Nursing Student Conduct Code

Statement on Nursing Academic and Professional Integrity

This statement is to clarify behavioral expectations for our common life together. These expectations include behaviors required of students in general and nursing students and professional nurses specifically. Campus publications describe academic integrity, its violations and consequences. A Code of Conduct for the campus community, as well as other university policies, is outlined in the Student Handbook (Academic Bulletin)

Integrity is a core value of the nursing profession. "Nurses have both personal and professional responsibilities that are neither entirely separate, nor entirely merged, but are integrated. In the process of becoming a professional, the [student] nurse embraces the values of the profession, integrating them with personal values" (Fowler, 2008). Professional nursing publications describe what is expected of nurses including nursing students in terms of e.g., clinical practice, collegiality, collaboration, ethics and values. The Marian University Nursing faculty takes very seriously our obligation to graduate nurses who embody the values, ethics, and standards of the nursing profession and those of Marian University. We know that integrity as a student correlates with integrity as a nurse (Tippitt et al., 2009) and that integrity is essential for success. We believe that you, the student, share our aspirations for your success.

Faculty are not ignorant to the incidence of cheating on campuses and elsewhere. Relationships between students and faculty and student-to-student are too often disrespectful and this can carry over into the practice setting causing intra- and inter-professional issues that can affect safe, quality care for patients. While multiple explanations can be offered for such behaviors, ultimately no excuse is acceptable. All must know what is expected in academia and the workplace and how to fulfill these expectations. What follows are behavioral expectations of Marian University nursing students and resources to assist students in attaining academic and professional integrity.

I. Academic Integrity

The principles of academic integrity or honesty according to Lipson (2004) are:

- When you say you did the work yourself, you actually did it.
- When you rely on someone else's work, you cite it. When you use their works, you quote them openly and accurately, and you cite them, too.
- When you present research materials, you present them fairly and truthfully. That's true whether the research involves data, documents, or the writings of other scholars. (p. 3)
- These principles are critical to doing honest college work, but require knowledge of scholarly methods and resources. Such knowledge is essential for academic success and evidence-based nursing practice, which is the utilization of research to provide quality and safe patient care. One method of teaching scholarship is through the example of faculty. One way in which nursing faculty models this is through the inclusion of the *Academic Policies/Academic Honesty* statement included in each course syllabus.

II. Professional Integrity

Professional integrity is based upon the ethical principles of the profession.

These principles, found in the *Nursing Student Handbook*, include the *Statement on Nursing Academic & Professional Integrity, NSNA Code of Academic & Clinical Conduct, NSNA Bill of Rights and Responsibilities for Nursing Students, and AACN Nursing Professional Values*, are at the foundation for relationships with peers, faculty, patients and others with whom we have

contact. Integrity or uprightness of character includes honesty, regard, and respect for human dignity, conduct that is civil, orderly, decent, and respectful.

Therefore, incivility and unprofessional behavior would include negative behavior that is directed toward peers, faculty, patients and others with whom we have contact on campus, at clinical sites or in any setting where the student represents the university and/or the nursing profession.

Students who have entered the nursing major at Marian University are expected to consistently exhibit the following behaviors:

- Respect for the inherent worth and uniqueness of an individual by demonstrating caring, trust, and empathy. (This behavior is demonstrated by being accessible and prompt in meeting the needs of those under their care and encouraging and motivating individuals with whom they come in contact.)
- Commitment to nursing and an attitude of enthusiasm, cooperation, and self-direction. (Students demonstrating this behavior appear to enjoy nursing and present a willingness to learn and expand their nursing knowledge.)
- Demonstrate honesty, rationality and accountability (students displaying these behaviors are those who readily admit mistakes and oversights, accept responsibility and take corrective action).
- Maintain forthrightness with peers, staff, and faculty and handle conflicts with others objectively.
- Utilize safe techniques even when not supervised.
- Base statements only on information and facts known to be correct, and do not participate in malicious or slanderous conversations.
- Contribute to a classroom atmosphere conducive to learning.
- Comply voluntarily with the spirit, rules, and policies of the university, the school, and any clinical facility.

Behaviors that represent incivility and unprofessional behavior in the campus setting which should be avoided include, but are not limited to:

- Rude and profane conversation and comments.
- Disrupting the classroom by behaviors such as arriving late, not turning phones to vibrate
 or silence, not turning off other electronic devices, or actively engaging in non-class
 activities during class time.
- Conduct that distracts or intimidates others such as talking during lectures, bullying, aggressive behaviors, unwarranted comments, and addressing peers or faculty with disrespect (Kolanko et al., 2006).

Behaviors that represent incivility and unprofessional behavior in the clinical setting which should be avoided include, but are not limited to:

- Using any of the behaviors described above with patients, families, peers, faculty, and others encountered in healthcare and/or community setting.
- Failing to maintain patient confidentiality.
- Speaking about or to patients, staff, or others in a disrespectful or demeaning manner.

A breach of conduct, as expressed in the Statement on Academic and Professional Integrity, and further elucidated in the Nursing Student Conduct Code, will result in discipline up to and including dismissal from the program. See section on Student Discipline.

Listed below are resources to aid you as you develop and strengthen positive professional behaviors.

- Crossing the Quality Chasm: The IOM Health Care Quality Initiative. (1999). Washington DC: National Institute of Medicine. http://iom.edu/Global/News%20Announcements/Crossing-the-Ouality-Chasm-The-IOM-Health-Care-Ouality-Initiative.aspx
- Fowler, M. D. M. (Ed.) (2008). *Guide to the Code of ethics for Nurses: Interpretation and Application*. Silver Springs, MD: American Nurses Association.
- Kolanko, K. M., Clark, C., Heinrich, K. T., Olive, D., Serembus, J. F., & Sifford, K. S. (2006). Academic dishonesty, bullying, incivility and violence: Difficult challenges for nurse educators. *Nursing Education Perspectives*, 27, 34-42.

Lipson, C. (2004). Doing honest work in college. Chicago, IL: University of Chicago Press.

Nursing: Scope and Standards of Practice. (2010). Silver Spring, MD: American Nurses Association.

Marian University School of Nursing Student Handbook.

Marian University Student Handbook . http://www.marianuniversity.edu/catalog/

Tippitt, M. P., Ard, N., Kline, J. R., Tilghman, J., Chamberlain, B., & Meagher, P. G. (2009). Creating environments that foster academic integrity. *Nursing Education Perspectives*, 30(4), 239-244.

Academic and Professional Integrity Statement Initiated 9-2010 Approved 2-2011

Professional Conduct

By policy of the Nursing Programs, nursing students are held to the same standards as professional nurses. Therefore, nursing students must demonstrate appropriate conduct in the classroom/clinical/practicum setting or anywhere they are representing Marian University and the nursing profession.

Students will demonstrate patterns of professional behaviors which follow the legal and ethical codes of nursing; promote the actual or potential well-being of clients, health care workers, and self in the biological, psychological, sociological, and cultural realms; demonstrate accountability in preparation, documentation, communication and continuity; and show respect for human rights of individuals.

Once students have entered their program of study they are expected to consistently exhibit the behaviors outlined in the Statement of Academic and Professional Integrity, as well as the following:

In Learning Environments

Act with etiquette and courtesy. To provide an environment in which individuals can learn
from an instructor as well as from others, etiquette and courtesy are necessary. Conduct based
on etiquette and courtesy allows all to participate and to examine what they are learning.
Courtesy is based upon respect and mutual regard for one another. Behaving in a courteous

- manner and taking responsibility for ones' own learning are components of professional behavior.
- Be respectful of others' contributions. All discussion, questions and statements of opinion
 must be shared in a way that is exploratory rather than contentious. Discussion related to
 class topic that demeans the person who is expressing a thought will not be tolerated. All
 other conversation is considered to be distracting from the overall purpose of classroom
 instruction.
- Student behaviors that will result in disciplinary action by the School of Nursing and Health Professions:
 - Audio or video recording of classroom activities or anything in the clinical setting, via the use of electronic devices, without prior approval from the School of Nursing and Health Professions.
 - o Inappropriate use of social media, such as posting audio or video recordings of classroom or clinical activities, commenting on other nursing students, faculty, staff, clinical agencies, and patients/clients.
- Ensure that pagers/cell phones are on silent/vibrate and are not used during class time, unless directed by the faculty, so as to not disrupt the learning environment.
- Ensure that during test administration, all books and materials are placed in the front of the room except for water bottles, soda, etc., which must be placed on the floor. Only pencils and calculators (when necessary) will be allowed on the desk. Cell phones must be turned completely off during exams and are to be secured with other personal materials at the front of the room.
- Exemplify safe, professional behavior. Examples of unsafe conduct includes but is not limited to:
 - o Negatively affecting the mental, physical, or emotional well-being of others
 - Failure to follow suggested referrals or interventions to correct deficit areas which may result in harm to others
 - o Disrupting the learning environment, resulting in a negative effect on interpersonal relationships and communication with peers or faculty
 - Dishonesty
 - o Failure to notify the instructor of absence
 - o Presenting for class under the influence of drugs and/or alcohol.
 - o Habitual tardiness or early departure
 - Criminal behavior
 - o Failure to maintain confidentiality
 - o Misrepresentation of information to the public
 - o Ignoring unethical behavior(s) of others

With Clients

- Practice within the boundaries of the Wisconsin Nurse Practice Act, the guidelines set forth in the course syllabus, the *Marian University Nursing Student Handbook*, and the rules and regulations of the health care agency or agencies that are the site of the clinical practicum.
- Practice according to the American Nurses Association code of Ethics and the Standards of Practice.
- Demonstrate consistency in the responsible preparation, documentation, communication, and promotion of continuity in the care of clients.

- Meet the needs of the client from a biological, psychological, sociological, and cultural realm.
- Commit to standards of confidentiality with regard to disclosure of protected health information of clients, their families and others. (Students are obligated to keep protected health information confidential and are not permitted to make photocopies, faxes, audiotapes, or reproductions of any kind of any portion of a client record. Students are not allowed to remove any portion of the client chart, photocopied or otherwise, from the clinical agency.)
- Adhere to the dress code
- Be accountable as members of the health care team by reporting to appropriate individuals any communication suggesting harm to self or others.
- Exemplify safe, professional behavior. Examples of unsafe conduct includes but is not limited to behaviors that:
 - o Violate or threaten the physical safety of the client or other health team members
 - Violate or threaten the psychological safety of the client or other health team members
 - Violate or threaten the environmental safety of the client or other health team members
 - Assume inappropriate independence in action or decision and without adequate orientation and theoretical preparation or appropriate assistance
 - o Fail to recognize own limitations, competence, and/or legal responsibilities
 - o Fail to accept ethical and/or legal responsibility for own actions
 - o Fail to interact effectively with health care team members
 - o Fail to provide concise, inclusive, written and verbal communication
 - o Fail to accurately record comprehensive client behaviors
 - o Demonstrate lack of preparation for the care of assigned clients
 - o Include acts of omission or commission in the care of the clients, such as but not limited to: 1) physical abuse, 2) placing the client in hazardous positions, conditions, or circumstances, 3) mental or emotional abuse, 4) medication errors, and 5) performing nursing skills/interventions inappropriately/unsafely

In the Management of Personal Needs

- A. The student is responsible for management of personal episodes of illness (physical or emotional) or injury. Good judgment regarding attendance at clinical or class should be used.
 - 1. The Director of Health Services is available for assistance and consultation. It is the student's responsibility to report any significant change in health status to the Director of Health Services and course faculty.
 - 2. Some instructors may provide specific guidelines related to clinical and class attendance regarding illness.
 - 3. Students who have prolonged absences that do not permit completion of the course competencies in the prescribed time frame will have to repeat the course. This may affect progression or continuation in the program.

- B. Any student who might anticipate an extended absence during a given term due to health concerns (physical or emotional, pregnancy, etc.) must be aware that they may not be able to meet the expected competencies of the course. The student should make a decision in collaboration with his/her attending health care professional, academic advisor, and the nursing faculty involved as to the feasibility of taking the course and achieving maximum success at this time.
 - 1. This decision may require a statement from the attending health care professional that the student is able to participate in the specified clinical course.
 - 2. Collaboration between student, clinical instructor, advisor, and course faculty may be needed to plan ahead for an alternate schedule (i.e. extra time before the anticipated absence).
 - 3. Established policies and procedures may be modified to meet the requirements of the health agency at which the clinical experience is obtained.
 - 4. Students who have prolonged absences that do not permit completion of the course competencies in the prescribed time frame will have to repeat the course. This may affect progression or continuation in the program.
- C. ALL STUDENTS ARE RESPONSIBLE FOR THEIR OWN NEEDS OR INJURIES ASSOCIATED WITH CLINICAL/LEARNING EXPERIENCES OUTSIDE THE CLASSROOM. SOME CLINICAL AGENCIES WILL PROVIDE EMERGENCY TREATMENT TO THE STUDENT, BUT BILLING WILL BE THE RESPONSIBILITY OF THE STUDENT AND HIS/HER INSURANCE CARRIER.
- D. All students are <u>strongly encouraged</u> to have a primary health insurance policy and MUST sign the school's release of liability form each year.

National Student Nurses' Association, Inc. (NSNA) Code of Academic and Clinical Conduct

PREAMBLE

Students of nursing have a responsibility to society in learning the academic theory and clinical skills needed to provide nursing care. The clinical setting presents unique challenges and responsibilities while caring for human beings in a variety of health care environments.

The Code of Academic and Clinical Conduct is based on an understanding that to practice nursing as a student is an agreement to uphold the trust with which society has placed in us. The statements of the Code provide guidance for the nursing student in the personal development of an ethical foundation and need not be limited strictly to the academic or clinical environment but can assist in the holistic development of the person.

A CODE FOR NURSING STUDENTS

As students are involved in the clinical and academic environments we believe that ethical principles are a necessary guide to professional development. Therefore within these environments we;

- a. Advocate for the rights of all clients
- b. Maintain client confidentiality.
- c. Take appropriate action to ensure the safety of clients, self, and others.
- d. Provide care for the client in a timely, compassionate and professional manner.
- e. Communicate client care in a truthful, timely and accurate manner.
- f. Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.
- g. Promote excellence in nursing by encouraging lifelong learning and professional development.
- h. Treat others with respect and promote an environment that respects human rights, values and choice of cultural and spiritual beliefs.
- i. Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client care
- j. Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.
- k. Encourage faculty, clinical staff, and peers to mentor nursing students.
- 1. Refrain from performing any technique or procedure for which the student has not been adequately trained.
- m. Refrain from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the client, self, or others.
- n. Assist the staff nurse or preceptor in ensuring that there is full disclosure and that proper authorizations are obtained from clients regarding any form of treatment or research.
- o. Abstain from the use of alcoholic beverages or any substances in the academic and clinical setting that impair judgment.
- p. Strive to achieve and maintain an optimal level of personal health.
- q. Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse and mental or physical health issues.
- Uphold school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.

Adopted by the NSNA House of Delegates, Nashville, TN, on April 6, 2001. **Reprinted with permission.**

Bill of Rights and Responsibilities for Students of Nursing

The NSNA Student Bill of Rights and Responsibilities was initially adopted in 1975. The document was updated by the NSNA House of Delegates in San Antonio, Texas (1991); and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006).

- 1. Students should be encouraged to develop the capacity for critical judgment and engage in a sustained and independent search for truth.
- 2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom: students should exercise their freedom in a responsible manner.
- 3. Each institution has a duty to develop policies and procedures which provide and safeguard the students' freedom to learn.
- 4. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, color, creed, national origin, ethnicity, age, gender, marital status, life style, disability, or economic status.
- 5. Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.
- 6. Students should have protection through orderly procedures 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.
- 7. Information about student views, beliefs, political ideation, or sexual orientation which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as a basis of evaluation.
- 8. The student should have the right to have a responsible voice in the determination of his/her curriculum.
- 9. Institutions should have a carefully considered policy as to the information which should be a part of a student's permanent educational record and as to the conditions of this disclosure.
- 10. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions publicly and privately.
- 11. Students should be allowed to invite and to hear any person of their own choosing within the institution's acceptable realm, thereby taking the responsibility of furthering their education.
- 12. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, e.g., through a faculty-student council, student membership or representation on faculty committees.
- 13. The institution has an obligation to clarify those standards of behavior which it considers essential to its educational mission, its community life, or its objectives and philosophy.
- 14. Disciplinary proceedings should be instituted only for violations of standards of conduct formulated with significant student participation and published in advance through such means as a student handbook or a generally available set of institutional regulations. It is the responsibility of the student to know these regulations. Grievance procedures should be available for every student.
- 15. As citizens and members of an academic community, students are subject to the obligations which accrue to them by virtue of this membership and should enjoy the same freedoms of citizenship.
- 16. Students have the right to belong or refuse to belong to any organization of their choice.

- 17. Students have the right to personal privacy in their living space to the extent that the welfare and property of others are respected.
- 18. Adequate safety precautions should be provided by nursing programs, for example, adequate street lighting, locks, and other safety measures deemed necessary by the environment.
- 19. Dress code, if present in school, should be established with student input in conjunction with the school director and faculty, so the highest professional standards are maintained, but also taking into consideration points of comfort and practicality for the student.
- 20. Grading systems should be carefully reviewed periodically with students and faculty for clarification and better student-faculty understanding.
- 21. Students should have a clear mechanism for input into the evaluation of nursing faculty.

American Association of Colleges of Nursing (AACN) Nursing Professional Values

Baccalaureate education for professional nursing should facilitate the development of professional values and value-based behaviors. Values are beliefs or ideals to which an individual is committed and which are reflected in patterns of behavior. Professionalism is defined as the consistent demonstration of core values. Therefore, professional values are the foundation for practice guiding the nurse's interactions with patients, colleagues, other professionals, and the public; and providing the framework for commitment to patient welfare, which is fundamental to professional nursing practice. Professionalism also involves accountability for one's self and nursing practice.

Caring is a concept central to the practice of professional nursing. There are a variety of definitions and applications of caring; some are very broad, others are specific and specialized. Caring, as used here, encompasses the nurse's empathy for and connection with the patient, as well as the ability to translate these affective characteristics into compassionate, sensitive, appropriate care.

Honesty and acting ethically are two key elements of professional behavior, which have a major impact on patient safety. A blame-free culture of accountability and an environment of safety are important for encouraging team members to report errors, resulting in an environment that enhances the safety of all patients and health team members.

The values and sample professional behaviors listed below epitomize the caring, professional nurse. Nurses, guided by these values, demonstrate ethical behaviors in the provision of safe, humanistic health care. The sample behaviors are not mutually exclusive and may result from more than one value. Conversely, the value labels provided are intended to encapsulate a core set of values and behaviors that can be elaborated in a variety of ways.

Altruism is a concern for the welfare and wellbeing of others. In professional practice, altruism is reflected by the nurse's concern and advocacy for the welfare of patients, other nurses, and other health care providers. Sample professional behaviors include:

- Demonstrates understanding of cultures, beliefs, and perspective of others;
- Advocates for patients, particularly the most vulnerable;
- Takes risks on behalf of patients and colleagues; and
- Mentors other professionals

Autonomy is the right of self-determination. Professional practice reflects autonomy when the nurse respects patients' rights to make decisions about their health care. Sample professional behaviors include:

• Plans care in partnership with patients;

- Honors the right of patients and families to make decisions about health care; and
- Provides information so patients can make informed choices.

Human Dignity is respect for the inherent worth and uniqueness of individuals and populations. In professional practice, concern for human dignity is reflected when the nurse values and respects all patients and colleagues. Sample professional behaviors include:

- Provides culturally competent and sensitive care;
- Protects the patient's privacy;
- Preserves the confidentiality of patients and health care providers; and
- Designs care with sensitivity to patient needs.

Integrity is acting in accordance with an appropriate code of ethics and accepted standards of practice. Integrity is reflected in professional practice when the nurse is honest and provides care based on an ethical framework that is accepted within the profession. Sample professional behaviors include:

- Provides honest information to patients and the public;
- Documents care accurately and honestly;
- Seeks to remedy errors made by self or others; and
- Demonstrates accountability for own actions.

Social Justice is acting in accordance with fair treatment regardless of economic status, race, ethnicity, age, citizenship, disability, or sexual orientation. Sample professional behaviors include:

- Supports fairness and non-discrimination in the delivery of care;
- Promotes universal access to health care; and
- Encourages legislations and policy consistent with the advancement of nursing care and health care.

Reference:

American Association of Colleges of Nursing (2008). *The Essentials of Baccalaureate Education for Professional Nursing Practice*. Washington, DC: Author.

Impaired Student Policy & Procedure

Impaired Student Statement:

Client safety is an overriding principle in the delivery of health care. Provision of safe care requires sound judgment. Thought processes and decision making can be adversely affected by e.g., lack of sleep, excessive stress, impaired mental health, impaired physical health and substance abuse. Impaired by the aforementioned factors, the nurse can jeopardize client safety by making unsafe decisions.

Getting adequate sleep can be a challenge for anyone in today's fast-paced society. For college students who may be juggling spousal, parental, and job responsibilities along with the challenges of college work it can be an even greater challenge. Both procedural memory (a type of long-term memory that deals with how to do things) and declarative memory (a type of long-term memory which deals with conscious recall of facts and events) are impacted by sleep deprivation (Kotler, 2005). "If someone goes without sleep for 24 hours after acquiring a new skill, a week later they will have lost it completely" (p. 4). Additionally, "sleep deprivation has been shown to negatively impact judgment and performance resulting in errors and accidents" in nurses (Surani, Murphy, & Shah, 2007, p. 146). Therefore, an individual that comes to the classroom/clinical setting with a lack of adequate sleep results in an impaired individual.

Excessive stress, impaired mental health, impaired physical health, and/or substance abuse are conditions that can be treated by early recognition and rehabilitation. Successful treatment results in rehabilitation.

Rehabilitated students will be encouraged to re-enter the education process for successful completion of the nursing program.

The student whose thought processes and decision-making ability is impaired will be considered to be unsafe to provide nursing care and will be removed from the classroom/clinical setting. The student will be subject to faculty review and possible dismissal from the program. In addition, the student will be counseled about the importance of seeking voluntary aid and/or treatment as appropriate. Intervention and rehabilitation of an impaired nursing student serves the best interests of the student, our nursing program and society. The *Wisconsin Nurse Practice Act* exists to protect society from impaired nurses. It is important to note that nursing students are held to the same standards of practices as registered nurses when they are involved in their educational program.

(http://drl.wi.gov/board_code_detail.asp?boardid=42&locid=0)

Program Philosophy Regarding Impaired Nursing Students

The philosophy of the Marian University School of Nursing and Health Professions concurs with the Wisconsin Nurse Practice Act in relation to nursing students who are impaired by excessive stress, impaired mental health, impaired physical health, and/or substance abuse. The Nursing Program's philosophy regarding impaired nursing students is:

- We recognize that substance abuse or mental illness is a treatable disease. We believe that
 personal and health problems arising from these diseases can affect academic and clinical
 performance, making the student a danger to self and clients. We believe that human beings can
 learn and change behaviors and that nursing students with diseases can be encouraged to seek
 help in order to recover. We believe that the nursing student has the primary responsibility to
 seek treatment.
- 2. We are committed to confidential handling of recognition and treatment of these diseases.

Signs and Symptoms of the Impaired Nursing Student

Signs and symptoms of nurses abusing alcohol, drugs, or experiencing excessive stress, impaired mental health, or impaired physical health include, but are not limited to, the following:

- Lack of enthusiasm;
- excessive or increasing absenteeism;
- arriving late and wanting to leave early;
- frequently requesting time off;
- taking extended meal and coffee breaks;
- refusing difficult or additional assignments;
- odor of alcohol or marijuana or other chemicals;
- slurred or incoherent speech;
- chronic drowsiness and/or sleepiness;
- tremors of hands;
- disorientation;
- unusually aggressive behavior;
- unexplained work errors;
- lack of coordination;
- unreasonable resentment, suspiciousness, overreaction to criticism;
- controlling behavior and inflexibility;
- isolation and withdrawal;
- irritability and mood swings;
- blaming, defensiveness, and frequent conflicts;
- difficulties with interpersonal relationships;

- forgetfulness;
- frequent trips to the bathroom;
- repeated use of breath mints or mouth wash;
- deteriorating appearance;
- blackouts;
- unexplained nausea and vomiting or diarrhea;
- tremors, anxiety, and "spaciness";
- hangovers;
- unexplained diaphoresis;
- unexplained sniffing, sneezing, watery eyes;
- unusual, unexplained weight loss or gain;
- frequent complaints of illness or injury; or
- excessive bruising on arms, ankles, or hands.

Reference:

National Institute on Chemical Dependency (2000). Retrieved on July 6, 2008 from http://www.nicd.us/signsandsymptomsofuse.html

Procedure:

- 1. Any member of the Nursing Program or faculty of the University, or employee of Student Services that identifies behavior similar or consistent with the examples of signs and symptoms identified above has the responsibility to confront the student and escort her/him to the Dean of the School of Nursing and Health Professions, or designee, who will escort the individual to Student Services or escort the individual directly to the Health Services Office.
- 2. The student will be required to sign a Consent of Confidential Information Exchange form and submit to a drug/alcohol/psychological assessment and screening completed by a licensed clinician employed by the University or referral to an outside agency.
- 3. If the student refuses to submit to the assessment and screening it will result in immediate dismissal from the nursing program, but not the University.
- 4. Based on assessment and/or screening the student must follow treatment recommendation(s) of the licensed clinician or psychiatrist.
- 5. The Dean of the School of Nursing and Health Professions, or designee, will make the determination, based on the recommendation of the licensed clinician or psychiatrist, as to whether the student may continue in the nursing program during the treatment process.
- 6. Students failing to follow through with the prescribed treatment will be immediately dismissed from the nursing program when this failure is identified.
- 7. Students that are allowed to continue in the nursing program while undergoing treatment must submit documentation from their treatment provider indicating compliance with the treatment plan. This evidence must be given to the Dean of the School of Nursing and Health Professions, or designee, **before the student will be allowed to begin each subsequent semester**.

Rehabilitation:

It is the responsibility of the student to provide the Dean of the School of Nursing and Health Professions at Marian University with sufficient evidence of rehabilitation before reinstatement into the program will be considered.

1. Evidence of completion of an accepted/recognized inpatient or outpatient treatment program. Letters from recognized recovery programs attesting to current sobriety and the length of time of

- sobriety if there has been a history of drug and/or alcohol abuse. The evaluation should address the likelihood of relapse in the future, and should speak to the suitability of the nursing student for the profession.
- 2. A current mental health status examination by clinical licensed psychologist or psychiatrist. The evaluation should address the likelihood of similar acts in the future, and should speak to the suitability of the nursing student for the profession.

Reinstated Students:

- 1. To initiate being considered for readmission to the nursing program, the student must supply a signed Consent of Confidential Information Exchange to the Dean of the School of Nursing and Health Professions to be able to communicate with the student's treatment provider.
- 2. Students who are considered for readmission to the Marian University Nursing Programs must supply sufficient evidence from the recognized program or individual supporting continued compliance with the treatment plan (See Rehabilitation above). This evidence must be given to the Dean of the School of Nursing and Health Professions before the student will be allowed to begin each subsequent semester. The student also falls under the random drug/alcohol screening policy of the Nursing Programs.
- 3. The total time allowed for completion of the nursing program is five (5) years from the time a student enters the first clinical nursing course.

Impaired Student Policy Initiated 9-2010 Approved by Nursing Senate 12/3/2010

Student Discipline

I. Consequences of Failure to Adhere to the Code of Conduct Policies

- a. If failure to adhere to the aforementioned policies has been documented, the following options may apply depending on the severity and circumstances of each:
 - i. Failure of the assignment
 - ii. Failure of the course
 - iii. Notation on the student's personal record
 - iv. Dismissal from the Nursing Program
 - v. Dismissal from Marian University

A student whose pattern of behavior endangers the safety of a client, peer, staff member or clinical instructor will be given a verbal and written warning by the primary clinical/laboratory instructor as soon as the behavior becomes evident. Based on the incident, the student may or may not be given a plan of remediation. If the student's conduct is deemed to be gravely unsafe, the student may be terminated from the clinical practicum and will receive an "F" for the course.

If a student fails the clinical portion of a course for the second time due to unsafe practice, remediation will <u>not</u> be allowed. (Refer to degree-specific parameters for clinical and theory course failures resulting in dismissal.)

The faculty of the Marian University Nursing Programs reserves the right to place on probation, suspend, or dismiss students from the program whose conduct or performance is detrimental to

the nursing profession. Probation may or may not precede dismissal. Examples of behavior that violate the School of Nursing standards include, but are not limited to the following:

- 1. Acting in a manner that is disruptive to an academic or extra-curricular activity.
- 2. Harassing, exploiting or intimidating any member of the university community or clients under their care.
- 3. Knowingly misrepresenting facts to a university or agency official.
- 4. Breaching standards of confidentiality.
- 5. Purposefully misleading others or misrepresenting self.
- 6. Demonstrating behaviors reflective of an impaired student.

Clinical Suspension (temporary removal from clinical)

A student may be suspended from clinical for:

- 1. Unsatisfactory clinical performance including, but not limited to, lack of preparation and irresponsible, unsafe, impaired, or unprofessional conduct; or
- 2. Non-academic misconduct in violation of the Nursing Student Conduct Code.

Disciplinary Probation

A student may be placed on disciplinary probation for:

- 1. Failure to fulfill remediation plan related to clinical suspension;
- 2. Unsatisfactory clinical performance (including, but not limited to, lack of preparation; and irresponsible, unsafe, impaired, or unprofessional conduct);
- 3. Scholastic misconduct (including, but not limited to, plagiarism or dishonesty);
- 4. Unprofessional behavior (refer to Academic & Professional Integrity).

Procedure for Disciplinary Probation

When a student is placed on disciplinary probation the student will be informed verbally and by letter of his/her probationary status. Steps for remediation and the length of the probationary period will be outlined on a Student Conference Record that will be signed by the appropriate individuals and the Department chairperson. A copy of the letter and student conference record will be retained in the student's cumulative education record. During the probation period, the appropriate individuals will meet with the student regularly to evaluate progress toward meeting conditions of probation and these meetings will be recorded on a Student Conference Record. The student has the right to have a liaison of their choice present at the meetings. It is the student's responsibility to work with the individuals involved to schedule these meetings.

At the end of the designated probationary period, the student's progress will be reviewed by the appropriate individuals and a decision made determining whether or not the student has met the steps of remediation. The student will be notified in writing of the decision. At this time, the student may be removed from probation, have probation continued, receive a failing grade in the course, or be dismissed from the program.

Procedures for Clinical Suspension

Faculty may exercise the option of removing students temporarily from the clinical setting in isolated and infrequent instances. This option may or may not precede probation.

At the time of the removal, the student will be given directions concerning needed remediation and when to report back to the clinical setting. A student conference record will subsequently be

completed detailing the remediation steps necessary for the student to successfully complete the course. The form will be retained by the faculty member for the duration of the course. If the student fails to follow through with the needed remediation, or if similar incidents recur, a student may be placed on disciplinary probation or may fail the clinical component of the course and therefore receive an F in the course.

Dismissal

A student will be dismissed from the Nursing Program for any of the following reasons:

- 1. Achievement by a pre-licensure student of a grade of C- or below in a second or repeated undergraduate course with a NUR or NRS prefix (with exception of NUR 002);
- 2. Achievement by a graduate student of a grade of B- or below in a second or repeated theory graduate NUR course;
- 3. Achievement of a grade of B- or below in a practicum graduate NUR course;
- 4. Achievement of a grade of C- or below in any repeated math or science support course (pre-licensure program);
- 5. Achievement of a cumulative GPA (CGPA) below progression requirements after probationary semester;
- 6. Failure to conduct oneself in a responsible, safe, and professional manner as described in the Nursing Student Handbook;
- 7. Academic misconduct, including but not limited to, plagiarism, cheating, or dishonesty;
- 8. Failure to meet disciplinary probation remediation requirements;
- 9. Use of or being under the influence of alcohol and/or illegal drugs in the classroom, laboratory, or clinical setting;
- 10. Arrested on a felony charge while enrolled in the nursing program.

Petition to Nursing Student Committee

A petition may be requested by filing a verbal and written request with the Chairperson of the Nursing Student Committee. The request must contain specific allegations for which the petition is being requested. These allegations must be substantiated by documentation from both of the involved parties. The Nursing Student Committee will follow its codified procedures and timelines in conducting the petition.

Readmission After Dismissal Due to Academic Reasons

If a student is dismissed from the nursing major due to academic reasons he or she may reapply to the major after one year (two semesters) from time of dismissal. Readmission is not guaranteed. The student must be able to show academic success in other healthcare related coursework from time of dismissal. The student should work with the appropriate Academic Advisor and maintain communication throughout the two semesters of other healthcare related coursework. If readmission is granted, the student must repeat the course(s) he or she did not pass at earliest opportunity.

Student may not earn less than a grade of C in a nursing course or withdraw from a nursing course after being readmitted to the major. If a nursing course is not successfully completed

after readmission, student will be dismissed from the major. No further petitions for readmission will be considered.

Student must meet all current admission requirements at time of readmission. Remediation may be required prior to start of major.