. Student Functions on Committees:
 1. Participate in appropriate business of the School of Nursing.
 2. Represent your class on committees and teaching teams.
 3. Report appropriate information to your class.
 4. Participate in discussion and decision-making.
 - D. School of Nursing Committees and Student Members:
 1. Curriculum Committee (Level I and Level II Class Representatives)
 2. Teaching Team (Class President or their designee)
 3. Technology Committee (Level I and Level II Class Representatives)
 4. Library Committee (Level I and Level II Class Representatives)
- II. **Role of Student on Committees or Teaching Teams**
 - B. Communicator:
 1. Student representative obtains input from peers and relays the information to the chair.
 2. Chairperson to place items on the agenda.
 3. From peers → Committee or Teaching Team
 4. From Committee → Peers
 - C. Participator → Give information → Discuss → Decision-Making
- III. **Expectations**
 - A. **Commitment:** Time to attend all meetings. If unable to attend, notify the chairperson and notify alternate requesting they attend. Alternate - if can't attend, notify the chairperson.
 - B. **Confidentiality:** What you hear stays in the room, what is discussed is not shared, unless appropriate. If you have any questions about what to share/not share, talk to the chairperson.
 - C. **Honesty/Integrity:** Even if you don't agree with the outcome, you support the majority vote.
 - D. **Term of Appointment:**
 1. Two (2) semesters for Committees. Two (2) semesters for Teaching Teams
 - E. **Termination of Service:**
 1. Students can be terminated by:
 - a. Failure to attend meetings and not notifying alternate to attend
 - b. Level I or II Class President request resignation
 - c. Resignation: Students can resign their position on a committee or teaching team at any time. Resignations are to be submitted in writing to the appropriate Level Class President or Assistant Director, School of Nursing.

Representative Responsibilities

Gather appropriate input from class



Consult with committee chair if necessary



Attend and participate in scheduled meeting (share class issues with committee)



Report back to class in a timely manner

11/1995 Revised: 5/2009, 5/2014, 6/2016; 3/2018; 2/2019; 2/2021; 2/2022; 3/2023 Reviewed: 7/2013, 3/2015; 12/2015; 2/2017; 4/2020; 2/2024

Community Service Process Policy

Each student is required to perform a minimum of (2) Community Service activities by the end of N300. Any student who does not make a commitment for Community Service activities will not progress into N400.

Community service activities are defined as (unpaid) volunteer service for others. Returning and transfer students entering into the program will have their community service pro-rated based upon their previous Community Service Activities.

Pre-approved community service activities are listed under General Course Documents on EDU. Community service activities outside of the preapproved list must be approved by completing the Community Service Pre-Approval Form, and submitted to the Assistant Director, School of Nursing a minimum of two weeks in advance of the activity.

The Assistant Director, School of Nursing will approve or reject the request within two school days of receiving the completed form and will return the form to the student.

Community service activities must be verified in writing, by someone of authority from the organization who sponsored the activity. The written verification is to be submitted to the Academic Advisor who will document the activity on the Community Service Tracking Tool.

The Academic Advisor(s) will monitor the completion of this program requirement and advise the student of the activities still needed to move into Nursing 400.

4/2013 Revised: 1/2014, 12/2014, 6/2016, 6/2016, 2/2017, 5/2018, 2/2022; 3/2023 Reviewed: 5/2014, 2/2015; 12/2015; 3/2019; 4/2020; 2/2021; 2/2024

Community Service Tracking Tool

Washington Health System School of Nursing
Community Service Tracking Tool

Graduating Class of _____
* Minimum of (2) activities by the end of N300

Student Name: _____

	Date	Description of Activity	Faculty Verification
1.			
2.			

Community Service Pre-Approval Form

COMMUNITY SERVICE PRE-APPROVAL FORM

Request Date: _____ **Student Name:** _____

1. Describe the Community Service activity for which approval is requested.

2. Date, time frame, and location of the activity.

Date: _____ Timeframe: _____

Location: _____

Student Signature: _____

To be completed by the Assistant Director, Staff Education/School of Nursing

Date: _____

Approve: _____ Reject: _____

Assistant Director's Signature: _____

Alcohol and Drug Abuse Policy (*WHS policy)

The Washington Health System School of Nursing (WHSSN) is committed to maintaining a healthy and substance abuse-free environment that promotes the safety and welfare of students, faculty members, employees, patients, and families. The School of Nursing faculty and staff require that nursing students provide safe, effective, and supportive patient care. To fulfill this purpose, nursing students must be free of chemical impairment during participation in any part of the School of Nursing program including classroom, clinical laboratory, clinical settings, and other school sponsored functions.

The abuse of alcohol and/or other chemical dependencies are known to cause physical and psychosocial effects which may render that individual incapable of performing the essential functions of a student nurse in a safe, competent manner.

In accordance with the Federal Controlled Substance Act of 1970 and the Pennsylvania Controlled Substance, Drug, Device, & Cosmetic Act of 1972, the Washington Health System School of Nursing prohibits the possession, use, and/or distribution of alcohol or illegal drugs on hospital and school property, as well as off-site clinical locations.

Drug diversion, manufacture, sale, distribution, and possession of illicit/illegal controlled substances, as well as any misdemeanor or felony charges related to these conditions are grounds for permanent dismissal from the program.

The WHSSN defines the chemically impaired student as one who, while in the academic or clinical setting, is under the influence of, or has abused, either separately or in combination: alcohol, over-the-counter medication, illegal/illicit drugs, prescribed medications, inhalants, synthetic designer drugs, or other mood-altering substances. Substance abuse is the regular use of drugs for other than the accepted medical purposes and to the extent that it results in physical or psychological harm to the user and/or is used in a way that is detrimental to society. Abuse of the substance includes episodic misuse or chronic use, either prior to or during the academic or clinical experience, which has produced psychological and/or physical symptoms which endanger the student and others. Health risks associated with substance abuse may lead to both psychological and physical dependence that can affect virtually any body system depending on the particular substance abused.

The nursing faculty will intervene with the chemically impaired student as outlined in the established procedure. Based on the assumption that addiction is an illness that can successfully be treated, the faculty is committed to promoting student recovery from substance abuse. This would include referrals to the Employee Assistance Program (EAP) and/or the Pennsylvania Nurse Peer Assistance Program (PNAP).

The need for drug testing policies is grounded in the prevalence of chemical abuse & dependence in health care providers. Prior to admission, student applicants are required to submit to a hair follicle and urine drug screen at a designated time at the Washington Health System Employee Health Service (WHSEHS). The drug screen must be negative.

During the program the student may be subject to random urine drug screens no more than two times a year in a rolling twelve (12) month period. The student will complete/sign the required Random Testing form and EHS forms if selected for random testing/screening.

“For cause” testing will occur if “Reasonable Suspicion” of impaired behaviors of the student nurse are observed. If the student refuses testing, the student faces disciplinary action, including permanent dismissal from the school.

If a student nurse who is employed by the WHS shows “Reasonable Suspicion” of impaired behaviors, while in the hospital employee role, hospital policy would take precedence.

DEFINITION OF TERMS

For the purpose of this Policy, the below listed terms are defined as follows:

- A. **Legal Drug** - A prescribed drug or over-the-counter drug which has been legally obtained and is being used for the purposes for which it was prescribed or manufactured. Medical marijuana in a form lawfully obtained pursuant to the Pennsylvania Medical Marijuana Act and obtained from a lawful dispensary.
- B. **Illegal Drug** - Any drug which may not be legally obtained (e.g. non marijuana, narcotics, hallucinogens, etc.) or which, although legal, has been illegally obtained or prescribed, drugs not being used for prescribed purposes or in larger doses than recommended or marijuana not obtained in a lawful manner.

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- C. **Over the Counter Drugs** – any drug that is obtained without prescription, that alone or in conjunction with, other prescription and non-prescription medications, results in impairment.
- D. **Reasonable Suspicion**
 - 1. The nursing instructor observes that the nursing student's behaviors, speech, body odor, or appearance are indicative of the use of alcohol or drugs. Reasonable suspicious behaviors could include conduct that prevents the student from performing the essential functions of the student role or which poses a direct threat to themselves and/or to the safety of others.
 - 2. Aberrant or unusual behavior of an individual student which:
 - a. is the type of behavior that is recognized as an accepted symptom or symptoms of intoxication or impairment caused by illegal drugs, legally prescribed drugs taken in unsafe quantities, or alcohol;
 - b. is not reasonably explained as resulting from causes other than the use of controlled substances.
 - 3. Reports of illegal drug or alcohol usage or aberrant behavior by students, which are not confirmed by the firsthand observations of the nursing instructor, shall not constitute reasonable suspicion.
 - 4. Other Behavioral Red Flags that can be identified are:
 - a. Frequently being late or absent from class and clinical experiences
 - b. Repeatedly leaving class early and/or taking excessive unscheduled breaks during class and clinical experiences
 - c. Late submission of assignments with peculiar or improbable excuses
 - d. Unsafe performance or use of poor judgment in the clinical area
 - e. Deteriorating class and clinical performance
 - f. Frequently leaving the clinical area
 - g. Avoiding peer, faculty, and group work
 - h. Smell of alcohol and marijuana, which may be masked by breath mints/ sprays, chewing gum, perfumes/colognes, Febreze, etc.
 - i. Slurred or rapid speech, sleepiness, nervousness, excessive giddiness or talkativeness
 - j. Pinpoint or dilated pupils, bloodshot or red eyes and inappropriate use of sunglasses
 - k. Erratic behaviors with verbal or physical outbursts or threats to harm self or others
 - l. Unsteady or staggering gait; fine motor tremors.

Policy

- A. **Regulation of Alcohol and Illegal Drugs**-The use or possession of alcohol (except where specifically authorized in writing) or illegal drugs on the Hospital premises, or being under the influence of alcohol, lawfully obtained legal or illegal drugs on the job is prohibited. For purposes of medical marijuana, "under the influence" shall be defined as it is in the Medical Marijuana Act. For purposes of this Policy, testing positive, for alcohol, or illegal drugs (including marijuana) in any detectable levels shall be a violation of this policy.
- B. **Regulation of Legal Drugs** – Students should be aware that the use of some prescriptions drugs, drugs not prescribed for them, and/or over-the-counter drugs may also affect their ability to properly perform their student roles and responsibilities. Therefore, the student has the responsibility to support evidence of drugs taken if deemed impaired and subjected to drug testing.
- C. A student may continue to attend class, clinical, and school activities while using a legal, prescribed medication, as long as this does not pose a threat to her/his own safety or the safety of patients, hospital employees, visitors, or other students and the student can perform the student nurse roles, as determined by the EHS physician. The student will be held to the same accountability as a WHS employee.
- D. **Consistent Application of Policy** - This Policy regulating the use or possession of alcohol and drugs shall be administered fairly and consistently for all employees/students of the Hospital.

Procedure for Faculty Intervention with the Chemically Impaired Nursing Student

- A. **Hospital Clinical Experiences**
 - 1. Because patient safety is paramount, the faculty member will remove the student from the clinical unit to a private area if signs of impaired behavior are observed. Inform the student of faculty responsibility to remove from clinical or classroom setting for "reasonable suspicion".

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2. Prompt reporting to the proper chain of command is vital. The Director or Assistant, School of Nursing, will be notified immediately. The student will be questioned by the Director or Assistant, School of Nursing, or a designated faculty member regarding the use of any substances, and if used, what, when, and how much was used and by what route it was taken. The sign(s) and/or behavior(s) observed will be discussed and the student will be given an opportunity to provide a verbal explanation.
 3. If "Reasonable Suspicion" of substance abuse occurs, a search of the student's personal belongings, such as book bags, purses, and locker, by WHS Police, Director or Assistant, School of Nursing, and/or the involved faculty member of WHS is appropriate.
- B. **Other Experiences:** Should an incident be reported to the Director, School of Nursing, by any individual, from class or any other clinical experience (i.e., community agencies, Information Systems practice/testing), the Director or an authorized designee will discuss the sign(s) and/or behavior(s) observed with the student and question the student regarding substance use. The Director, School of Nursing, and hospital security will go together to the off-site location via hospital vehicle. The student will be given an opportunity to provide a verbal explanation. The student will be requested to sign the Alcohol and Drug Policy Consent/Refusal form for drug testing.
 - C. If the student signs a consent form, the Director, School of Nursing, or designated faculty member, and Security will escort the student directly, with no stops, to EHS for testing/assessment. If alcohol is the suspected substance used, Occupational Medicine must be notified so the student can be taken directly there for the assessment/testing/screening to be performed. In either circumstance, the Director, School of Nursing, or designated faculty member will remain with the student until the testing/assessment is completed.
 - D. If there is an incident of impaired behavior between the hours of 1600 to 0700 or on the weekend, the instructor will notify the Nursing Supervisor and then escort the student to the WHS Emergency Department for assessment. There may be an additional stipulation that the student nurse must report to EHS the next business day at 0700 for further testing.
 - E. The student will not be permitted to leave the Hospital site alone. A family member or friend must be called to escort and drive the student home. If the student refuses any of the previous options, and leaves the facility, 911 will be contacted and informed that an impaired driver left the hospital. Student name and address, vehicle information, travel direction, and other information will be given. The call will be documented.
 - F. The involved faculty member will complete the form, Documentation of Impaired Behavior Form, which documents evidence of chemical impairment. Meticulous documentation of suspected behaviors is necessary. This form will then be submitted to the Director, School of Nursing. All appropriate faculty members also involved with the student during that semester on a "need to know" basis will be informed by the Director, School of Nursing. A copy of this report will be placed in the student's file.
 - G. The student will be suspended from all class and clinical experiences until test results are received. A student with a negative result will be permitted to return to the school. A student with a positive result will remain on suspension pending the decision of the hearing.
 - H. The student will be informed by the Director, School of Nursing, of the results of the testing and the date of the panel hearing. The student does not attend the hearing.

Procedure for Hearing:

- A. The hearing to determine if the student is chemically impaired will include an inquiry panel consisting of the WHS EAP Coordinator, the Employee Health Nurse, the Director of Human Resources, the Director, School of Nursing, and a faculty member not directly involved in the incident.
- B. The student will be notified of the panel's decision. Throughout this process, every effort will be made to protect the student's privacy and confidentiality.
- C. If the panel finds that the student is not chemically impaired, the student will be permitted to continue in the nursing program and make-up assignments will be given. If it is determined that no violation has occurred, the documents will be removed from the student's file.
- D. If the panel finds the student is chemically impaired, the student may either be designated as Program Dismissal Permanent (PDP) or required to take a voluntary leave of absence and enter a rehabilitation program monitored by EAP or PNAP. If it is determined there was policy violation and the student refuses interventions, the student will be permanently dismissed from program.

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- E. The EAP Coordinator will determine if a leave of absence and full-time rehabilitation program are necessary. The EAP Coordinator will also formulate a treatment plan. The academic consequences resulting from the chemical impairment identification will be explained to the student. If a full-time rehabilitation program is mandated, the student will not be permitted to attend clinical or classroom experiences in the nursing course until the terms of the rehabilitation program are fulfilled. A semester grade of a withdrawal (W) will be assigned for these courses. Participation/return to school depends on completion of comprehensive chemical dependency evaluation, recommendation of evaluator, & agreement with treatment plan (if needed).
- F. Upon completion of a full-time rehabilitation program as validated by the EAP or PNAP the student may submit a written request for reinstatement into the program. This request must be submitted to the Recruitment and Admissions Committee twelve (12) weeks prior to the semester the student desires to return.
- G. Students who are mandated to attend an outpatient rehabilitation program may be permitted to continue in the program if recommended by the EAP or PNAP Coordinator. The student must complete all required rehabilitation programs and EAP counseling, as well as providing random alcohol/drug screens. Additional monitoring through EAP or PNAP may be mandated. Failure to complete all the monitoring requirements may result in immediate program dismissal, permanent (PDP).
- H. Should the student refuse to participate in a rehabilitation program, as determined by the EAP Counselor or PNAP, the student will be permanently dismissed (PDP) from the program. If additional chemical impairment occurs subsequent to implementation of these procedures, the student will be permanently dismissed (PDP) from the program.

Revised 1/2022; 3/2023

Reviewed: 12/2015; 6/2016; 2/2017; 3/2018; 3/2019; 3/2020, 3/2021; 2/2024

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Release of Liability Form

Preadmission Requirement
Consent to Voluntary Drug or Alcohol Screen Test
Release of Liability Form

I understand that, in accordance with the Washington Health System School of Nursing policy of providing and maintaining a safe and healthful drug and alcohol-free working environment for all student nurses, I will voluntarily submit to a hair follicle and urine drug and/or alcohol screen test as a preadmission requirement. I am aware that to be admitted to the Washington Health System School of Nursing, my drug screen must be negative.

I hereby authorize the release of the results of the test to the Washington Health System School of Nursing, the Washington Hospital Employee Assistance Program Coordinator and its designated Medical Representative.

I hereby release the Washington Health System School of Nursing, The Washington Hospital Employee Assistance Program, and its designated Medical Representative from any and all claims or causes of action resulting from this test and any decisions resulting there from.

Student: _____

Date: _____

Witness: _____

Date: _____

Supervisory Note: If the applicant refuses to consent to voluntary testing, the Director, School of Nursing or an authorized designee should document the date and time of refusal in the space provided below. The applicant will be denied admission to Washington Health System School of Nursing.

Student refusal to sign consent form that was presented to him/her:

Date: _____ Time: _____

Signed: _____ Date: _____

Director or Assistant Director, School of Nursing (or designee)

Witness: _____ Date: _____

Reasonable Suspicion Checklist**Washington Health System Reasonable Suspicion Checklist**

Employee's Name: _____	Employee's ID #: _____
Employee's Job Title: _____	
Location of Observation: _____	Date: _____ Time Observed: _____
Primary Observer's Name: _____	
Secondary Observer's Name: _____	

Observations by Trained Supervisor*(Check all that apply; provide brief descriptions/notes that support observations as needed)***WHAT I ACTUALLY SAW:*****General Appearance:***

- | | | | |
|--|--|---|--|
| ☐ Disheveled | ☐ Unusual attire for job or weather | ☐ Dirty or worn clothing | ☐ Sweating |
| ☐ Puncture marks or sores | ☐ Unusual bruises, cuts, or burns | ☐ Heavy eyelids | ☐ Widened eyelids |
| ☐ Constricted pupils | ☐ Dilated pupils | ☐ Bloodshot/red eyes | ☐ Watery eyes |
| ☐ Relaxed jaw/open mouth | ☐ Drooling | ☐ Flushed | ☐ Pale |
| ☐ Runny nose | ☐ Other (explain below) | | |

Description/Notes: _____

Behavior/ Demeanor:

- | | | | |
|--|---|--|--|
| ☐ Aggressive or Combative | ☐ Irritated or Grumpy | ☐ Nervous | ☐ Paranoid |
| ☐ Confused or Inattentive | ☐ Obsessing or Repeating | ☐ Non-compliant | ☐ Other (explain below) |

Description/Notes: _____

Motor Functioning:

- | | | | | |
|---------------------------------------|---|--|--|--|
| ☐ Swaying | ☐ Stumbling | ☐ Falling | ☐ Unbalanced | ☐ Hyperactive or Restless |
| ☐ Fidgeting | ☐ Shuffling or dragging feet | ☐ Slow moving | ☐ Uncoordinated | ☐ Sleeping |
| ☐ Hunched over | ☐ Slumped in chair | ☐ Other (explain below) | | |

Description/Notes: _____

WHAT I ACTUALLY HEARD:

- | | | | |
|---|---|---------------------------------------|--|
| ☐ Excessive or Rambling speech | ☐ Slurred speech | ☐ Slow speech | ☐ Rapid speech |
| ☐ Incoherent/difficult to understand | ☐ Loud speech | ☐ Quiet speech | ☐ Cursing |
| ☐ Threatening language | ☐ Sniffing | ☐ Snoring | ☐ Other (explain below) |

Description/Notes: _____

WHAT I ACTUALLY SMELLED:

- | | | | |
|---|---|--|--|
| ☐ Smell of alcohol | ☐ Smell of marijuana | ☐ Excessive cologne | ☐ Other (explain below) |
|---|---|--|--|

Description/Notes: _____

Additional Comments: _____

Testing Warranted? ☐ Yes ☐ No

Alcohol and Drug Policy Consent/Refusal Form**Alcohol and Drug Policy Consent/Refusal Form**

___ Washington Hospital

___ SON

___ WHS Greene

___ WPG

Reason for Testing:☐

Preplacement

☐

Attendance

___ Monitoring

___ Random

___ LOA

___ Reasonable Suspicion

Name of Employee/Student: _____**Emp ID #:** _____ **Date:** _____**Your Manager/Supervisor:** _____**Consent to Test:**

The undersigned understands that he/she is being tested under the provisions of Washington Health System's Alcohol and Drug Policy. The undersigned agrees to release and hold harmless Washington Health System, its employees and agents from any liability arising directly or indirectly from testing, and from any other decisions based upon the test results. The undersigned agrees that the results of the testing may be forwarded to the Washington Health System or its School of Nursing/Radiology as applicable.

Employee/Student Signature: _____ **Date** _____ **Time** _____**Witness Signature:** _____**Refusal to Test:**

The undersigned is refusing to submit to testing as requested under the provisions of the Washington Health Systems' Alcohol and Drug policy and understands that his/her actions may be cause for termination of employment/dismissal. The employee agrees to release and hold harmless Washington Health System, its employees and agents from any liability arising directly or indirectly from the request to testing, the employee's subsequent refusal to test and from any resulting other decisions.

Employee/Student Signature: _____ **Date** _____ **Time** _____**Witness Signature:** _____

Student Records Policy

The Family Educational Rights and Privacy Act (FERPA) of 1974, as amended, describes requirements regarding the privacy of student records. Students have three primary rights under FERPA. They have the right to:

1. Inspect and review their education records;
2. Have some control over the disclosure of information from their education records; and
3. Seek to amend incorrect education records.

(For further information related to confidentiality, refer to the Confidentiality Policy)

Notification

Each student is notified of their FERPA rights at the beginning of the program via Symplr Learning. Student FERPA notification is contained in the Student Handbook.

FERPA rights, policies, and procedures apply to all students in attendance at Washington Health System School of Nursing (WHSSN). Students are in attendance beginning with Nursing 100 and continuing through Nursing 400. Students who are attending post-secondary institutions to complete required college credits will follow the FERPA policies and procedures of the school they are attending.

Student Disclosure Information

WHSSN will compile demographic information for all students. Information may be disclosed to the public unless the student designates in writing that part of or all of the information be withheld. The student will have the opportunity to complete a *Student Disclosure Information Form* upon entry to the program.

Components of the *Student Disclosure Information Form* are:

1. Name
2. Address
3. Telephone/cell phone
4. E-mail address (school/home)
5. Dates of Attendance
6. Class
7. Previous institution(s) attended
8. Photograph
9. Date and place of birth

Student demographic information is maintained by the Admissions & Student Support Coordinator.

Information in alumni files is publicly accessible unless the school has been notified prior to or after graduation in writing to withhold specific information.

Student Education Record

Student education records are maintained by the Financial Aid and Recruitment Coordinator and the Admissions and Student Support Coordinator under the direction of the FERPA Compliance Officer. These records contain personally identifiable information for all students in attendance at the school.

Education records include:

1. Social Security numbers
2. Application documents:
 - Application
 - Transcripts
 - Test Scores
3. WHSSN transcript
4. Letters of correspondence
5. Release of information and waiver documents
6. Counseling Document
7. Conduct Document
8. Course Summary Sheet
9. Achievement Test Scores
10. Statistical Data Sheet
11. Criminal Record Check

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12. Child Abuse History Clearance
13. FBI Fingerprint-Based Background Check
14. Academic Warning Form
15. BLS Cards
16. Accommodations Requests

Students and alumni may inspect and review their educational record by completing a *Request to Review Educational Record Form*. Forms may be obtained from the FERPA Compliance Officer. Current and former students will be advised to complete the *Request to Amend Education Records*. In addition, current students may begin the *Student Fair Treatment/Grievance Procedure* if their request to amend their records is denied. Alumni will be advised to complete the *Alumni Request to Amend Education Records*.

Request for Transcript

Students may request copies of their official academic transcript for personal use or to be sent to a third party by completing a *Request for Official Transcript* from the school's website. Graduates and withdrawn students may request transcripts by completing the *Request for Official Transcript* which may be obtained from the Admissions & Student Support Coordinator. No charge will be made for the first transcript, however, a fee will be charged for subsequent transcripts. No official transcript will be released until all financial obligations to the school have been met, however an unofficial transcript may be issued.

Disclosure

WHSSN will obtain written consent from students and former students before disclosing any personally identifiable information from their education record, *Consent for Release of Education and Financial Records*, and *Release of Information to Clinical Agencies*. Education records or parts of records may be disclosed without the student's consent to:

1. Authorized audit and accreditation officials.
2. Veteran's Administration officials.
3. School officials within the School of Nursing who have a legitimate educational interest.
4. Persons or organizations providing financial aid to the student.
5. Parents of dependent students.
6. Persons in compliance with a judicial order or subpoena.
7. Persons in an emergency to protect health and safety of students.
8. Victims of a violent crime or sex offense.
9. Parents of students under the age of 21 regarding violation of any federal, state, or local law or any institutional policy governing use of alcohol or a controlled substance.

The permanent final academic transcript and course summary sheets of all nursing courses for every student in attendance are kept ad infinitum. Copies of WHSSN academic transcripts are stored electronically. Education records of students, who withdraw with the exception of the academic transcript and course summary sheet, are kept for five years and are subject to the same FERPA policies as current student education records.

Financial Aid Records

Financial aid records are maintained for all students receiving financial aid. These records are handled with the same FERPA conditions as education records. Financial aid records include:

1. Student Aid Report
2. Pennsylvania Higher Education Assistance Agency (PHEAA) Grant Award Notice
3. Federal Direct Loan Master Promissory Note
4. Federal Direct Plus Loan Master Promissory Note
5. Verification Worksheet (if selected)
6. Students' and Parents' income tax transcripts
7. Financial Aid Award letter
8. Documents listing a summary of tuition payments and awards
9. Entrance and exit counseling documents
10. Scholarships Awarded

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Students have the right to review their financial aid record with the exception of parents' financial data. The *Request to Review Financial Aid Records* form is available from the FERPA Compliance Officer. School officials demonstrating a need to know have access to these files. Personally identifiable financial aid information will be shared without the student's consent to:

- Individuals or organization representatives providing financial aid to the student.
- Representatives conducting an audit.

Students may sign a *Consent to Release Educational and Financial Aid Records Form* to release all or part of the financial aid record to outside parties. Financial aid records are kept for three years after graduation or withdrawal from the school.

Health Records

Health Records are maintained by the Employee Health Services. Students have the right to review their Health Records. Access to these records is limited to those with a demonstrated need to know. Students may sign a waiver, *Authorization for Release of Protected Health Information*, to release specific information to designated individuals or institutions. Health Records are kept ad infinitum in an electronic file.

Legitimate Educational Interest

Legitimate Educational Interest is defined as a "need to know" by certain school officials who act in the student's educational interest. These officials include instructors, administration, clerical, other professional employees and persons who manage student record information. Only school officials who demonstrate a need to know are permitted access to all or parts of the student's education record. The following school officials demonstrate a need to know*:

FERPA Compliance Officer (responsible for determining and enforcing FERPA policies and procedures)

- Education records
- Financial aid records
- Student directory

Financial Aid and Recruitment Coordinator (responsible for all financial aid, maintaining student financial education records, and assisting with recruiting process)

- Education records
- Financial aid records
- Student directory

Admissions and Student Support Coordinator (responsible for maintaining student databases, admissions processing, student education records, and maintaining alumni files)

- Education records
- Financial aid records
- Student directory

School Administrators (Director and Assistant Director, Staff Education/SON) (responsible for directing the program)

- Education records
- Financial aid records
- Student directory

Instructors (responsible for student education in courses assigned)

- School directory
- Academic information as it relates to need to know within the curriculum
- May have access to the education record if a need to know is demonstrated by completing a *Request to Review Education Records*. Need to know will be determined by the FERPA Compliance Officer.

Academic Advisors

- Academic Advisors have access to advisees' academic information across the curriculum to provide academic counseling.

*All Administration, instructors, and staff must sign a *FERPA Responsibility/Confidentiality Statement* each year.

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Complaints

Students have the right to file a complaint with the U.S. Department of Education concerning alleged failures by the school to comply with FERPA requirements. The name and address of the office that administers FERPA is:

Family Policy Compliance Office
U.S. Department of Education
400 Maryland Avenue S.W.
Washington, DC 20202-4605

Revised 6/2016; 2/2017; 3/2019; 3/2023 Reviewed 3/2018; 3/2020; 3/2021; 3/2024

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Student Disclosure Information Form**Student Disclosure Information Form**

We will be compiling a School Directory, which lists personal contact information for all Students, Faculty, Administration, and Staff of the Washington Health System School of Nursing for the current academic year. If at any time during the academic year you have a change in personal contact information, please notify the FERPA Compliance Officers or Director/Assistant Director.

Please list your current personal contact information.

Name: _____
 Address: _____
 Telephone (Home): _____
 Telephone (Cellular): _____
 School E-mail: _____
 Personal E-mail: _____
 Other (Specify): _____

The items listed below are designated as *directory information* and may be released for any purpose at the discretion of our institution.

Under the provisions of the *Family Educational Rights and Privacy Act of 1974, as Amended*, you have the right to withhold the disclosure of any or all of the categories of directory information listed below.

Please consider very carefully the consequences of any decision by you to withhold any category of directory information. Should you decide to inform the institution not to release any or all of this directory information, any future requests for such information from non-institutional persons of any organization will be refused.

The institution will honor your request to withhold any of the categories listed below but cannot assume responsibility to contact you for subsequent permission to release them. Regardless of the effect on you, the institution assumes no liability for honoring your instructions that such information be withheld.

Please mark the appropriate boxes and affix your signature below to indicate your approval for the institution to disclose the following public or directory information:

Category I		Category II		Category III
☐ ALL of this category		☐ ALL of this category		☐ ALL of this category
☐ Name		☐ Previous institution(s) attended		☐ Photograph(s) (if applicable)
☐ Address		☐ Awards		☐ Date and place of birth
☐ Telephone Number				
☐ Cellular Telephone Number				
☐ E-mail Address (School)				
☐ E-mail Address (Personal)				
☐ Dates of Attendance				
☐ Class				

☐ I hereby give Washington Health System School of Nursing permission to e-mail course information and/or have school faculty/administration contact me at the e-mail address I have provided.

 Last Name (Student) First Name

 Semester Year

 Student Signature Student ID Number

 Date

If this form is not received prior to the due date, it will be assumed that the above information may be disclosed for the remainder of the current academic year. A new form for non-disclosure must be completed each academic year.

2/1976 Revised: 5/2012, 3/2015, 6/2016; 3/2022 Reviewed: 7/2013, 5/2014; 12/2015; 2/2017; 3/2018; 3/2020; 3/2023; 2/2024

Request to Review Education Records Form

Washington Health System School of Nursing
155 Wilson Avenue
Washington, PA 15301
724-223-3167

Request to Review Education Records

Student

Requester

Date

Last Name

First Name

Last Name

First Name

Requester's Affiliation

Purpose of review:

Item(s) of information requested:

I hereby agree to keep the information disclosed to me confidential according to applicable legislation and regulations.

Date

Signature

OFFICE USE ONLYDisposition of request: ☐ Approved ☐ Disapproved Reason: _____

Specify materials reviewed (records, types of information)

Request to Amend Education Records Form

Washington Health System School of Nursing
155 Wilson Avenue
Washington, PA 15301
724-223-3167
Request to Amend Education Records

Last Name (Student)

First Name

Address

Telephone (include Area Code)

City, State, ZIP

I have reviewed my education records held within the Financial Aid and Admissions Office. I am not satisfied with the accuracy and/or completeness of these records. Specifically, I request that these records be amended in the following way(s).

I request that the following document(s) be removed from my file:

Date

Student Signature

FERPA Compliance Officers Reviewing Request to Amend Education Record

FERPA Compliance Officer(s)

Disposition of Request

Date

Reason for Approval/Disapproval (use next page if additional space is needed)

Date

FERPA Compliance Officer's Signature

Appeals of the FERPA Compliance Officer's decision will be made through the *Grievance Procedure Policy*. Please consult the Student Handbook to initiate the steps in this process.

Individual initiated *Fair Treatment and Appeals Procedure*:☐ Yes☐ No

Date: _____

Release of Information to Clinical Agencies Form

Washington Health System School of Nursing
155 Wilson Avenue
Washington, PA 15301
724-223-3167

Release of Information to Clinical Agencies

The Criminal Record Check, Child Abuse History Clearance, FBI Fingerprint-Based Background Check, Sexual Offender Registry, and T-Spot Test may be shared with clinical agencies in order for them to meet accreditation regulations.

Last Name (Please print)

First Name (Please print)

Signature

Date

Request to Review Financial Aid Records Form

Washington Health System School of Nursing
155 Wilson Avenue
Washington, PA 15301
724-223-3167

Request to Review Financial Aid Records

Student _____ Requestor _____

Date _____ Last Name _____ First Name _____

Last Name _____ First Name _____ Requestor's Affiliation _____

Purpose of review:

Item(s) of information requested:

I hereby agree to keep the information disclosed to me confidential according to applicable legislation and regulations.

Date _____ Signature _____

OFFICE USE ONLY

Disposition of request: ☐ Approved

☐ Disapproved Reason: _____

Specify materials reviewed (records, types of information):

Name of Financial Aid and Recruitment Coordinator _____ Date _____

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Authorization for Release of Protected Health Information Form

WHS-Greene
☐ **Medical Records Dept.**
 350 Bonar Avenue
 Waynesburg, PA 15370
 Phone: 724-627-2684



Medical Record # _____

WHS-Washington
☐ **Medical Records Dept.**
 155 Wilson Avenue
 Washington, PA 15301
 Phone: 724-223-3160

AUTHORIZATION FOR RELEASE OF PROTECTED HEALTH INFORMATION

This Authorization must be signed by the patient. If the patient is under 18 years of age, legally incompetent, or is unable to sign, the parent or guardian must provide authorization.

Patient Name _____ Date of Birth _____
 Address _____ Appointment Date _____
 City _____ Phone number _____
 State _____ ZIP _____ Contact (if other than patient) _____
 E-mail Address _____

I HEREBY AUTHORIZE WASHINGTON HEALTH SYSTEM TO: ☐ RELEASE TO OR ☐ OBTAIN FROM
 Party to release/receive the above named individual's health information:

Name _____
 Address _____
 City _____ State _____ ZIP _____
 Phone _____ Fax _____

INFORMATION TO BE RELEASED/OBTAINED: (must be completed to properly identify records to be released)

Date	Type of Admission	Records (please check ☒ appropriate documents)
_____	Inpatient	☐ Discharge Summary ☐ Imaging (x-ray, CT, MRI, etc) Reports
_____	Emergency Dept.	☐ History & Physical/Psych Eval ☐ Consults ☐ Progress Notes
_____	Outpatient Surgery	☐ Lab Report/Pathology ☐ Operative Report ☐ Physician Orders
_____	Outpatient Diagnostic	☐ ER Dept. Report ☐ Medications
		☐ Other (specify) _____

This information will be used for the following purpose:

☐ Continuing Care/Medical Facility ☐ Legal ☐ Personal Use ☐ Insurance ☐ Other _____
 Please be aware that Health Care Facilities are authorized by Pennsylvania State Law to charge for the reproduction of medical records and that charges may be associated with this request.

- I understand that the information in my health record may include information relating to sexually transmitted disease, AIDS, or HIV. It may also include information about behavioral or mental health services, and treatment for alcohol and drug abuse.
- I may revoke this authorization at any time by submitting a written notice of revocation to the Medical Records Department of Washington Health System, Washington or Greene office. I understand that this notice cannot be revoked if records have already been released.
- I understand that any disclosure of information carries with it the potential for an unauthorized redisclosure by the recipient and the information may not be protected by federal confidentiality rules.
- I may refuse to sign this authorization. My refusal will not affect my treatment or payment for my care. The Hospital may receive compensation for the use or disclosure of this information.
- In the case of a minor child: I certify that no Court Order is currently in force that would prohibit my access to these records or prohibit my power to consent upon another person.
- In the case of a deceased patient: I, the undersigned next of kin, certify that I assumed responsibility for the disposition of the body of the deceased. There has been no probate of the decedent's Estate and there is no intent to enter the Estate into probate.

 Patient or Authorized Signature/Relationship (if applicable, proof required)

 Date / Time

 Signature of Staff Person Obtaining the Consent (Witness) (internal use)

 Date / Time

Two witnesses are required when a verbal authorization is taken from a patient who is unable to sign. NOT applicable to HIV related information or Drug and Alcohol Treatment information.

 Witness #1

 Date / Time

 Witness #2

 Date/ Time

This authorization automatically expires 6 months from the date of the patient's or personal representative's signature.

FOR OFFICE USE ONLY

REQUEST TAKEN BY: _____ DATE: _____
 RECORDS RELEASED BY: _____ DATE: _____
 CD CREATED BY: _____ DATE: _____

Identification verified by:

☐ Patient Known to Staff
☐ Photo ID Obtained
☐ Signature Checked

CONSENT -- # 2184 (4/03, 4/07, 4/10, 5/12, 10/12, 10/13, 10/14, 6/16, 7/16, 3/17; 4/17, 10/17, 11/17, 01/18, 03/18, 02/21)

Page 1 of 1

FERPA Responsibility/Confidentiality Statement Form

Washington Health System School of Nursing
FERPA Responsibility/Confidentiality Statement
Consent to Release Educational and Financial Records

Student's First Name_____
Middle Initial_____
Last Name**Step 1:**

Under the Family Educational Rights and Privacy Act (FERPA), Washington Health System School of Nursing is permitted to disclose information from your education records to your parents, if your parents (or one of your parents) claim you as a dependent for federal tax purposes. Please indicate whether your parents claim you as a tax dependent.

Please check the appropriate box:

☐ Yes. I certify that my parents claim me as a dependent for federal income tax purposes.☐ No. I certify that my parents do not claim me as a dependent for federal income tax purposes. **See Step 2**

Signature: _____

Date: _____

Step 2:

If you are **not** claimed as a dependent or do not know whether you are claimed as a dependent for federal income tax purposes, but agree that Washington Health System School of Nursing may disclose information from your educational records to consented individuals. This authorization will remain in effect during active program enrollment.

I consent to the disclosure of the information from my education/financial records to my parents:

Name: _____

Name: _____

Phone: _____

Phone: _____

INFORMATION TO BE RELEASED (Please check which information may be released to consented individuals)☐ **Student Accounts:**

- Financial Aid
- Billing Statements
- Income Information
- Refund Information

☐ **Other:** _____☐ **Academic/Classroom Records:**

- Grades/GPA
- Transcripts
- Disciplinary Records
- Attendance Records
- Schedule Information
- Accommodations

Signature: _____

Date: _____

Please provide a password that you will share only with individuals authorized to obtain your confidential information: _____

Alumni Request to Amend Education Records Form

Washington Health System School of Nursing
155 Wilson Avenue
Washington, PA 15301
724-223-3167

Alumni Request to Amend Education Records

Last Name (Alumni)	First Name	Year of Graduation (Include name at time of graduation)

Address	Telephone (include Area Code)

City, State, ZIP

I have reviewed my education records. I am not satisfied with the accuracy and/or completeness of these records. Specifically, I request that these records be amended in the following way(s).

Date	Alumni Signature

FERPA Compliance Officer Reviewing Request to Amend Education Record

FERPA Compliance Officer	Date

Referral to the following Administrative personnel or committee: _____

Decision: ☐ Request Denied ☐ Request Approved Date: _____

Reason for Approval/Disapproval by Administrative personnel or committee:

Tobacco/Smoke Free Policy

Smoking and use of **ALL** tobacco products (this includes cigars, cigarettes, e-cigarettes, pipe smoking and smokeless chewing tobacco) are strictly prohibited in all Hospital buildings and surrounding property, including the main Hospital, School of Nursing, Telford W. Thomas Information Systems building, and all off-site facilities affiliated with Washington Health System. This includes all surrounding streets and sidewalks, as well as, the parking areas and the vehicles parked there. In addition, the odor of smoke on a student's breath or clothing is offensive and potentially harmful to others and will, therefore, be considered a violation of the *Dress Code Policy*. This ban extends to everyone – employees, patients, visitors, physicians, students, volunteers, and vendors. Violations will be reported to the Assistant Director of the School of Nursing and the infraction will be subject to the *Student Conduct Policy*.

4/28/1997

Revised: 5/2014, 2/2015; 2/2019; 4/2020; 2/2022; 3/2023

Reviewed: 5/2012, 5/2013; 12/2015, 6/2016, 2/2017; 3/2018; 2/2021; 3/2021; 2/2024

Fire or Fire Drills (WHSSN)

A student discovering a fire should determine if it can be controlled with a hand-held fire extinguisher. If so, the following procedure applies:

1. Pull the nearest fire alarm.
2. Obtain the nearest extinguisher and extinguish fire.

If fire is beyond control with a fire extinguisher, the following procedure then applies:

1. Pull the nearest fire alarm.
2. Turn on lights.
3. Pull up blinds.
4. Close all windows, doors and fire doors.
5. Evacuate immediately through nearest exit.
6. While evacuating, attempt to warn any other persons who may be unaware of the fire.
7. Report to Parking Garage, 1st Floor, after evacuation. (1st, 2nd, 3rd floor persons should take outside wooden stairs down to 1st floor employee parking garage).

Directories of the fire alarm system are located above each alarm throughout the building. All students must also complete the annual mandatory Fire Safety Sympplr Module.

2/2011

Revised: 5/2011, 5/2014

Reviewed: 5/2012, 7/2013, 2/2015; 12/2015; 7/2016; 2/2017; 3/2023; 2/2024

Disaster Policy

Policy

If a disaster occurs, refer to the Disaster Recovery Plan in Policy Stat. The Washington Health System School of Nursing will address modifications necessary to include physical space, availability/disinfection of equipment, and faculty /staff/ student safety.

Procedure:

Upon Notification of a Disaster:

- A. Complete research and review available evidence-based practice recommendations from regulatory, governmental, and professional organizations.
- B. Conduct assessment of current curriculum.
 1. Determine which didactic and clinical assignments can be instructed remotely.
 2. Prepare the transition from face-to-face teaching/learning to virtual instruction.
 - a. Students to receive orientation on requirements and expectations during disaster occurrence.
 - b. Didactic instruction will be delivered utilizing online conference rooms (ex: Microsoft Teams)
 - c. Examinations will be administered via Exemplify and proctored through ExamSoft ID and ExamSoft Monitor.
 - d. ATI Assessments will be administered electronically and proctored through Proctorio.
 - e. Skills Labs and Simulations will be hosted virtually either live feed or pre-recorded.
 - f. Assignment submission will occur electronically.

- g. If the disaster is related to an infectious disease, physical examination will be modified to avoid transmission of disease.

Disaster Modifications:

The School of Nursing employees and students will:

- A. Adhere to Washington Health System's policies for infection control and prevention.
 - 1. Wear required hospital PPE as directed.
 - 2. Practice hand hygiene upon entry/exit of all rooms and prior to/after touching objects.
 - 3. Limit grouping according to CDC Guidelines.
- B. Adhere to the Washington Health System's protocol for cleaning, disinfecting, and promoting air flow in order to prevent spread of infectious disease.
 - 1. Complete cleaning of occupied area between each class by students and daily by Environmental Services.
 - 2. Monitor stock of sanitizing supplies.
 - 3. Open windows and doors prior to/between scheduled activities.
- C. Reconfigure workspace and workflow, so that users are protected within the social/physical distancing requirements if applicable.
 - 1. Class sizes will be limited in accordance with the guidance/regulations of the government and the Washington Health System.
 - 2. Utilize floor markers as visual reminders of spatial restrictions.
 - 3. Arrange furniture in the classrooms/conference rooms/student center to distance users.
 - 4. Limit number of individuals permitted in restrooms at any one time.
- D. Limit sharing items and bringing personal items onto campus/clinical.
 - 1. Provide sanitation wipes for cleaning of personal equipment (ex: cell phones, stethoscopes)
- E. Adhere to the Washington Health System's policies if feeling ill or any symptoms are exhibited.
 - 1. Prohibit entry into the School of Nursing
 - 2. Return home, seek medical attention, and follow requirements for self-isolation.

Permission to Reopen:

- A. Gain approval for re-entry to the School of Nursing from the Washington Health System administration and/or Government agencies.
- B. Establish criteria for re-entry to the School of Nursing.
 - 1. Returning individuals must be screened by Employee Health Services.
 - 2. Returning individuals will receive orientation to defined criteria and protocols.
 - 3. Revisit and/or revise policy and procedures if needed to determine further needs required.

Original 4/2020

Reviewed: 2/2021 Revised: 3/2023; 2/2024

Transportation Policy

Transportation to all clinical sites is the responsibility of the student.

2/2017 Reviewed: 3/2023; 2/2024

Student of the Month Policy/Nomination Form

Guidelines

One student from each class may be selected to be recognized as Student of the Month. Students may be nominated by administration, faculty, or other students for this recognition. The Student of the Month Committee will select one student from each class from the nominees in the event there is more than one nomination for the month. The committee is made up of the two student officers from each class and the Level 2 Representative to the Technology Committee. The chairperson and/or committee may determine that no selection be made for a given month based on the nominations available. A student may receive this award once during the program. A Student of the Year from the graduating class will be selected from the monthly recipients.

Criteria

Student must be in good standing within the School of Nursing, as determined by the Director or Assistant Director, Staff Education/School of Nursing, and demonstrate:

1. Exceptional behavior in the classroom or clinical setting and/or
2. Significant school or community service and/or
3. Outstanding compassion or kindness to others

Process

1. Nomination forms are available on EDU 2.0 and SharePoint.
2. Nomination forms must be submitted to the Student of the Month Chairperson.
3. Nominations must be received by the last class day before the 25th of the month or at the discretion of the chairperson.
4. The selection will be made by the Student of the Month Committee by confidential email ballot if more than one nomination is received.
5. Each Student of the Month will receive a gift from the school in honor of their selection.
6. The Student of the Year will be chosen from the monthly recipients by secret ballot by the Director, Assistant Director and faculty of the School of Nursing.
7. Student of the Year will be announced at the Graduation Luncheon.

3/27/1995 Revised: 6/2014, 2/2015, 6/2016; 3/2018; 2/2019; 4/2020; 2/2022 Reviewed: 5/2012; 12/2015; 2/2017; 3/2023; 2/2024

Student of the Month Nomination Form



Student of the Month Nomination Form

Nominee:			
Month/Year:		Class:	

Criteria:

- 1. Exceptional behavior in the classroom or clinical setting and/or
- 2. Significant school or community service and/or
- 3. Outstanding compassion or kindness to others and/or
- 4. Good standing within the School of Nursing as determined by the Director, School of Nursing

- Narrative -

Please tell us why this student should be recognized.

Date:	Click here to enter a date.
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Nominated By:	
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Campus Mailbox/Electronic Mail Policy

Secure key-lock campus mailboxes at Washington Health System School of Nursing (WHSSN) are provided for the security, confidentiality, and convenience of our students. It is our goal to provide all students with the best mail service possible. To achieve our goal, it is necessary for all students, as well as those sending mail to students, to understand and comply with the simple but vital regulations listed below:

1. **It is expected that students check their mailboxes each day that they attend classes. Students must have their mailbox key to get mail – WHSSN staff cannot retrieve mail for a student.**
2. **Students are responsible for all email correspondence Monday through Friday during the hours of 0800 to 1600.**
3. All actively enrolled undergraduate students are required to maintain a secure key-lock mailbox located within the School of Nursing building on the first floor, inside the main entrance at the Admissions and Student Support Coordinator's Office. Mailboxes must be used strictly for academic and professional services; i.e., campus mail, student organization mail, and any faxes received at the fax machine. The mailbox may not be used for commercial purposes. No outgoing U.S. mail services are provided. Mailboxes and their contents are to be treated with the same respect and privacy as the U.S. Postal Service mail delivery.
4. Student mailboxes are numbered to keep up with enrollment changes in the most efficient manner. At no time will the student's name replace the number on the mailbox and cannot be changed by the box holder at any time. Mailbox numbers, while not considered confidential information, are never to be publicly posted or disclosed. Mailbox assignments are made, generally, on or before the first day of classes in Nursing 100, or subsequent semester of admission. Students must also complete a *Campus Mailbox Registration* form. A \$10 fee will be assessed for replacement of lost keys regardless of circumstance. Students will keep the same mailbox and key for their entire length of enrollment; students should only return their mailbox key upon graduation, dismissal, or withdrawal from the nursing program (see *Mailbox Key Return Policy*, for more details).
5. All mail to be distributed via campus mailboxes must be clearly labeled with the student's name and assigned mailbox number. Any mail containing grades or other confidential information must be sealed and properly addressed to the individual, in compliance with Family Educational Rights & Privacy Act, 1974 (FERPA) regulations. In the event that an item is too large to fit into the campus mailbox, students will receive a "yellow card" notification in their mailbox. The yellow card should be presented by the student in person displaying a valid student ID badge to the Admissions and Student Support Coordinator who will retrieve their mail. All mail going into campus mailboxes must be placed in the boxes only by WHSSN faculty/administration/staff. As student mailboxes are located in a public place, we advise you not to place items of value in mailboxes.
6. Mailboxes are school property and, as with all school property, should not be defaced – this includes, but is not limited to, writing on, or attaching anything to the mailboxes and altering the numbers in any way. Notices, signs, notes, flyers may not be taped, stapled, glued, or attached in any way to the mailboxes, counters, or walls surrounding the mailbox area. Approved flyers and notices should be placed on the appropriate framed bulletin boards only.

2/2011 Revised: 5/2011, 5/2014, 3/2015, 6/2016, 3/2021; 3/2023 Reviewed: 5/2012, 7/2013; 12/2015, 6/2016; 2/2017; 3/2018; 3/2020; 3/2022; 3/2024

Mailbox Key Return Policy**Upon Graduation from the Nursing Program**

1. Students are required to return their campus mailbox key to the Admissions and Student Support Coordinator or identified staff member on the last day they are scheduled to attend classes.
2. Failure to return the mailbox key by the morning of graduation will negatively impact graduation and/or future graduate requests (i.e., transcripts).

Upon Dismissal or Withdrawal

1. Students are required to return their campus mailbox key to the Admissions and Student Support Coordinator or identified staff member on the last day they are on campus.

Student Handbook 2024-2025 (Class of December 2025)

2. If the student fails to return the mailbox key on the last day they are on campus, they may return the key within one week in a padded envelope to: Washington Health System School of Nursing, Admissions and Student Support Coordinator, 155 Wilson Avenue, Washington, PA 15301. Such outstanding obligations will negatively impact application for readmission and/or future undergraduate requests (i.e., transcripts).

2/2011 Revised: 5/2011, 2/2017; 3/2019; 3/2023

Reviewed: 7/2013, 5/2014, 3/2015; 12/2015, 6/2016; 3/2018; 3/2020; 3/2021; 3/2022; 3/2024

Visiting Family/Friends in the Hospital Policy

Students must abide by hospital policy at all times. Visits to relatives and friends who are patients must be made on the student's own time and in compliance with the visiting policies of the hospital. The hospital allows a family member, friend, or other individual to be present with the patient for emotional support during the course of the stay. Washington Hospital of Washington Health System embraces a philosophy of open and flexible patient visitation that welcomes and encourages family/significant other's involvement in patient care. General patient visiting hours are per hospital policy. Children under the age of twelve may visit and must be supervised by an adult visitor at all times. Individual patient preferences to limit the visitation of families/significant others and friends (hours and duration) will be honored at all times. Individuals entering the hospital from 9:00 PM to 5:00 AM must enter through the Emergency Department. Visiting hours for the Adult Behavioral Health Unit (3A) and the Labor and Delivery Room are variable. Contact the Visitor's Information Desk in the hospital lobby for more information.

Students must always exhibit professional and respectful behavior while visiting. Students must not wear their WHSSN uniform or badge. Students must not participate in any form of professional nursing care for their family member or other patients in the hospital while visiting. Basic assistance to the student's family member is allowed.

*Refer to WHS policy

4/1998 Revised: 1/2011, 2/2015; 2/2019; 2/2022; 3/2023

Reviewed: 5/2013, 6/2014; 12/2015; 6/2016; 2/2017; 3/2018; 4/2020; 2/2021; 2/2024

Student Employment Policy

A student who is employed should use judgment in determining choice of employment and how many hours can be devoted to working. Students who work are expected to maintain optimum school standards of attendance in clinical, simulation, and class. Students do not receive any form of compensation for any scheduled clinical experiences.

*The Pennsylvania State Board of Nursing identifies the following policies for students employed in health agencies.

1. If students are employed in health agencies, they may not be employed as registered or practical nurses unless they are currently licensed.
2. Student employment shall be on a voluntary basis and not a requirement of the institution.
3. Remuneration for employment shall be within the range of the salary scale for the position.

Students working or volunteering outside of the student nurse role may not wear Washington Health System School of Nursing Uniforms unless otherwise approved.

*Source: *Commonwealth of Pennsylvania, Pennsylvania Code, Title 49. Professional and Vocational Standards, Department of State, Chapter 21. State Board of Nursing, p. 21-38.*

7/1966 Revised: 7/1999, 9/2013; 2/2019; 2/2021 Reviewed: 5/2012, 5/2014, 3/2015; 12/2015; 6/2016; 2/2017; 3/2018; 4/2020; 2/2022; 2/2023; 2/2024

Academic Calendar 2024-2025

*Tentative

September 2024 Cohort
(Graduation: December 2025)**Nursing 100**

Classes Begin:September 3, 2024

Thanksgiving Off: November 28, 2024 – November 29, 2024

End of Semester: December 13, 2024

Break: December 16, 2024 - January 03, 2025

Nursing 200

Classes Begin:January 6, 2025

Good Friday:April 18, 2025

Classes End:April 18, 2025

Break: April 21, 2025 - May 2, 2025

Nursing 300

Classes Begin:May 5, 2025

Memorial Day Off:May 26, 2025

Summer Break: June 30, 2025 - July 4, 2025

Classes End: August 22, 2025

Break:August 25, 2025 – September 5, 2025

Nursing 400

Classes Begin:September 8, 2025

Thanksgiving Off:November 27, 2025 – November 28, 2025

Classes End:December 18, 2025

Graduation:December 18, 2025

Washington Health System Standards of Behavior

Making a Difference Every Day, Every Moment Washington Health System Standards of Behavior

Greet others by:

- Smiling, making eye contact, speaking in a clear manner, & showing interest and concern
- Always offering to escort patients & visitors to their destination.
- Recognizing body language & tone of voice are important parts of communication
- Always addressing patients, family members & visitors by their surname unless otherwise requested

Listen to others by:

- Listening and responding to patients/families/visitors/ colleagues in a way that shows you care and that they are important to you
- Acknowledging the speaker by maintaining eye contact and not interrupting
- Verifying what we have heard and asking for clarification, if necessary

Use telephone etiquette by:

- Making every effort to answer the phone within 3 rings
- Identifying yourself and department and asking, "How may I help you?"
- Obtaining caller's permission to place on hold, if necessary
- Returning calls promptly and ending calls professionally
- Using appropriate voice mail greetings and messages
- Only using cellular phones for personal calls during designated breaks

Use Vocera etiquette by:

- Being aware of your surroundings and bystanders that may overhear the conversation
- Always assuming people are listening and not including private/confidential information
- Letting the caller know where you are
- Always playing messages in a private area
- Always verifying that the receiver is in a secure location before giving PHI information

Use elevator etiquette by:

- Always letting others exit before entering
- Honoring patient transport as a priority & stepping off, if needed
- Never discussing patients or other confidential information

Show commitment by:

- Accepting responsibility for your actions
- Contributing to your work group and The Washington Hospital in a positive way and continually supporting the efforts of others
- Taking pride in being a Washington Hospital employee by supporting & participating in hospital activities, speaking highly of our organization in the community & promoting our services

Show enthusiasm/positive attitude by:

- Displaying optimism, energy, motivation & enthusiasm at all times.
- Always recognizing and encouraging positive behavior; not dwelling on the negative
- Recognizing all opportunities to change or make improvements

Show ownership by:

- Taking any concern (real, perceived, big, or small) seriously and seek resolution or understanding – asking for help if the concern is beyond your ability or scope of authority
- Remaining conscious of the cost of health care & optimizing and protecting resources while delivering exemplary service

Treat people fairly by:

- Respecting colleagues & those we serve who differ from you and treat them with dignity, respect and compassion
- Treating patients, family members, visitors & colleagues fairly and equally
- Always acting in a friendly, polite and courteous manner

Maintain privacy/confidentiality by:

- Utilizing doors, curtains and blankets to ensure patient's privacy & dignity; knocking prior to entering patient's room, identifying yourself, and asking permission to enter
- Respecting patient privacy & dignity when transporting patients
- Observing all existing hospital policies & procedures to ensure privacy & maintain confidentiality
- Not having personal conversations where others may overhear; especially in the presence of patients & visitors

Maintain personal appearance by:

- Always wearing your ID badge in plain view, with name and picture visible
- Practicing good personal hygiene, limiting the amount of cologne, make up and jewelry

Maintain facility appearance/safety by:

- Keeping your work environment well maintained & uncluttered, picking up litter and cleaning spills promptly or notifying the best resource to keep the environment clean & safe
- Assisting with the cleanliness and safety of all areas
- Returning all equipment promptly to its proper place and storing all unused equipment in a neat and tidy manner.
- Reporting any safety issues, incidents, & injuries promptly and completely
- Minimizing the noise volume of interactions & activities within the department.

Display customer orientation by:

- Always responding to others enthusiastically and promptly
- Always explaining information to others with patience, using common language & informing them of any delays or changes
- Always responding positively to criticism/complaints without taking it personally & working to resolve the problem

Participate in teamwork by:

- Respecting the contributions that each person makes to the hospital in their specific roles
- Understand that your performance affects the success of your department & the hospital
- Encouraging & supporting one another by offering assistance, when needed
- Promoting and participating in positive interdepartmental cooperation
- Not accepting the phrase, "It's not my job".

Enhance your knowledge and display ethical & professional behavior by:

- Seeking additional knowledge to enhance your skills & your ability to serve our customers.
- Completing all mandatory requirements, following hospital policies/procedures, and adhering to state/federal regulations
- Being punctual & reliable.
- Acting in a professional, legal and ethical manner at all times

Begin at the Beginning (AIDET)**A – Acknowledgement**

- Eye contact
- Smile
- Stop whatever you are doing so your customer knows they are important.

I – Introduction

- Welcome
- State your name
- State your department
- State your role in the customer's care

D – Duration

- Explain how long before the test starts
- Explain how long the test itself will take
- Explain after the test – report process

E – Explanation

- Explain test or procedure
- Explain who is involved in providing your customer's care
- Explain if the test will cause pain or discomfort, or if any post procedure instructions are necessary
- Offer to answer any concerns, questions, or resolve any complaints

T – Thank you

- Say "Thank you for choosing The Washington Hospital for your healthcare needs."

Facilities**Use of Facilities**

The School of Nursing building provides facilities for use by the students, faculty, and staff. In addition to the School of Nursing, the building houses other hospital departments. The hospital administration is proud of these facilities and requests that you utilize the building and its furnishings with the same care you would give your own personal property. Should you find any items broken or in need of repair, please inform the Director/Assistant Director, School of Nursing so that appropriate action may be taken. The front door to the School of Nursing building is locked for security purposes and requires a valid ID badge for entrance. Students are welcome to utilize the School of Nursing Building and Medical Library in the hospital during off hours and weekends with a valid ID badge.

School of Nursing Building Directory**First Floor**

Education Department

School of Nursing (Vending Machines, Living Room, Alumni Room, Conference Room 164, Student Work Center, Financial Aid and Recruitment Coordinator, Admissions and Student Support Coordinator, Director, Assistant Director, and Instructors)

Second Floor & Third Floor

Biomedical Engineering & Business Office

Diversified Investments, Human Resources, and Employee Health

Infection Control & Planning & Marketing

The Washington Hospital Foundation, Resources Coordinator, and Quality Management

A Level

Rice Energy Family Simulation Center

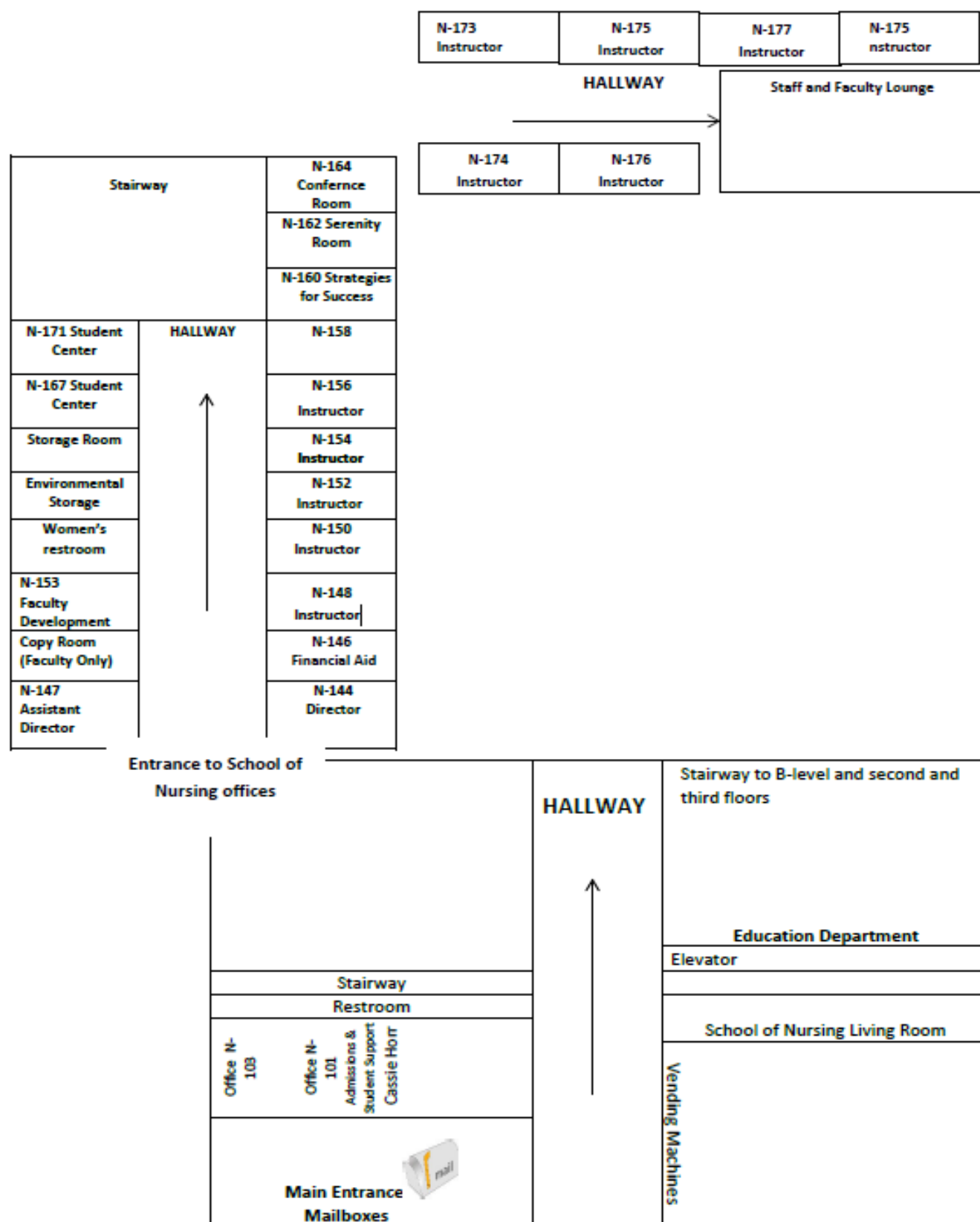
Debriefing Rooms

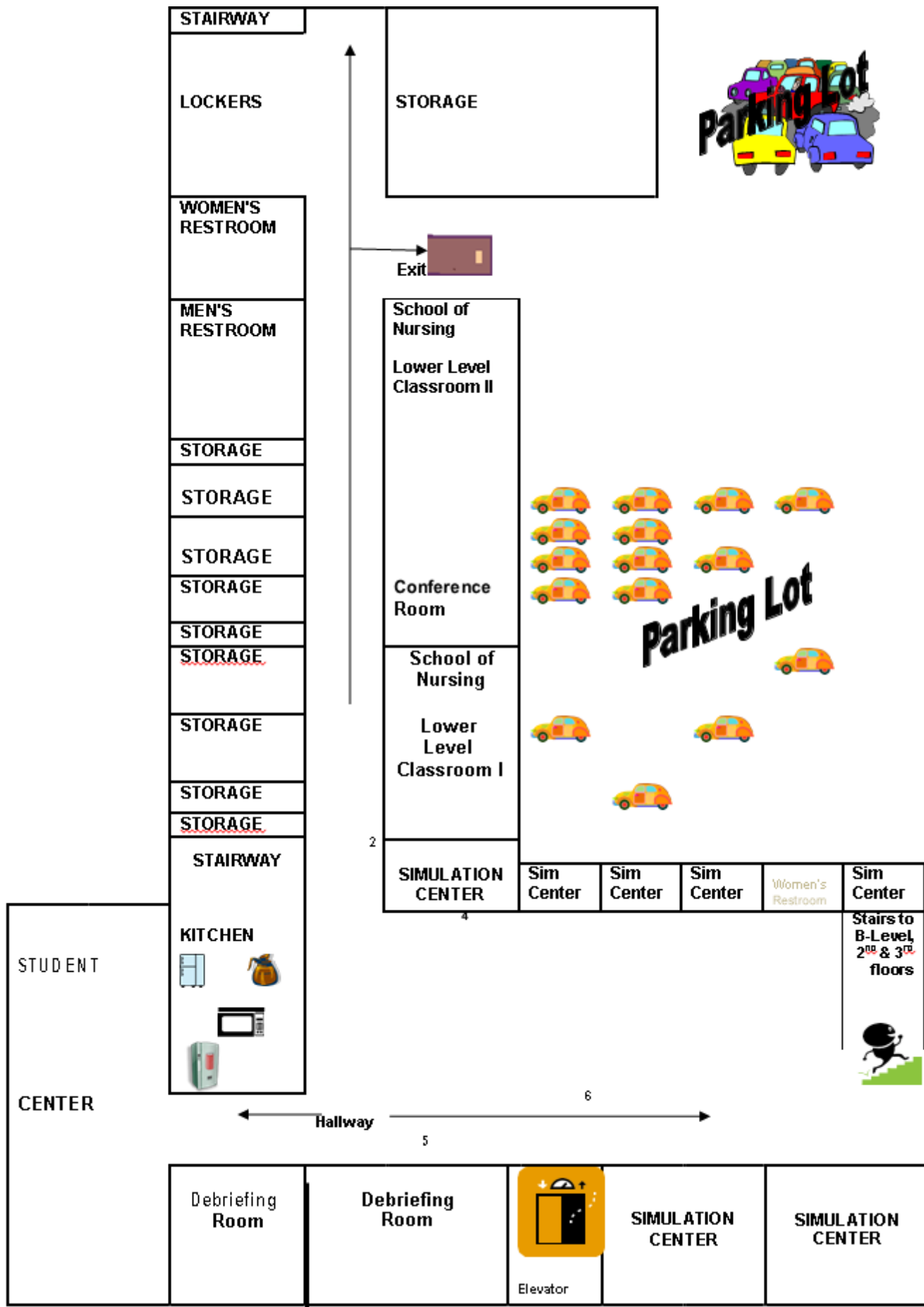
Student Center

Level I Classroom

Level II Classroom

Lockers/Conference Room





Student Center

The Student Center is located adjacent to the Debriefing rooms in the Rice Family Energy Simulation Center on A-Level and provides kitchen and dining facilities as well as a lounge area. The kitchen area houses refrigerators for perishable items, ~~vending machines~~, microwaves, and an ice machine.

Computer Center

The computer center is located in room #167 on the first floor of the School of Nursing building. It houses six (6) computers for student use and a table space for individual or group work.

Conference Room 164

These conference rooms are located on the first floor of the School of Nursing building.

Conference Room on the A-level

This conference room is located between the Lower-Level Classrooms I and II.

WHSN Alumni Room

The WHSN Alumni Room is located on the first floor. This room houses School of Nursing memorabilia and is also used as a conference room.

Vending Machines

Vending machines with soft drinks and snacks are located on the first floor of the SON building near the Admissions and Student Support Coordinator's office.

Cafeteria

Meals may be purchased in the hospital cafeteria by students who visibly display their photo ID badges. The cafeteria hours are:

Monday through Friday

6:15 AM to 1:30 PM

Parking

Level 1 and Level 2 students are granted permission to park in the lot on Leonard Avenue at the Neighborhood Health Center at no cost. Students must park ONLY in the designated area assigned (top of the parking lot in the last two rows). This is five-minute walk to the campus.

The available on-street parking is very limited. Many of the streets surrounding the hospital are posted as no parking or permit parking only. Violators have either received warnings, parking tickets, or been towed. Students are not to park in any area marked for visitors, the Emergency Department or under the Emergency Department lot in the Maintenance Department garage. There are a number of large shopping areas in close proximity to the hospital, as well as a PA Park-N-Ride lot on the corner of East Beau Street and Interstate 70 East. If you are unable to carpool from home the extra vehicles can be parked in the shopping area/Park-N-Ride and one vehicle brought on site.

The Nightingale Pledge

I solemnly pledge myself before God and in the presence of this assembly: To pass my life in purity and to practice my profession faithfully.

I will abstain from whatever is deleterious or mischievous, and will not take or knowingly administer any harmful drug. I will do all in my power to maintain and elevate the standard of my profession, and will hold in confidence all personal matters committed to my keeping, and all family affairs coming to my knowledge in the practice of my profession.

With loyalty will I endeavor to aid the physician in his work, and devote myself to the welfare of those committed to my care.

International Council of Nurses Pledge

In the full knowledge of the obligation I am undertaking I promise to care for the sick with all the skill and understanding I possess, without regard to race, creed, color, politics, or social status, sparing no effort to conserve life, to alleviate suffering and to promote health.

I will respect at all times the dignity and religious beliefs of the patients under my care, holding in confidence all personal information entrusted to me and refraining from any act which might endanger life or health.

I will endeavor to keep my professional knowledge and skill at the highest level and to give loyal support and cooperation to all members of the health team.

I will do my utmost to honor the international code of ethics applied to nursing and to uphold the integrity of the nurse.

Alma Mater***WASHINGTON HEALTH SYSTEM SCHOOL OF NURSING***

Washington dear, we sing to thee Loyal and true nurses we will be Ardor and wisdom let us obtain Mercy and service
will ever reign

Knowledge our goal, compassion we need

Regardless of race, color or creed.

Your faithful nurses we will be, Washington we love and honor thee.