



College of  
Health Sciences  
SCHOOL OF NURSING

**2016-2017**

**UNDERGRADUATE  
STUDENT HANDBOOK**



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**Information and policies are subject to change.**

*Revised by Student Affairs Committee May 2013  
Revised by Student Affairs Committee May 2015  
Reviewed by Student Affairs Committee March 2016*

## I. SCHOOL OF NURSING

### A. Mission, Vision, and Values

#### MISSION

Advance healthcare through education, scholarship, practice, and service by promoting excellence, creativity, inclusivity, and engagement.

#### VISION

Outstanding leadership in nursing education, scholarly inquiry, and healthcare innovation to improve regional, national, and global health and healthcare delivery.

#### VALUES

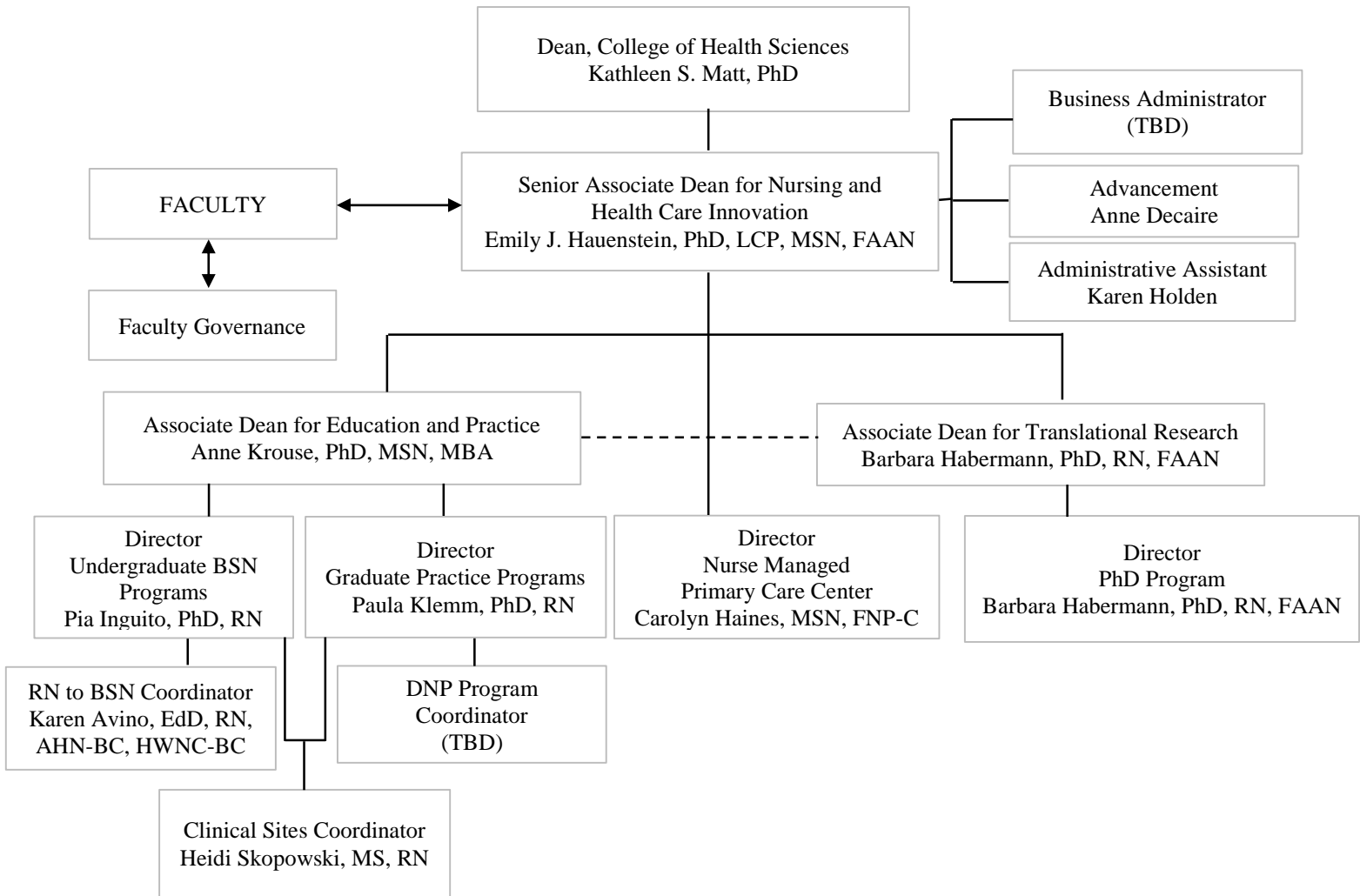
**Excellence:** Guided by our commitment to **excellence**, we exhibit **integrity** and **caring** and strive for outcomes that make a positive **impact** on the health of individuals, families, and communities.

**Inclusivity:** Guided by our commitment to **social justice** and **respect**, we strive to engage in research, learner-centered education, and nursing practice that supports **diversity**.

**Engagement:** Guided by our commitment to **engagement** and **collaboration**, our work is interdisciplinary and supports local communities, and regional, national and global partners.

*Approved by SON Faculty 5/2016*

## B. School of Nursing Organizational Chart



Reviewed by Senior Associate Dean of Nursing and Health Care Innovation Summer 2016

## C. Organizational Framework

The curricula of the School of Nursing are based on the School's philosophy and organizational framework. The framework was developed by the faculty as a tool which provides a method of organizing learning experiences to promote an understanding of clients and their interaction with their environment.

Further, this organizational framework represents the faculty's beliefs about nursing and provides a frame of reference for situations which lend themselves to theory testing. The ultimate goal of the organizational framework is to assist the student to implement professional nursing practice.

The organizational framework of both undergraduate and graduate curricula is built on four major concepts: clients, environment, health, and nursing. These are interactive and open systems.

A system is an organized unit with a set of components that mutually react. The system acts as a whole. Systems may be open or closed. Open systems must interact through the exchange of information, energy, and material to maintain a state of dynamic equilibrium. The client (individual, family, and community) openly interacts with the environment. The nurse promotes client health and environmental interaction by providing energy and feedback to the system.

#### **D. Concepts and Sub-concepts**

**Clients** are individuals, families, groups, communities, and populations with biopsychosocial, spiritual, and cultural dimensions. Client systems are interdependent yet have definable structures, relationships, and boundaries.

Biopsychosocial, spiritual, and cultural dimensions refer to clients biological, psychological, social, spiritual, and cultural components of health across the lifespan.

**Environment** is the setting in which nursing occurs and the dynamic surroundings of the client, including the physical, psychological, social, ecological, spiritual, and cultural contexts.

**Health** is a state of being that fluctuates between varying degrees of wellness and illness. Health embodies the sub-concepts of promotion, prevention, restoration, and maintenance.

Health Promotion: Is the process of assisting clients to enhance well-being through behaviors that promote health and maximize potential.

Disease Prevention: Is the process of protecting clients from disease, illness, and injury. The specific levels are classified as: primary, secondary, and tertiary. Primary prevention involves stopping the development or occurrence of disease, illness, or injury. Secondary prevention focuses on the early detection and treatment of disease or illness. Tertiary prevention involves rehabilitation to limit excess disability, complications, and/or death.

Health Restoration: The process of assisting clients to return to an optimal state of health.

Health Maintenance: The process of preserving an optimal level of health.

**Nursing** is a profession that promotes health with clients. Nursing includes the following roles: caregiver, critical thinker/problem solver, researcher, advocate, teacher, collaborator, and leader.

Caregiver: In this role, the bachelor's prepared nurse provides safe, competent, culturally sensitive care. In addition, it is recognized that self-care activities for the caregiver are an essential component of life-long personal growth.

Critical thinker/problem solver: The nurse as a critical thinker engages in a deliberative process of analysis, synthesis, and evaluation of facts, theories, principles, and interpretations. In this role, the nurse organizes experiences, creatively approaches problems, and gives explanations.

Researcher: The bachelor's prepared nurse is a research consumer. In this role, the content, method, and applicability of research findings are applied to practice.

Advocate: The nurse provides for the protection of client rights. The nurse also secures care for all clients based on the belief that clients have the right to make informed decisions about their own health.

Teacher: The nurse as teacher promotes health-related learning through formal and informal activities/interaction with clients.

Collaborator: Establishes relationships with clients, families, health care providers, and members of other disciplines. In this role, the nurse coordinates services to facilitate health.

Leader: The bachelor's prepared nurse as a leader guides change, strategically manages, employs vision, and provides motivation both for clients and staff in all environments, including health systems, communities, and the political arena.

*DNS\ORGFRAME.FNL*

*Reviewed: Spring 2004*

*Revised: Governance Committee - 4/6/2015*

## **E. Program Outcomes**

- Outcome 1:** Integrate knowledge from the biological, social, behavioral, and nursing sciences in the practice of professional nursing.
- Outcome 2:** Apply critical thinking processes to the practice of professional nursing.
- Outcome 3:** Provide safe, competent and appropriate nursing care to individuals, families, and communities across the lifespan in a variety of settings.
- Outcome 4:** Integrate health education into the care of individuals, families, and communities.
- Outcome 5:** Demonstrate cultural competence in provision of care to diverse populations.
- Outcome 6:** Demonstrate legal, ethical, and moral reasoning in decisions related to professional nursing practice.
- Outcome 7:** Integrate professional role behaviors (autonomy, accountability, advocacy, collaboration, and caring) into nursing practice.
- Outcome 8:** Use verbal and written communication and technology effectively within healthcare environments.
- Outcome 9:** Incorporate concepts of organizational behavior and economics of health care delivery into nursing practice.
- Outcome 10:** Collaborate with health care professionals and consumers to ensure effective and efficient care.
- Outcome 11:** Provide leadership to initiate change in communities, health systems, the profession, and the political arena.
- Outcome 12:** Apply research and other best evidence to improve nursing practice and health care.



## II. ESSENTIAL FUNCTIONS

### THE FOLLOWING APPLIES TO STUDENTS IN THE TRADITIONAL AND ACCELERATED UNDERGRADUATE PROGRAMS ONLY.

Individuals with disabilities are welcome in the field of nursing. However, the student must be able to perform certain essential functions throughout the program of learning. These physical, cognitive, psychomotor, affective and social abilities are necessary for the provision of safe and effective nursing care. Progression and graduation are contingent upon one's ability to demonstrate the essential functions delineated for the nursing programs. Affiliated clinical agencies may identify additional essential functions. The nursing program reserves the right to amend the essential functions as deemed necessary.

Students, who are otherwise qualified and have a documented disability that will require accommodation to perform these functions, must contact the Americans with Disabilities Act Office (ADA). It is the student's responsibility to register with the University's Office of Disability Support Services (see: <http://www.udel.edu/DSS> ), provide documentation for the disability and request reasonable accommodation(s) that will enable them to continue as a student nurse. Of course, accommodations will be considered on a case-by-case basis, and the University of Delaware will determine if the suggestions are reasonable or if there are other possible accommodations. While the University of Delaware is committed to providing accommodations, those accommodations may not guarantee success in the clinical or employment setting. In addition, the School of Nursing is unlikely to conclude that a surrogate for a nursing student can be considered a reasonable accommodation to perform any of the essential functions listed in this policy.

The essential functions delineated below are necessary for nursing program progression and graduation and for the provision of safe and effective nursing care. The essential functions include but are not limited to:

1. Sufficient visual acuity, such as is needed in the accurate preparation and administration of medications, and for the observation necessary for client assessment and care.
2. Sufficient auditory perception to receive verbal communication from clients and members of the health team and to assess health needs of people through the use of devices such as stethoscopes and to hear alarms found in intravenous infusion pumps, cardiac monitors, fire alarms, etc.
3. Sufficient tactile ability to perform physical assessment of clients and carry out related therapeutic interventions, e.g. catheter insertion and injections.
4. Sufficient gross and fine motor coordination to respond promptly and to implement the skills required in meeting client health care needs safely. These include, but are not limited to, manipulation of equipment and performance of CPR.
5. Sufficient physical ability to walk or stand for extended periods of time, push/pull medical equipment, transfer clients to and from units, move quickly during emergency situations, move from room to room, and maneuver in small spaces.
6. Sufficient speaking ability to communicate with clients and the health care team.
7. Sufficient psychological stability to consistently and dependably engage in the process of critical thinking in order to formulate and implement safe and ethical nursing decisions in a variety of health care settings.
8. Sufficient interpersonal skills to interact appropriately with patients, families, and other members of the health care team.

<b>Essential Function</b>	<b>Standard (Performed consistently and dependably)</b>	<b>Examples of necessary activities (not all-inclusive)</b>
Visual	Visual ability sufficient for observation and assessment necessary in nursing care	Observe patient responses, read medication labels, measure drainage*
Hearing	Auditory ability sufficient for monitoring and assessing health needs	Hear monitor alarm, emergency signals, auscultatory sounds and cries for help*
Tactile	Tactile ability sufficient for physical assessment and intervention	Perform palpation, functions of physical examination and/or those related to therapeutic intervention (such as insertion of a catheter)*
Motor skills	Gross and fine motor abilities sufficient for providing safe, effective nursing care in a timely manner	Calibrate and use equipment; position patients appropriately.*
Mobility	Physical abilities sufficient for movement from room to room and in small spaces, as well as for lifting and transferring patients	Move around in patient's room, work spaces and treatment areas; administer cardiopulmonary procedures*
Communication	Communication abilities sufficient for verbal and written interaction with others	Explain treatment procedures, initiate health teaching, and document and interpret nursing actions and patient responses*
Critical thinking	Critical-thinking ability sufficient for clinical judgment in a timely manner	Identify cause/effect relationships in clinical situations, develop and implement nursing care plans (includes measurement, calculation, reasoning, analysis and synthesis.)*
Interpersonal	Interpersonal abilities sufficient for interaction with individuals, families and groups from various social, emotional, cultural and intellectual backgrounds	Establish rapport with patients and colleagues. Maintain appropriate affect levels. *

\*If the student is otherwise qualified and has a documented disability that will require accommodations to perform these functions, the student must contact the Office of Disabilities Support Services (DSS) to discuss reasonable accommodations. It is the student's responsibility to register with the Office of Disabilities Support Services, provide documentation for the disability and request reasonable accommodations.

## **A. Health Conditions**

Individuals with certain health conditions (including, but not limited to HIV infection, Hepatitis B infection, immunosuppression, seizure disorder, etc.) may require accommodations in order to safely practice in some health care settings. Again, the student must contact the University's Office of Disability Support Services (DSS) to discuss reasonable accommodations. It is the student's responsibility to register with the DSS office, provide documentation for the disability and request reasonable accommodations.

## **B. State Board Standards**

Most state Boards of Nursing state that grounds for denial of a license to practice as a registered nurse include, but are not limited to, conviction of a felony or certain other criminal offenses, chemical dependency, mental incompetence, and other reasons authorized by law or regulations.

*Approved by UD legal counsel, SON approval Spring 2008*

*Reviewed by SAC, Spring 2013*

*Reviewed by SAC, March 2016*

## **III. ELIGIBILITY FOR LICENSURE**

Upon completion of the BSN, graduates are eligible to take the National Council Licensure Examination for Registered Nurses (NCLEX-RN). Specific NCLEX test information is available from the National Council of State Boards of Nursing (<http://www.ncsbn.org>). Eligibility for licensure as an RN is the responsibility of each student. Students are referred to the Board of Nursing in the state in which they plan to practice.

*Reviewed by Curriculum Committee Spring 2015*

## **IV. NCLEX PREPARATION TESTING SERVICES**

### **THE FOLLOWING APPLIES TO STUDENTS IN THE TRADITIONAL AND ACCELERATED UNDERGRADUATE PROGRAMS ONLY.**

Students will be required to complete National Council Licensure Exam (NCLEX) test preparation exams as part of the nursing program. Students will receive information regarding costs, will need to purchase the testing package and complete the exam(s) in preparation for taking the NCLEX-RN® exam after graduation from the nursing program.

*Reviewed and revised by Curriculum Committee Spring 2015*

*Reviewed and revised by Curriculum Committee Summer 2016*

## V. STUDENT POLICIES AND PRODECURES

### A. Advisement

It is the student's responsibility to make an appointment with his or her advisor regularly to discuss concerns or progress in the curriculum. Please keep in mind that almost all undergraduate faculty members have clinical, research, and other responsibilities which keep them away from McDowell Hall two-three days a week (generally Wednesdays, Thursdays, and Fridays). If students are unable to reach their advisors during office hours, they may be reached by e-mail or voice-mail.

It is recommended that all students contact their academic advisor during the first month of the new academic year and that freshmen contact their advisor following receipt of mid-semester grades.

*Reviewed and revised by SAC Spring 2013  
Reviewed by SAC, March 2016*

### B. Student and Faculty Academic Advising Responsibilities

Refer to the School of Nursing advisement page.  
[www.udel.edu/nursing/advisement/index.html](http://www.udel.edu/nursing/advisement/index.html)

*Reviewed and revised by SAC Spring 2013  
Reviewed by SAC, March 2016*

### C. Family Educational Rights and Privacy Act

Refer to the University's 2016-2017 Undergraduate Catalog for policy. You may also find information on the University's registrar site, <http://www.udel.edu/registrar/policies-procedures/ferpa.html>

*Revised by SAC Spring 2013.  
Revised by SAC, March 2016*

### D. Students Serving on School of Nursing (SON) Committees

A position as the student representative on a SON committee allows input from a student perspective to the SON in decision making. Time commitment would vary according to the committee. Committee meetings are typically held monthly and last from 1 to 2 hours. Benefits of serving on a SON committee would be providing a voice for the students, gaining leadership experience, and resume building.

Student selection on committees will be based on several criteria. Formal requests in class will be announced with students needing to submit their name and reasons for wanting to serve on the link provided. Students would be required to provide the name of at least one faculty who would recommend them for the role.

Interested students will need to submit an online form located on the SON Website with the following information:

1. Name
2. Year in nursing program
3. Email address/phone number
4. What School of Nursing Committee do you want to serve on?
5. What qualities make you a good candidate to serve on a School of Nursing Committee?

*Approved by Governance Spring 2016*

## VI. ACADEMIC POLICIES FOR THE SCHOOL OF NURSING

The School of Nursing faculty has established the following policies for academic progression. These policies apply to all students in the Bachelor of Science in Nursing degree program in the College of Health Sciences.

**Failure to follow the established guidelines may result in delayed curricular progression. Any requests for exceptions to the following policies must be submitted electronically using the Appeal Form, to the Student Affairs Committee (SAC). See below for instructions.**

1. Most nursing courses have prerequisites. Students who have not met the prerequisites will not be permitted to progress.
2. All courses in the freshman and sophomore years (excluding University Breadth Requirements and Free Electives) must be successfully completed prior to entry into junior level nursing courses. Junior level nursing courses must be completed prior to entry into senior level courses. Accelerated BSN students may take NURS 356 with senior level nursing courses as listed in the accelerated program course sequence.
3. A grade of “C-” or better is required in BISC 276 - Human Physiology and any course being taken to meet the University Breadth Requirements.
4. Any required non-nursing course in which a student receives a failing grade must be retaken, except for BISC 276, which must be retaken if a student receives below a C-.
5. Nursing majors must have a minimum Cumulative Grade Point Average (GPA) of 2.0 to continue in the nursing curriculum. Students with a cumulative GPA below 2.0 will not be able to take nursing courses until their GPA reaches 2.0 or higher. Only courses taken at the University of Delaware are used in calculating GPA. Refer to [www.udel.edu/registrar/students/gpa-calc.html](http://www.udel.edu/registrar/students/gpa-calc.html) to calculate GPA.
6. Students who earn a grade lower than “C-“ in a nursing course must repeat the course and achieve a grade of at least “C-“ before enrolling in a more advanced nursing course. The original grade remains on the transcript and is counted in the policy referred to in #8. Nursing course failure will most likely result in a delay in curricular progression because courses may only be offered one time per year. Students may enroll in the next available course only IF it is within their same program (traditional versus accelerated).
7. Students must submit a formal appeal to the SAC to take a nursing course not in their program. (For example, traditional students must seek special permission to take an accelerated nursing course, and vice versa.)
8. Students who earn a grade lower than “C-” in more than one nursing course (except NURS 100) will not be permitted to continue in the nursing major.
9. A pre-licensure student who is absent from required nursing course work for more than fifteen consecutive months must appeal to the SAC for approval of a revised plan of study that may include repeating nursing courses. This grace period begins at the end of the student’s last semester of enrollment.

10. Required courses, including University Breadth Requirements, must be taken for a letter grade. Nursing students need to take one course for 3 credits in each of these categories: Arts and Humanities, History and Cultural Change, and Social and Behavioral Science. Please note that the Social and Behavioral Sciences requirement is fulfilled by PSYC 100 or HDFS 201. See catalog:  
[http://academiccatalog.udel.edu/Pub\\_ShowCatalogPage.aspx?CATKEY=ROOT&ACYEAR=2016-2017&DSPL=Published](http://academiccatalog.udel.edu/Pub_ShowCatalogPage.aspx?CATKEY=ROOT&ACYEAR=2016-2017&DSPL=Published)
11. Required- Six credits of free electives may be taken on a pass/fail basis.
12. College preparatory courses, such as MATH 010, ENGL 011, or any zero-level course, may NOT be applied toward BSN degree requirements.
13. Credits for courses repeated do not count toward the required credits for graduation.
14. The University's multicultural course requirement must be met by enrolling in an appropriately designated course. Refer to the University's Undergraduate Catalog for a complete listing of these courses. Multicultural courses offered each semester are also listed on the registrar's site. See:  
[http://academiccatalog.udel.edu/Pub\\_ShowCatalogPage.aspx?CATKEY=ROOT&ACYEAR=2016-2017&DSPL=Published](http://academiccatalog.udel.edu/Pub_ShowCatalogPage.aspx?CATKEY=ROOT&ACYEAR=2016-2017&DSPL=Published)
15. To receive a University of Delaware baccalaureate degree, admitted students must complete 90 of the first 100 credits or 30 of the last 36 credits, full- or part-time, at the University of Delaware.
16. Grading Scale for Nursing Courses:

A	93.34 - 100	C	73.34 - 76.66
A-	90 - 93.33	C-	70 - 73.33
B+	86.67 - 89.99	D+	66.67 - 69.99
B	83.34 - 86.66	D	63.34 - 66.66
B-	80 - 83.33	D-	60 - 63.33
C+	76.67 - 79.99	F	<60

Students must have a minimum grade of C- in each nursing course to progress in the nursing sequence of courses.

*Revised by SAC, approved by SON Faculty May 2013  
 Reviewed by SAC March 2016*

## VII. STUDENT AFFAIRS COMMITTEE

The Student Affairs Committee (SAC) is responsible for reviewing and making decisions about student appeals of curricular requirements and progression. For example, when students earn less than a C- in two or more courses, their GPA falls below 2.0, or students are restricted from NURS courses, or they are requesting course substitutions, students can appeal to SAC. Students requesting an appeal must do the following:

- a. Meet with their advisor to discuss the nature of their appeal.
- b. Complete an appeal form. Instructions and form are available on-line on the School of Nursing advisement page. See <http://sites.udel.edu/nursing/advisement/>
- c. Request that their advisor complete their portion of the appeal form.
- d. Appeals must be submitted by the advisor otherwise it will be returned to the student.

**Note: SAC does not entertain grade grievances addressed under the University grade grievance policy.** To submit a grade grievance see below.

*Revised SAC 11/2012  
Reviewed by SAC, March 2016*

## VIII. STUDENT GRADE GRIEVANCE PROCEDURE

The University of Delaware Grievance Procedures can be found at <http://www.udel.edu/stuguide/15-16/grievance.html> (Any newer revision of this policy supersedes the policy as listed below.)

### A. Grade Grievance Procedures

A claim is made that an inappropriate grade has been assigned because of a faculty member's bias or because of a faculty member's failure to follow announced standards for assigning grades but not because of a faculty member's alleged erroneous academic judgment (i.e., not a claim that course standards are too high, reading is too heavy, the grade curve too low).

Other complaints: a claim of abuse, ill-treatment, or exploitation involving the irresponsible or unjust misuse of the instructor's position of authority, power, and trust (e.g., pointed sexist or racist slurs and sexual or pecuniary blackmail). The following procedure from the "UD Student Guide to University Policies" should be followed for Grade Grievances and Other Related Academic Complaints: (Note: Any reference to chair of the department would be Associate Dean of Nursing Education and Practice).

The procedure to file a grade grievance and other related academic complaint is as follows:

- a. A student with a complaint should, where appropriate, first try to reach agreement with the faculty member. This concern will be forwarded to the faculty member, in writing, within 10 business days of the end of the semester. Upon being notified of a student complaint, the faculty member must meet with the student to discuss the complaint within 10 business days.
- b. If the faculty member does not meet with the student within 10 business days, or if such a meeting would be inappropriate under the circumstances, or if the issue remains unresolved



- after a meeting between the student and the faculty member, the student may submit a written appeal to the faculty member's department chairperson (or his or her designee), who will attempt to mediate the complaint. If the student does not know the faculty member's department, or cannot ascertain the department chairperson, the student should contact the [Office of the Dean of Students](#) (if he or she is an undergraduate student). The appeal must be submitted within 5 business days of the meeting between the student and the faculty member.
- c. The department chair, or his or her designee, must issue a written decision on the appeal and a description of the proposed resolution, if any, no later than 15 business days after its submission.
  - d. A student may appeal a decision by the department chair, or his or her designee, to the dean of the college in which the department is organized. If requested, the department chair, or his or her designee, shall provide the name and contact information for the appropriate dean to the student. This appeal request must be submitted no more than 5 business days after the date on which the department chair's decision was sent.
  - e. The dean will select the members of the hearing panel within 15 business days of his or her receipt of the appeal or, if that is too close to the end of a semester or session, within 15 days after the beginning of the next semester. This hearing panel shall consist of 5 members, 3 faculty members and 2 students. Of the faculty members, only 1 may be from the same department as the faculty member in question. The other 2 faculty members shall be drawn from other departments within that college or, if the college has too few departments, from other colleges. Of the student members, both must be undergraduate students. Neither of the student members may be enrolled in the department of the faculty member in question.
  - f. The hearing panel shall:
    - i. Select the date, time and location of the hearing and notify the student and faculty member of this information.
    - ii. Make available to the student and faculty member, at least 5 business days prior to the hearing, all material that has been furnished to the hearing panel and the names of any witnesses who may give testimony.
    - iii. Provide the student and faculty member with the opportunity to hear all testimony and examine all documents or other materials presented to the hearing panel.
    - iv. Provide the student and faculty member with the opportunity to question each witness.
    - v. Allow the student and faculty member each to be assisted by an advisor of their choice from among the members of the University community. The advisor may help prepare the presentation before the hearing panel, raise questions during the hearing, and, if appropriate, help prepare an appeal. A department chair who has mediated or attempted mediation is not permitted to serve as advisor to either party.
    - vi. Permit the faculty member and student to make a summary statement at the conclusion of the hearing.
    - vii. Make an audio recording of the hearing that shall be kept in the dean's office for at least one calendar year after the hearing's conclusion. No other electronic devices (included, but not limited to, cellphones, computers and additional recorders) may be used, unless expressly permitted by the members of the hearing panel.
    - viii. Apply a preponderance of the information standard when deciding whether the student has proven the facts underlying the grievance.
  - g. Within 10 business days after the conclusion of the hearing, the hearing panel shall prepare a written decision and proposed resolution, if any. The hearing panel shall inform the Registrar's Office (for undergraduate students) and the dean of the college in which the student is enrolled of the decision.

- h. A student or faculty member who is not satisfied with the decision by the hearing panel may appeal to the Academic Appeals Committee of the [Faculty Senate](#). This appeal must be submitted within 30 business days of the date on which the hearing panel's decision was sent. This Committee, on reviewing the case, may uphold the decision of the college committee without a hearing or decide the appeal should be heard.
- i. The Chair of the Academic Appeals Committee may appoint an ad hoc hearing panel from among the current members of the committee, consisting of 3 faculty members and 2 students, or the entire committee may serve as the hearing panel. If the submitting the appeal is an undergraduate graduate student, the 2 student panel members must be undergraduate students. During the hearing, the student and faculty member may be assisted by an advisor they have chosen from the University community. The process set forth for the hearing panel (above) also shall govern this hearing.
- j. The decision of the Academic Appeals Committee or, if applicable, the ad hoc committee, shall be final. The committee shall inform the Registrar's Office (for undergraduate students) and the dean of the college in which the student is enrolled of the decision.
- k. No grade shall be changed as a result of a grade grievance complaint, except as follows. In the case of a grade grievance, the University Registrar's Office is authorized to change the student's grade in the following situations:
  - i. When the student and the faculty member agree;
  - ii. If the department chair approves the student's appeal and the faculty member does not appeal that decision;
  - iii. If the dean approves the student's appeal based on the hearing panel's recommendation and the faculty member does not appeal that decision; or
  - iv. If the Academic Appeals Committee approves the student's appeal.

*Updated from Website, SAC 11/2013  
Revised by SAC, March 2016*

## **B. Reporting a Concern**

Sometimes students have concerns about courses, faculty, students, school policies or other issues that cannot be addressed through the University Grievance Policy. As professionals, you will be required to follow the **appropriate chain of command** to handle patient, peer, supervisor and system issues. Be attentive to the organizational structure in the School (refer to page 5). Use the following chain of command for handling any questions or issues within the SON.

- Course issue: 1) course faculty; 2) Director of Undergraduate Program; 3) Associate Dean of Nursing Education and Practice
- Student issue: 1) faculty advisor; 2) Director of the Undergraduate Program; 3) Associate Dean of Nursing Education and Practice; 4) CHS Assistant Dean for Students
- Other non-course issues: 1) faculty advisor; 2) Director of the Undergraduate Program; 3) Associate Dean of Nursing Education and Practice

It is recommended that students put their concerns in writing via e-mail and/or request an appointment to meet with the appropriate person/s. Students should describe their concern in detail and what they have done to resolve the concern.

*Revised SAC 11/2013  
Reviewed by SAC, March 2016*

## **IX. MANDATORY REQUIREMENTS PRIOR TO PARTICIPATION IN SIMULATION AND CLINICAL COURSES**

Prior to the spring semester of the sophomore year (Traditional Program), spring semester before beginning 300-level courses (Accelerated Program), and prior to taking NURS 443 (RN to BSN program), students must have completed mandatory requirements as listed below. Submit proof to Assistant Clinical Coordinator, room 350 McDowell Hall. **You will not be permitted to participate in simulation lab and clinical activities until this information is received.**

### **A. Hepatitis B Vaccination**

The Hepatitis B vaccination series is strongly recommended for nursing students because of the potential for exposure to the virus in clinical settings. The vaccination consists of three injections over a six-month period. The first two are administered one month apart; the third injection is administered five months later. All three injections are required to establish immunity.

The vaccination series may be obtained privately or through Student Health Services. If the latter is used, the student will pay for each injection at the time of service. For part-time students who have not paid the Student Health Service Fee, there will be an additional charge for each of the three injections. Students should call Student Health for an appointment. The series should be started in the spring of your freshman year, in order to have it completed by the fall semester.

Students who choose NOT to receive the vaccination series must sign a waiver before they will be permitted to begin their spring sophomore nursing courses.

### **B. Rubella**

Documentation of receiving 2 doses of the Rubella vaccine is required, usually the MMR vaccine.

### **C. Mumps**

Documentation of receiving 2 doses of the Mumps vaccine is required, usually the MMR vaccine.

### **D. Measles (Rubeola)**

Documentation of receiving 2 doses of the Measles vaccine is required, usually the MMR vaccine.

### **E. Chicken Pox (Varicella)**

Verification of immunity to chicken pox by documentation of one of the following:

- Documentation of 2 varicella vaccines
- Verification of history of chickenpox or shingles
- Laboratory evidence of immunity or confirmation of disease

## **F. Tetanus**

Documentation of receiving a tetanus booster in the past 10 years is required. The tetanus booster can be the tetanus and diphtheria (Td) booster or the tetanus, diphtheria and pertussis (Tdap) booster.

## **G. Pertussis**

Documentation of receiving a tetanus, diphtheria and pertussis (Tdap) booster at least once.

## **H. Annual Flu Shot**

An annual flu shot may be required by some clinical agencies.

## **I. PPD (Mantoux) Skin Test**

A PPD skin test with a negative reading is **required annually**. If a student has a positive PPD skin test, a copy of results of a recent chest x-ray will be required. Students with a history of a positive PPD skin test will also be required to complete a TB symptom review annually. The Annual TB Symptom Review form can be obtained from the Assistant Clinical Coordinator at the School of Nursing.

## **J. CPR Requirement**

All students must provide a **COPY** of a valid Cardiopulmonary Resuscitation (CPR) card to the Assistant Clinical Coordinator (350 McDowell) prior to the beginning of the spring semester of their sophomore year. Students who do not have a currently valid card will not be able to begin the spring semester of their sophomore classes. Completion of the **American Heart Association (AHA) Healthcare Provider CPR or Basic Life Support (BLS) course or the American Red Cross Professional Rescuer CPR course is the required level for nursing students**. This level includes one- and two-rescuer CPR for adults, infant CPR, and management of foreign body airway obstruction in both adults and infants.

**CPR is a requirement of clinical agencies. There are no exceptions.** It is the responsibility of students to provide a **COPY** of a currently valid CPR card to the office of the Assistant Clinical Coordinator. **Expired cards will result in dismissal from the clinical agencies.**

## **K. Safety Orientation/Right to Know and Bloodborne Pathogens Training**

An annual on-line participation in the University's Bloodborne pathogens educational training and the University's Right to Know (<http://www.udel.edu/ehs/>) must be completed.

## **L. Background Check and Drug Screening**

A local criminal background check and 10- panel urine drug screening is required to be completed once during the Nursing program prior to any field or clinical experience. These requirements are to be completed during the fall semester of the student's sophomore year.

These requirements will suffice for the entire nursing program unless clinical agencies alter their student requirements.

### **M. Blood Borne Pathogen Post-Exposure Evaluation and Medical Management Student Waiver**

This waiver ensures that students who as part of their academic program, are at risk for exposure to human blood, or other potentially infectious materials, understand and acknowledge that the inherent risk of injury and illness is assumed by the student when they decide to enroll in said academic program.

*Revised by Clinical Coordinator Spring 2015.*

### **X. POLICY ON STUDENT CRIMINAL BACKGROUND CHECKS AND DRUG SCREENING**

The University of Delaware's School of Nursing contracts with multiple clinical agencies for clinical education experiences that are an essential component of the nursing curriculum and required to meet the requirements for graduation. The Joint Commission on Accreditation of Healthcare Organizations Comprehensive Accreditation Manual for Hospitals 2004 requires that all students and instructors meet new standards relating to criminal background and freedom from drugs. As a result, most clinical agencies require that all students participating in activities involving direct client care complete criminal background checks (including Child and Adult Abuse Registry checks) and drug screenings.

To comply with University contractual obligations and provide high-quality clinical learning experiences, all nursing students in the pre-licensure programs are required to complete criminal background checks and drug screenings consistent with the following guidelines:

1. Students must complete criminal background checks and drug screening as required by the School of Nursing. All testing must be conducted by a certified/licensed agency. Students are responsible for all costs associated with testing.
2. Documentation of the results of the drug screening and criminal background check must be on file in the School of Nursing prior to participation in clinical activities. The School of Nursing may share the results with any clinical agency considering the student for clinical experience.
3. In the event of a positive drug screening, the student will be referred to the University of Delaware's Student Wellness & Health Promotion for a substance abuse referral. The student is expected to schedule an appointment with Student Wellness & Health Promotion within 3 business days following the referral. Once the School of Nursing has been notified by Student Wellness & Health Promotion that the student has completed the sessions as recommended, the student must submit to a second drug screening with 24 hours' notice. The student will not be allowed to begin or continue clinical activities until documentation of a negative drug screening is provided. If the second screening is positive, the student will be dismissed from the nursing program. Failure of the student to complete the substance abuse sessions as recommended by

Student Wellness & Health Promotion may lead to dismissal from the nursing program.

4. A student that tests positive for their drug screening will be required to submit to a random drug screening each subsequent year they are in the nursing program. The student will receive 24 hours' notice of the required drug screening. A student who fails to submit to the required drug screening within the requested timeframe or who has a second positive drug screening will be dismissed from the nursing program.
5. In the event that a student's criminal background check discloses a conviction, the student must furnish the School of Nursing with written documentation of the final disposition of the case. The School of Nursing will then determine whether the student may continue in the nursing program. The student will not be allowed to continue in the nursing program if the conviction prevents the student from participating in clinical activities. The School of Nursing will notify the Office of Student Conduct of any conviction discovered during a criminal background check.
6. Refusal by the student to complete a criminal background check or drug screening during the announced time frame may result in dismissal from the nursing program.
7. Any student dismissed from the nursing program as a result of this policy may appeal the decision to the School of Nursing's Student Affairs Committee. The issue on appeal shall be limited solely to whether a screening or background check contains erroneous information, and the appellant must offer direct evidence to rebut the findings. The decision of the Student Affairs Committee shall be final.

Approved by Faculty 3/13/06

Revised 9/10/2012

Revised & Approved by UD General Counsel 5/13/2014

Approved by Faculty 6/18/14

## **XI. PROFESSIONAL BEHAVIOR**

In accordance with the Code of Ethics of Nursing endorsed by the American Nurses' Association, professional behavior is expected in all settings. Professional behavior is defined as behavior that meets the established norms for students of professional nursing, for example, in the caregiver role, student role, and health team member role. The faculty considers professional behavior an essential and integral part of all clinical performance and evaluations. Each course syllabus and clinical evaluation tool will delineate the requirements for successful completion of the course. Each clinical evaluation tool contains critical behaviors related to professional behavior. In addition, student behaviors that are unethical or unsafe warrant student removal from clinical experiences and/or course failure (see section on Emergency University Procedure for Dismissal from Undergraduate Nursing Program). Students must abide by the rules and regulations posted at their assigned clinical facility. (This may include random drug testing.)

Unethical/Unsafe behaviors may include but are not limited to:

1. falsification of clinical activities/assignments,
2. persistent errors in medication and/or intravenous administration,
3. falsification of patient records,

4. failure to report life-threatening changes in client's condition,
5. inappropriate handling of clients, e.g. physical or verbal abuse, neglect,
6. threats to the safety of client/self/peers/instructor/staff,
7. violation of client privacy and/or federal HIPAA regulations (see <http://www.hhs.gov/ocr/privacy/>),
8. participation in clinical experiences under the influence of drugs and/or alcohol,
9. consistent unpreparedness for clinical experience,
10. use of cell phones or computers for personal use while in the clinical area, and
11. use of agency resources for personal use.

## **XII. SOCIAL MEDIA STATEMENT**

Professional conduct extends to the use of social media. Students are expected to familiarize themselves with the Social Media Policy and behave accordingly and to observe and maintain boundaries with patients in accordance with ethical and professional codes of conduct.

### **Policy:**

**Purpose:** The School of Nursing recognizes the increasingly important role of social media as a communication and collaboration tool. Students who participate in social networking are expected to abide by the policies set forth by the School of Nursing in the Social Media Policy. While rapidly changing social media often cross traditional boundaries, standards of professional behavior are the same online as in any other setting.

**Definition:** Social media are various types of electronic communication created and shared by users. Social media include, but are not limited to, social networks such as Facebook and MySpace, video sharing through sites like YouTube, photo sharing on sites such as Flickr, audio sharing through podcasts and other venues, professional networks (for example LinkedIn), user created pages such as wikis and Wikipedia, public comment on webpages (for example, allnurses.com), social bookmarking through digit and similar applications, blogs and mini-blogging (Twitter) and similar forms of information sharing.

**Code of Conduct:** Professional standards of behavior apply to social media use. Students are responsible for the content they post or promote in any online form. HIPAA guidelines apply to social media and prohibit the sharing of identifiable, confidential and /or sensitive patient information.

### **Guidelines for Social Media Use:**

- Students are to refrain from accessing or using social media during clinical experiences.
- Patient privacy and confidentiality must be maintained online. Students should not post or transmit any identifiable patient information.
- Patients should never be videotaped or photographed without prior written patient consent and written faculty approval according to the institution guidelines.
- Students should safeguard their own personal information by utilizing privacy settings when available.

- With social media, anonymity does not exist. Postings can be accessed broadly and indefinitely. Be aware that anyone, including colleagues, educational institutions and employers may be able to view content, regardless of your intended audience.

*SAC Spring 2012, Approved by SON faculty Spring 2012  
SAC Reviewed Spring 2013  
Reviewed by SAC, March 2016*



### **XIII. CLINICAL DRESS AND EQUIPMENT CODE FOR NURSING MAJORS\***

All undergraduate University of Delaware nursing majors assumes responsibility for their own attire while in the clinical setting. Their manner of dress must be consistent with the policies described in this code and consistent with those policies in effect in the institution in which clinical experience is scheduled.

1. The uniform identifies an individual as a student in the University of Delaware School of Nursing and is to reflect a positive and professional image of the individual and the School. The student always presents herself/himself as a professional nurse and is continuously aware of the impact of self upon clients.
2. Professional appearance must be consistent with clinical agency policy.
3. Males are expected to be clean-shaven or facial hair/moustache and beards must be neatly trimmed. Beards will not extend more than one inch from the face and under no circumstances are they to touch the collar or the front of the chest.
4. The uniform is to be neat and clean at all times in the laboratory and clinical setting.
5. Students are responsible for purchasing their own uniforms for clinical. It is recommended that you purchase at least two uniforms. The choice of uniform must be consistent with all standards stated in the dress code. *Exceptions to this dress code will be spelled out at the beginning of experiences in each individual clinical agency.*
6. School of Nursing patches are available through Meridy.com (see website for ordering details). The students' University of Delaware photo ID must be worn along with the School of Nursing name tag and badge/patch when in most clinical settings. Your initial name tag will be ordered by the School of Nursing through the Barnes and Noble Bookstore. The bookstore will charge your student account for this name tag. If you should lose the name tag, please see the academic coordinator in the School of Nursing to order a new one.
7. The uniform must be worn whenever the student is in the clinical area and SRC unless otherwise specified by faculty.
8. Even when uniforms may not be required for a particular experience, students are to dress in a professional manner: pants, knee length skirts, or dresses. No jeans of any color, short skirts, shorts, or open toe shoes are to be worn. If you need to wear headbands or ponytails, it must be neutral in color. The entire torso must be covered including the shoulders and abdomen.
9. A watch with a second hand and pen(s) must be brought to any simulated learning experience and to all clinical experiences. A dual-headed stethoscope (both bell and diaphragm), blood pressure cuff (sphygmomanometer), bandage scissors, and penlight are also mandatory equipment for the SRC. Each clinical experience the student has while in the School of Nursing may not require the use of all these items.

## **Specific Requirements of the Dress Code\***

### **For students admitted to the program prior to fall of 2013:**

- **Uniform** – Navy blue uniform/scrub pants, or below the knee skirt. White scrub top. You are to wear neat and clean uniforms. Shoes are to be white, may have a color embellishment, and the soles may be white or darkish in color, but they must be clean. For hygienic reasons do not wear your everyday sneakers as your uniform shoes. Clean socks should be worn with shoes. Neutral undergarments must be worn (designs and colors should not show through uniforms or clothing).
- **Insignia** – University of Delaware patch sewn or fabric glued on right sleeve (**order and purchase at University Bookstore**).

### **For fall of 2013 forward - Mandatory Uniform**

- See the Uniform Order Form in your admission packet for details for ordering the UD Nursing uniform (patch/insignia included).
- Insignia- University of Delaware patch inserted on LEFT sleeve.
- This information is also linked to the SON website with the UD Log in Code for Meridy Uniforms.
- Students are not permitted to substitute uniform.
- **Revision of policy for fall 2016:** Shoes must be non-permeable (no crocs, no canvas, no holes, and no open toe per OSHA guidelines). Shoe color may be all white, all navy blue, or all black. Shoes should be clean at all times and for hygienic reasons, do not wear your everyday sneakers as your uniform shoes.
- Clean white socks should be worn with shoes.
- Neutral headbands and/or undergarments must be worn (designs and colors should not show through uniforms or clothing).

### **Other Requirements for ALL students:**

1. UD Name tag- Your initial name tag will be ordered by the School of Nursing through the Barnes and Noble Bookstore. The bookstore will charge your student account for purchase of the name tag. If you should lose your name tag, please see the academic coordinator in the School of Nursing to order a new name tag.
2. All students must have a picture ID and a University of Delaware ID in a plastic holder.
3. White warm up jacket may be worn in the clinical area – only with patch sewn on LEFT sleeve. Patches and jackets available through Meridy.com.
4. Long sleeve white tops may be worn under scrub tops.
5. Hairstyles that extend below the collar should be tied back and neatly kept under control. It is expected that professional nurses style their hair in a manner in which practice skills may be performed and patient care safely rendered. Hair must be clean and cannot be unnatural in color. Due to allergies, students must be fragrance-free and make-up must be kept to a minimum. No artificial nails, no nails beyond fingertips.
6. Small, plain, silver or gold post earrings (which do not extend over the ears) are acceptable jewelry in the clinical areas. Only two earrings per ear, no facial or tongue jewelry allowed. No other visible body piercing will be allowed. Wedding rings are acceptable in some

clinical areas. In some clinical settings, it may be necessary to secure rings in a non-visible area of the uniform for patient and/or nurse safety.

7. All tattoos must be covered and hidden throughout patient care.

\*The dress code is subject to change based upon clinical site and agency requirements.

*Student Policy Committee 3/09 Approved by SON faculty 5/18/09  
Reviewed and revised by SAC Spring 2013, Approved by SON faculty Spring 2013  
Reviewed and revised by SRC Spring 2015  
Revised by SAC, March 2016*

## XIV. SENIOR CLINICAL ASSIGNMENTS

This policy applies to students in the traditional and accelerated undergraduate programs only.

The senior clinical courses are designed to expose our students to a wide variety of settings and clinical experiences. A considerable amount of work goes into planning and coordinating each student's clinical experience. In an effort to be fair to all students, the following policy was developed:

**\*Please note that all junior nursing students must attend a mandatory senior clinical information meeting, scheduled with the clinical coordinator, during their Spring Semester.**

### Policy:

- Students will not be able to change their section assignments in the senior clinical courses unless there are extenuating circumstances. Students must present the extenuating circumstances in writing to the Clinical Coordinator for review and approval.
- Senior nursing students will not be assigned to a clinical unit where they have had a previous clinical course assignment unless there is a School of Nursing need. (Exception: NURS 479).
- Senior nursing students will not be assigned to a clinical instructor they have had in a previous clinical course unless there is a School of Nursing need. (Exception: NURS 479).
- Senior students are required to complete at least one Adult Health clinical course on the day shift.
- Senior students completing a clinical course on the same unit where they work is strongly discouraged. It is the responsibility of the student to alert the Clinical Coordinator to this situation before the last week of the junior spring semester and senior fall semester, or as they are informed of employment.
- Senior students completing a clinical course on the same unit on which a family member is employed is strongly discouraged. It is the responsibility of the student to alert the Clinical Coordinator of this situation before the last week of the junior spring semester and senior fall semester.

*Student Policy Committee 4/09  
Approved by SON faculty 5/18/09  
Revised by SAC 2011  
Reviewed by SAC 2013  
Revised by SAC, March 2016*

## **XV. SENIOR CLINICAL REMEDIATION**

This policy applies to students in the traditional and accelerated undergraduate programs only.

Students are expected to be able to successfully demonstrate safe practice, professional behaviors, and previously learned psychomotor skills in the senior clinical setting. If remediation of psychomotor and/or critical thinking skills is required by their clinical faculty, students must successfully complete demonstration or retesting within two attempts or they will fail the course.

*Student Policy Committee 4/09, Approved by SON faculty 5/18/09  
Reviewed by SAC Spring 2013  
Reviewed by SAC, March 2016*

## **XVI. EMERGENCY DISMISSAL FROM A CLINICAL COURSE**

When a faculty member observes or otherwise learns of an infraction such as those listed in the behavioral criteria for unethical or unsafe practice defined in the Clinical Evaluation Tool warranting dismissal from the clinical setting, the student will immediately be suspended from all clinical activities pending review of the matter pursuant to the procedures set forth below. The student shall cease all contact with all off-campus clinical settings.

Procedure:

1. The infraction shall be documented by the faculty member on the Clinical Evaluation Tool, forwarded directly to the Director of the Undergraduate Program and to the student within one business day of the day on which the faculty member learned of the unethical or unsafe behavior(s).
2. If the unethical or unsafe behavior is the result of a psychological or psychiatric disorder or if the behavior is intentional or malicious the College Assistant Dean for Students and the Associate Vice President for Student Life shall be consulted. Upon emergency dismissal from a clinical site, a drug and/or alcohol test may be indicated and required, at the student's expense.
3. The student will be suspended from all clinical coursework. At the discretion of the faculty member and Director of the Undergraduate Program, or Associate Dean of Nursing Education and Practice, the student may be required to spend time remediating in an on-campus laboratory. The student will be required to successfully complete remediation prior to reentry into any clinical setting.
4. Students may continue in all non-clinical coursework and complete these courses in the current semester.
5. In the event that a student is emergently removed from a clinical course for unethical or unsafe behaviors, they may not withdraw from the clinical course, but will fail the course.

*Student Policy Committee 4/09, Approved by SON faculty 5/18/09  
Reviewed by SAC Spring 2013  
Reviewed by SAC, March 2016*

## **XVII. RE-ENTRY INTO CLINICAL COURSE FOLLOWING**

### **A. Clinical Course Failure**

The student is expected to be able to successfully demonstrate safe practice, professional behaviors, and previously learned psychomotor skills prior to re-entry into the senior clinical setting after a clinical failure. If remediation is required, as determined by the clinical instructor teaching the course/Director of the Undergraduate Program/Associate Dean of Nursing Education and Practice, the student must successfully complete demonstration or retesting within two attempts or they will not be permitted to repeat the clinical course that was failed, resulting in dismissal from the nursing major. Remediation will be documented in the student's permanent file.

*Student Policy Committee 4/09, Approved by SON faculty 5/18/09  
Reviewed by SAC Spring 2013  
Reviewed by SAC, March 2016*

## **XVIII. EMERGENCY PROCEDURE FOR CLINICAL SUSPENSION AND DISMISSAL FROM UNDERGRADUATE NURSING**

### **A. School of Nursing Procedure**

1. When a faculty member observes or otherwise learns of an infraction such as those listed in behavioral criteria for unsafe practice defined in the Clinical Evaluation Tool warranting dismissal from the nursing major, the student will be immediately suspended from all clinical activities pending review of the matter pursuant to the procedures set forth below. The student shall cease all contact with all off-campus clinical settings.
2. The student will be suspended from all clinical coursework until a final determination, including any appropriate appeal, if any, has been reached in the matter. At the discretion of the Director of the Undergraduate BSN Program, the student may be required to spend the appropriate clinical time in an on-campus laboratory until the final determination. Student may continue in all non-clinical coursework and complete these courses in the current semester.
3. The infraction shall be documented by the faculty member on the Clinical Evaluation Tool, and a written recommendation for dismissal from the major forwarded directly to the Director of the Undergraduate BSN Program and to the student within 24 hours of the day on which the faculty member learned of the infraction or continued unsafe behavior(s). If the infraction/unsafe behavior is the result of a psychological/psychiatric disorder or if the behavior is intentional or malicious the Associate Vice President for Campus Life shall be consulted.
4. If the student decides to appeal the dismissal recommendation, the student will have 72 hours from the student's receipt of a written recommendation in which to provide a written response directly to the faculty member.
5. Upon the earlier of: 1) the end of the 72-hour period allotted for the student's response or 2) receipt of the student's response, the faculty member will consider the student's written response and may continue with or cease the dismissal proceedings. In the event the dismissal proceeding is ceased, the student shall be permitted to

- return to the clinical setting provided however, sufficient time remains for successful completion of the clinical course. In the event that insufficient time remains for successful course completion, the School shall have no obligation to create special activities in order to ensure the student's completion of objectives in the then-current semester.
6. If the faculty member decides to continue with dismissal proceedings, the recommendation for dismissal, the Clinical Evaluation Tool, and the student response (if any) will be directly forwarded to the Chairperson of the Student Affairs Committee ("SAC") by the beginning of the next working day.
  7. The Chairperson of SAC or his/her designee will set up a meeting of the Committee within the next working day of receipt of the recommendation for dismissal and student response.
  8. The SAC meeting will proceed as follows:
    - a. SAC will first allow the faculty member recommending dismissal of the student from the major to present the reason(s) for dismissal. Written evidence for the dismissal to SAC in the form of the Clinical Evaluation Tool, student assignments, statements from witnesses, or other documentation may be provided.
    - b. SAC will then provide an opportunity for the student to present a defense to the recommended dismissal. The student has the right to a representative of the student's choice from within the University community, but no person not part of the University community, including attorneys, may participate in the SAC meeting or other proceedings. The student may present assignments, statements from witnesses, or other documentation. Other than oral statements from the student or faculty member involved, all evidence considered by the SAC shall be documentary.
    - c. The student and the student representative (if present) as well as the faculty member recommending the dismissal will then leave the hearing room, and SAC will deliberate and reach a decision based on the evidence. A majority of the SAC members present at the meeting shall constitute a quorum empowered to act on the matter and the vote of a majority of that quorum shall be sufficient to approve or reject a dismissal recommendation.
    - d. Upon reaching a decision, the chair of SAC will notify the student and faculty member in writing.
  9. Students dismissed from the School under these procedures shall not be eligible for readmission to the program.
  10. Students wishing to appeal SAC's decision may appeal to the Dean of the College.
  11. This dismissal procedure is separate from but not exclusive of, procedures conducted by the Office of Student Conduct.

12. The student may continue to participate or enroll in any on-campus, non-clinical nursing courses until a final decision has been rendered regarding the proposed dismissal. Students may complete all non-clinical nursing courses in the current semester, but are ineligible to register for nursing courses in subsequent semesters unless a non-clinical nursing course is required in his/her new major.
13. No grade shall be given for the clinical course in question other than the designation appropriate under University rules or regulations for students who have been dismissed from a program.
14. These procedures shall be construed in harmony with other applicable University policies, rules and regulations, and in the event of an inconsistency, the latter shall govern.

## **B. University Procedure of Requests for Appeal**

1. A charged student found guilty by the SAC after pleading not guilty to a dismissal charge may request an appeal in writing within five class days of receipt of the written hearing decision. Students who plead guilty to a dismissal charge waived their right to an appeal.
2. The student found guilty may appeal on the grounds that:
  - a. the decision is contrary to evidence presented at the hearing, or contrary to new evidence not known in advance of the hearing.
  - b. procedures were not followed in the hearing process.
  - c. the sanction is inappropriate or unreasonable.

Written requests must be received in the Office of Student Conduct within five (5) class days of receipt of the written decision.

Appeals must be type-written, and must cite specific evidence, procedural errors or grounds for reduction of sanction, that have direct bearing on the outcome of the hearing. Appeals may be accompanied by letters and other documentation supporting the grounds for appeal.

3. Upon receipt of the request for appeal, the Director of Student Conduct or his/her designee shall send a copy of the appeal request to major parties involved in the Nursing School's SAC hearing, requesting them to respond in writing within five class days. (Major parties in this case include the Director of Student Conduct, Chair of SAC, the charging faculty member, and the student in question.)
4. The written appeal and all documentation contained within the student's nursing file will be reviewed in a closed meeting of the above designated persons.
5. The Director of Student Conduct will decide to:
  - a. deny the appeal,



- b. grant the appeal in order to reduce the sanction imposed, or
- c. delay the appeal in order to receive additional responses to specific questions raised in the appeal process. Responses may be solicited from the charged student, charging party, original hearing officer and/or any relevant witnesses to the original incident.

The Director of the Office of Student Conduct will reconvene the above designated parties when additional written information is received, or to meet with selected parties with information relevant to the case. The charged student will be allowed to review the written information, and will be invited to attend a meeting with the Director of the Office of Student Conduct in which additional testimony will be introduced.

- 6. The charged student will receive written notification of the final decision. Copies of this notice will be entered into the student's University record, and will be forwarded to the original charging party and the SAC Chairperson.
- 7. The decision is final and shall be implemented immediately by the Director of the Office of Student Conduct.

*CD:sg 9/02  
LAP: bns Revised: 2/16/04  
Approved by University Legal and Department of Nursing Faculty 2/16/04  
Reviewed by SAC Spring 2013  
Reviewed by SAC, March 2016*

## **XIX. GUIDELINES FOR INDEPENDENT STUDY FOR NURSING MAJORS**

The independent study format is designed to provide flexibility in meeting academic needs. It permits students with an interest in a specific topic to receive credit for scholarly work completed in a concentrated area. Credit allocation for independent study is based upon the amount of effort required by the student. Independent study course credit is earned through completion of a scholarly project or activities agreed upon by an eligible student and a faculty sponsor.

An independent study project is expected to demonstrate evidence of scholarly achievement but the project does not need to be formal research. At the discretion of the faculty sponsor and curriculum committee, experiences provided through gainful employment and university or non-university sponsored, non-credit courses may be used as a basis for an independent study course. Independent study may take place in geographically removed locales without direct faculty supervision. Depending upon the nature of the project, clinical experience may be required. Prerequisites for the independent study course will be determined by the faculty sponsor.

### **Criteria:**

1. Grade point average (GPA) of 2.5 or higher.
2. Completion of spring semester, sophomore year is required if the independent study involves a clinical component.

### **Other Guidelines:**

1. Maximum of six (6) credits may be earned through independent study.
2. Independent study credits may fulfill free elective credits.
3. Grading may be pass-fail or standard grading.
4. Independent study may fulfill the NURS 411 credit requirement. Standard grading must be used.

### **Independent Study Approval Process:**

1. Student identifies area of interest and potential project.
2. Student contacts faculty member for potential sponsorship. Course objectives, timetable for activities, evaluation methodology, and the faculty sponsor's role are discussed.
3. Student completes the Independent Study Application Form and Independent Study Registration Form found on the Office of the Registrar's website <http://www1.udel.edu/registrar/helpdocs/indstudy.html> and sponsoring faculty approves the forms and signs forms where appropriate. If clinical placement is required, sponsoring faculty will notify the Clinical Coordinator of the planned clinical placement needs.
4. If requested simply as an independent study, forms are forwarded to the Associate Dean of Nursing Education and Practice for approval or returned to the applicant for revision.
5. If requested as substitution for a NURS 411, the forms are forwarded to the Curriculum Committee Chair. This may be approved or returned to the applicant for revision. The Curriculum Committee approved forms will be sent to the Associate Dean of Nursing Education and Practice.

6. Final approval is provided by the Assistant Dean of Students in the College of Health Sciences who then registers the student for the course.
7. All approvals must be complete prior to the end of the Drop/Add period for the semester in which the student wishes to take the Independent Study.
8. If clinical placement is required, a copy of the approved Independent Study form will be forwarded to the Clinical Coordinator for coordination of clinical placement.
9. The course number assigned is dependent on the academic year of study (NURS 166, 266, 366, and 466).

*Reviewed by SAC Spring 2013*

*Reviewed by Curriculum Committee Summer 2016*

## **XX. ORDERING BOOKS AND SUPPLIES**

Textbooks, nursing supplies, and popular reference books are available at the University Bookstore located at 83 East Main Street. Visit the University Bookstore's website to purchase textbooks online or check store hours at [www.udel.edu/bookstore](http://www.udel.edu/bookstore). The University Bookstore accepts all major Credit Cards (Visa, MasterCard, American Express and Discover), Personal Checks, Financial Aid, Debit Cards, Flex and Cash.

The University Bookstore supplies the following items and can special order other items as needed: name tags, patches, stethoscopes, sphygmomanometers, lab coats, penlights, scissors, examination gloves, laboratory supplies, and the most current reference books and medical dictionaries. The Student Nurses Organization also may offer sales on select items, e.g., stethoscopes. Information will be posted by SNO if items are available.

*Reviewed by SAC, Spring 2013*

*Reviewed by SAC, March 2016*

## **XXI. COURSE REGISTRATION**

Registration for the spring semester starts mid-November; for winter session, the third week in October; for summer session, early April; and for fall semester, mid-April. Students are urged to see their advisor for course selection before registering on line. Students should refer to the School of Nursing Curriculum Plan when planning their nursing curriculum. More information can be found at <http://www.udel.edu/registrar/students/courseinfo.html>

*Reviewed by SAC, Spring 2013*

*Reviewed by SAC, March 2016*

## XXII. TRADITIONAL BSN CURRICULUM SAMPLE SEQUENCE

\*Please note that this is a sample progression, not all students will have the same progression.

Individual student progression questions should be addressed to the student's advisor.

### Freshman

<i>Fall</i>		CR	<i>Spring</i>		CR
NURS 100	New Student Connections	1	BISC 276	Human Physiology	4
NURS 101	Human Anatomy	3	NURS 110	Nursing Connections	1
CHEM 105	General Chemistry	4	CHEM 106	Elementary Bioorganic Chemistry	5
BISC 205	Biology for Health Sciences	4			
PSYC 100	General Psychology <b>OR</b>	3	ENGL 110	Critical Reading and Writing	3
	University Breadth Requirement	3	PSYC 100	General Psychology <b>OR</b>	3
				University Breadth Requirement	3
Total 15			Total 16		

### Sophomore

<i>Fall</i>		CR	<i>Spring</i>		CR
NURS 200	Clinical Decision Making	2	NURS 222	Pharmacology	3
NURS 235	Health, Vulnerability, and Diversity	3	NURS 242	Scientific Basis of Nursing	3
STAT 200	<b>OR</b> Basic Statistical Practice	3	NURS 253	Health and Physical Assessment	3
NURS 241	Scientific Basis of Nursing	3	MEDT 270	Medical Microbiology &	4
MEDT 270	Medical Microbiology & Infectious Diseases <b>OR</b>	4		Infectious Diseases <b>OR</b>	
	Diseases <b>OR</b>		HDFS 201	Life Span Development	3
HDFS 201	Life Span Development	3	STAT 200	Basic Statistical Practice <b>OR</b>	3
NTDT 200	Nutrition Concepts <b>OR</b>	3	NURS 235	Health, Vulnerability, and	3
	University Breadth Requirement	3		Diversity <b>OR</b> University Breadth Requirement	3
Total 14-15			Total 15-16		

### Junior

<i>Fall</i>			<i>Spring</i>		
NURS 354	Psychosocial Nursing	3	NURS 352	Adult Health Nursing	4
NURS 372	Adult Health Nursing	4	NURS 356	Care of Children & Families	3
NURS 382	Communities & Health Policy	2	NURS 358	Women's Health Nursing	3
NURS 390*	Clinical Work Experiences	1	NURS 390*	Clinical Work Experiences	1
STAT 200	Basic Statistical Practice <b>OR</b>	3	NURS 362	Research Concepts in Healthcare	3
	University Breadth Requirement <b>OR</b>	3		University Breadth Requirement	3
	Free Elective	3		<b>OR</b> Free Elective	3
Total 13-16			Total 17		

### Senior

<i>Fall</i>			<i>Spring</i>		
NURS 453	Clinical Applications: Adult Health Nursing I	3	NURS 473	Clinical Applications: Adult Health Nursing II	3
NURS 457	Clinical Applications: Maternal-Child Nursing	3	NURS 477	Clinical Applications: Care of Populations	3
NURS 459	Clinical Applications: Psychosocial Nursing	3	NURS 479	Clinical Preceptorship	3
NURS 460	Transition to Professional Nursing Practice I	2	NURS 480	Transition to Professional Nursing Practice II	2
NURS 411/412/414	Topics in Healthcare Delivery	3	NURS 411/412/414	Topics in Healthcare Delivery	3
Total 14			Total 14		

Total Credits a minimum of 122

Note: \* Total of 2 credits NURS 390 required prior to senior year nursing coursework.

University Breadth Requirements:

Mathematics, Natural Science, and Technology Requirement is met by the above science courses, PSYC 100 or HDFS 201 meet the Social and Behavioral Sciences Requirement. These four requirements must be chosen from different departments.

MAJOR requirements, NURS courses cannot be used to fulfill the University Breadth

Free Electives- Total of 6 credits of free electives required.

Requirement. [http://academiccatalog.udel.edu/Pub\\_ShowCatalogPage.aspx?CATKEY=ROOT&ACYEAR=2016-2017&DSPL=Published](http://academiccatalog.udel.edu/Pub_ShowCatalogPage.aspx?CATKEY=ROOT&ACYEAR=2016-2017&DSPL=Published)

## XXIII. ACCELERATED BSN CURRICULUM

### Prerequisite Courses

All prerequisite science courses, including NURS 101- Human Anatomy, must be completed prior to the first fall nursing courses. All other non-nursing courses must be completed by the end of the first fall semester.

### UNIVERSITY REQUIREMENTS

[ENGL 110](#) Critical Reading and Writing 3  
(minimum grade C-)

[Discovery Learning Experience \(DLE\)](#) 3  
(Senior nursing clinical courses meet this requirement)

[Multicultural Courses](#) 3  
(This course also can be used in the breadth requirements.)

### UNIVERSITY BREADTH REQUIREMENTS

(all require minimum grade C-)  
Creative Arts and Humanities 3  
History and Cultural Change 3  
Social and Behavioral Science 3  
Mathematics, Natural Sciences, and Technology 3  
(Several required courses will meet the Mathematics, Natural Sciences, and Technology requirement. PSYC 100 or HDFS 201 meet the Social and Behavioral Sciences Requirement. These four courses must be chosen from different departments. MAJOR requirements, NURS Courses, cannot be used to fulfill the University Breadth Requirements.)

General Biology with lab 4

Anatomy and Physiology 6

Microbiology with lab 4

General Chemistry with lab 4

Bioorganic Chemistry with lab 4

Human Development over the Life Span 3

Nutrition 3

General Psychology 3

Statistics 3

Free Electives 6  
(sufficient elective credits to meet the minimum credits for the degree)

### Nursing Courses (66 Credits)

**Fall (14 weeks) September-December**  
NURS 110 Nursing Connections 1  
NURS 200 Clinical Decision Making 2  
NURS 222 Pharmacology 3  
NURS 312 Pathophysiology 4  
NURS 362 Research Concepts in Health Care 3  
**Total 13**

**Winter (5 weeks) January**  
NURS 235 Health, Vulnerability, and Diversity 3  
NURS 253 Health and Physical Assessment 3  
**Total 6**

**Spring (14 weeks) February-May**  
NURS 352 Adult Health Nursing 4  
NURS 354 Psychosocial Nursing 3  
NURS 358 Women's Health Nursing 3  
NURS 372 Adult Health Nursing 4  
NURS 382 Communities and Health Policy 2  
**Total 16**

**Summer (10 weeks) June-July**  
NURS 356 Care of Children & Families 3  
NURS 453 Clinical Applications: Adult Health Nursing I 3  
NURS 411/412/414 Topics in Healthcare Delivery 3  
**Total 9**

**Fall (14 weeks) September-December**  
NURS 457 Clinical Applications: Maternal Child Nursing 3  
NURS 459 Clinical Applications: Psychosocial Nursing 3  
NURS 460 Transition to Professional Nursing Practice I 2  
NURS 473 Clinical Applications: Health Nursing II 3  
NURS 411/412/414 Topics in Healthcare Delivery 3  
**Total 14**

**Winter (5 weeks) January**  
NURS 477 Clinical Applications: Care of Populations 3  
NURS 479 Clinical Preceptorship 3  
NURS 480 Transition to Professional Practice II 2  
**Total 8**

**BSN Total Credits- a minimum of 124**

## XXIV. RN TO BSN CURRICULUM

### Prerequisite Courses

#### UNIVERSITY REQUIREMENTS

[ENGL 110](#) Critical Reading and Writing (minimum grade C-) 3

[Discovery Learning Experience](#) (DLE) 3  
Senior nursing clinical courses meet this requirement.

[Multicultural Courses](#) 3  
This course also can be used in the breadth requirements.

#### UNIVERSITY BREADTH REQUIREMENTS

Creative arts and humanities (minimum grade C-) 3  
History and Cultural Change (minimum grade C-) 3  
Social and behavioral science (minimum grade C-) 3  
Mathematics, Natural Sciences, and Technology (minimum grade C-) 3

*Several required courses will meet the Mathematics, Natural Science, and Technology requirement. PSYC 100 or HDF5 201 meet the Social and Behavioral Sciences Requirement. These four courses must be chosen from different departments.*

*MAJOR requirements, NURS courses cannot be used to fulfill the University Breadth Requirement.*

General Biology with lab 4

Anatomy and Physiology 8

Microbiology with lab 4

General Chemistry with lab 4

Human Development over the life span 3

Nutrition 3

General Psychology 3

Statistics 3

Second English Composition 3

Free Elective - Sufficient elective credits to meet the minimum credits for the degree

### Nursing Courses (31 Credits)

#### Required Nursing Courses

NURS 312 Pathophysiology 4

NURS 320 Transition to Professional Practice 3

NURS 325 Current Trends in Health Care 3

NURS 350 Wellness and Health Assessment 3

NURS 362 Research Concepts in Health Care 3

NURS 411/412/414 Topics in Health Care Delivery 6

NURS 435 Leadership and Management in Health Organizations 3

NURS 442 Community Health Nursing 3

NURS 443 BRN Role Practicum 3

#### Bachelor of Science in Nursing

#### Total credits- a minimum of 120

Students in this program must have successfully completion of RN licensure exam (30 credits nursing knowledge awarded) and have a current RN license in one of the fifty United States.

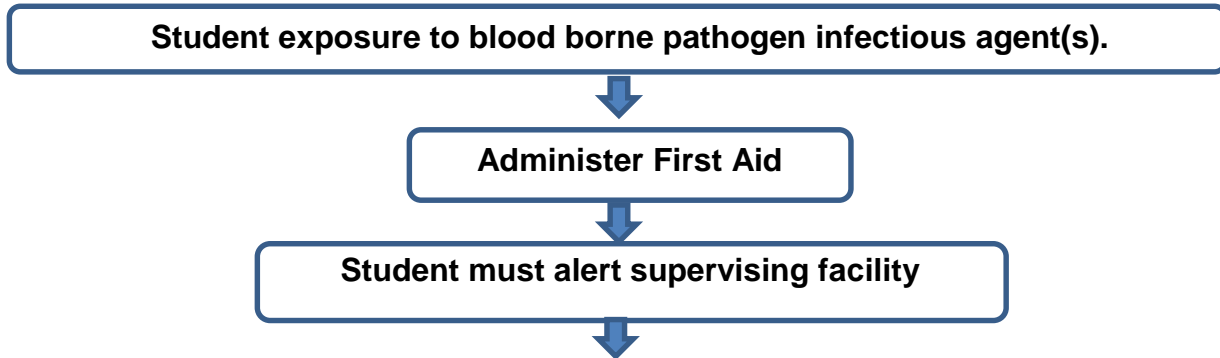
For the RN to BSN Program, there is no time limit for completion of prerequisite courses; however, upon enrollment in the first nursing course, the program must be completed within a five-year period.

## XXV. BLOOD BORNE PATHOGEN EXPOSURE & MANDATORY REPORTING

Students that sustain injuries or are exposed to blood borne and/or non-blood borne pathogens need to follow the guidelines outlined in the below algorithms. In addition, the official “School of Nursing Blood Borne Pathogen Exposure and Injury to Student Policy and Procedure”, and appendices can be found at: <http://sites.udel.edu/nmhc/our-services/student-needle-sticks-blood-borne-pathogen-exposures/> .

### A. Blood Borne Pathogen Exposure Student Report Algorithm

\* Use the **Blood Borne Pathogen Exposure and Injury to Student Policy and Procedure** for detailed information & forms.



#### Supervising Faculty will:

- Refer student to closest urgent care center or ER as indicated
- Provide student with “Exposure Referral Guide” (\*Appendix E)
- Ensure source patient’s blood drawn for rapid HIV, Hepatitis B and C
- Complete source patient information (\*Appendix D)
- Complete exposure report (\*Appendix A)
- Complete a Student first report of injury (\*Appendix B)
- Complete an Injury/illness/loss investigation report (\*Appendix C)
- Contact the Nurse Managed Health Center to alert them of the exposure
- Submit completed forms within 24 hours.

*Revised by Safety Committee Fall 2012*

*Reviewed by Safety Committee Spring 2015*

### B. Non-Blood Borne Pathogen Exposure Student Report Algorithm

\* Use the **Blood Borne Pathogen Exposure and Injury to Student Policy and Procedure** for detailed information & forms.

**Student injury or exposure to (non-blood borne pathogen) infectious agents.**



**Administer First Aid**



**Student must alert supervising faculty**



**Supervising Faculty will:**

- Complete a Student first report of injury (\*Appendix B)**
- Complete an Injury/illness/loss investigation report (\*Appendix C)**
- Contact Student Health to alert them of the injury**
- Refer student to closest urgent care center or ER as indicated**
- Submit completed forms within 24 hours.**

*Revised by Safety Committee Fall 2012.  
Reviewed by Safety Committee Spring 2015*



### **Policy**

- All blood borne pathogen (BBP) exposures and personal injuries are to be treated immediately.
- All BBP exposures and personal injuries are to be reported immediately.

### **Procedures**

#### **Blood Borne Pathogen Exposure – Faculty, Staff, and Students**

1. Blood Borne Pathogen Exposures - Steps for Treatment
  - a. Administer first aid, immediately after exposure. Allow a penetrating injury to bleed. Wash the injury site thoroughly with soap and water or rinse the exposed mucous membrane thoroughly with water. If anyone assists with first aid they should wear gloves and eye protection.
  - b. After first aid has been administered, the individual must report to incident to their supervisor.
  - c. The supervisor will complete the Exposure Report Form (Appendix A), First Report of Injury Form (Appendix B) and Injury/Illness Loss Investigation Report (Appendix C).
  - d. If injury occurs Monday-Friday between 8am-4pm the supervisor will call the University of Delaware Nurse Managed Health Center (“UD NMHC”) at 302-831-3195 to alert the office that they are referring an individual for treatment for BBP exposure.
  - e. If injury occurs Monday-Friday between 4pm-8pm or Saturday-Sunday between 8am-8pm, the supervisor will call the closest Medical Aid Unit to alert the Medical Aid Unit that they are referring an individual for treatment for BBP exposure. Local Medical Aid Units include:
    - i. Glasgow Medical Aid Unit  
STAR Campus  
550 South College Avenue, Suite 115  
Newark, DE 19713  
302-533-7148
    - ii. Glasgow Medical Aid Unit  
Glasgow Medical Center  
2600 Glasgow Ave., Newark, DE 19702  
302-836-8350
    - iii. Medical Aid Unit at Christiana  
HealthCare Center at Christiana  
200 Hygeia Drive, Newark, DE 19713  
302-623-0444
    - iv. Medical Aid Unit at Middletown  
Middletown Care Center  
124 Sleepy Hollow Drive, Middletown, DE 19709

302-449-3100

- f. If injury occurs during any hours not covered above, the supervisor will contact the closest Christiana Care Emergency Room to alert them that they are referring an individual for treatment for BBP exposure.
    - i. Christiana ER (Triage Desk) 302-733-1620
    - ii. Wilmington ER (Triage Desk) 302-428-4180
  - g. If injury occurs at a facility out of state or at a significant distance from the above sites, the supervisor will identify the closest urgent care facility or emergency room and contact the identified facility and refer as indicated for BBP exposure.
  - h. The supervisor will provide the injured individual with a copy of the Exposure Referral Guideline (Appendix E).
  - i. The supervisor will contact the University of Delaware (UD) Nurse Managed Health Center (NMHC) at 302-831-3195 to notify them that an individual has been referred for treatment for BBP exposure and will require follow-up in the NMHC.
2. Blood Borne Pathogen Exposures - Source Evaluation
    - a. The supervisor is responsible for requesting that the source patient's blood be tested for:
      - i. RAPID HIV testing; no consent is needed.
      - ii. Hepatitis B and Hepatitis C testing.
    - b. The supervisor will complete the Source Patient Information Form (Appendix D).
  3. Blood Borne Pathogen Exposures - Immediate Post-Exposure Documentation
    - a. The supervisor is responsible for submitting all the required completed forms:
      - i. Appendix A - Exposure Report Form
      - ii. Appendix B - First Report of Injury Form
      - iii. Appendix C - Injury/Illness/Loss Investigation Report
      - iv. Appendix D - Source Patient Information Form
      - v. For Faculty/Staff only: Appendix F – First Report of Injury Form
    - b. All forms are to be submitted via FAX or hand-delivery within 24 hours of the BBP exposure to the following:
      - i. UD Department of Environmental Health & Safety: 302-831-1528 (only forms A,B,C)
      - ii. UD department director's office: 302-831-2382 (only forms A,B,C)
      - iii. UD NMHC: fax 302-831-3193 (all forms A,B,C,D)
  4. Blood Borne Pathogen Exposure - Follow-up Care
    - a. The UD NMHC upon notification and receipt of the above documentation will contact the injured individual to schedule a follow-up office visit for counseling and health care treatment as indicated.

### **Faculty and Staff Injury (other than BBP exposure)**

1. Injuries - Steps for Faculty and Staff Treatment
  - a. Administer first aid and/or treatment as indicated.
  - b. After first aid has been administered, the faculty or staff member must notify their supervisor.
  - c. The supervisor will contact the UD NMHC at 302-831-3195 to alert them of the individual's injuries and in consultation with the UD NMHC, determine if individual should be treated at the UD NMHC or referred to the nearest urgent care facility or emergency room.
  - d. If injury occurs at a facility out of state or at a significant distance from the above

- sites, the supervisor will identify the closest urgent care facility or emergency room and contact the identified facility and refer as indicated for treatment of the injury.
- e. The supervisor will complete a First Report of Injury Form (Appendix F) and an Injury/Illness Loss Investigation Report (Appendix C).
  - f. The supervisor is responsible for submitting all the required completed forms:
    - i. Appendix F – First Report of Injury Form
    - ii. Appendix C – Injury/Illness/Loss Investigation Report
  - g. All forms are to be submitted via FAX or hand-delivery within 24 hours of the personal injury to the following:
    - i. UD Department of Environmental Health & Safety: 302-831-1528
    - ii. UD department director's office
    - iii. UD Nurse Managed Health Center: fax 302-831-3193

### **Student Injury (other than BBP exposure)**

1. Injuries – Steps for Student Treatment
  - a. Administer first aid and/or treatment as indicated.
  - b. After first aid has been administered, the student must notify their supervisor.
  - c. The supervisor will contact Student Health Services at 302-831-2226 to alert them of the student's injuries and in consultation with the Student Health representative, determine if student should be treated at the Student Health Services or be referred to the nearest urgent care facility or emergency room.
  - d. If injury occurs at a facility out of state or at a significant distance from the above sites, the supervisor will identify the closest urgent care facility or emergency room and contact the identified facility and refer as indicated for treatment of the injury.
  - e. The supervisor will complete a First Report of Injury Form (Appendix B) and an Injury/Illness Loss Investigation Report (Appendix C).
  - f. The supervisor is responsible for submitting all the required completed forms:
    - i. Appendix B – First Report of Injury Form
    - ii. Appendix C – Injury/Illness/Loss Investigation Report
  - g. All forms are to be submitted via FAX or hand-delivery within 24 hours of the personal injury to the following:
    - i. UD Department of Environmental Health & Safety: 302-831-1528
    - ii. UD department director's office
    - iii. UD Student Health Services: 302-831-6407 (only for students)

### **Appendices**

- Appendix A - Exposure Report Form
- Appendix B - First Report of Injury Form – Student Use Only
- Appendix C - Injury/Illness/Loss Investigation Report
- Appendix D - Source Patient Information Form
- Appendix E - Exposure Referral Guideline
- Appendix F – First Report of Injury Form – Employee Use Only

Submit a Copy of This Report to Each of the Following:		
University of Delaware Environmental Health & Safety 132 General Services Bldg.	Nurse Managed Health Center STAR Campus 540 S College Ave, Ste 130	UD Department's Director's Office

Exposed Individual:	
Name:	
Role:	<input type="checkbox"/> Student <input type="checkbox"/> Employee
Department:	
Phone Numbers:	Cell: _____ Home: _____

Exposure:	
Date of exposure:	
Location of exposure:	
Type of exposure: (i.e. needle-stick, mucous membrane, non-intact skin, bite, etc.)	Type of Device: (i.e. type of needle, safety device)
Body fluid/substance involved:	
Estimated quantity of fluid involved:	
Was fluid actually injected into individual?	
Body part exposed:	

Witness:	
Name:	
Address:	
Phone#:	

Incident Details:	
Explain in detail what occurred:	
Personal protective equipment used:	

First Aid:	
What first aid was performed:	
By whom:	

Hepatitis B:	
Has individual had Hepatitis B vaccine series?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, has series been completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Date and Signature of Person Recording Report:	
Signature:	Date:
Name Printed:	

**University of Delaware Student  
First Report of Injury Form (Appendix B)**



**FIRST REPORT OF INJURY** - This form applies to visitors and students who are not employed by the University of Delaware

Student  Visitor

Nature of Business: Educational Institution

**Submit a Copy of This Report to Each of the Following:**

Environmental Health & Safety  
132 General Services Bldg.  
Fax: 302-831-1528

Nurse Managed Health Center  
540 South College Ave, Ste 130  
Fax: 302-831-3193  
(BBP Injuries Only)

UD Department's Director's Office

**Location and Date/Time of Injury:**

Location Where

Accident Occurred: \_\_\_\_\_

University Property:  Yes  No

Date of Injury: \_\_\_\_\_

Day of Week: Su M Tu W Th F Sa

Time of Injury: \_\_\_\_\_

**Name of Supervisor Reporting Injury:**

First Name, MI: \_\_\_\_\_

Middle Initial: \_\_\_\_\_

Job Title: \_\_\_\_\_

**Address of Supervisor Reporting Injury:**

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**Name of Injured Person:**

First Name: \_\_\_\_\_

Middle Initial: \_\_\_\_\_

Last Name: \_\_\_\_\_

**Address/Phone Number of Injured Person:**

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Demographic Information of Injured Person:**

Date of Birth: \_\_\_\_\_

Gender:  Male  Female

Name of Health Care

Insurance Carrier: \_\_\_\_\_

**Injury Details:**

Describe fully how the  
accident occurred:

Describe the Nature and Location of Injury  
(describe fully exact location of amputations or fractures, right or left):

**Names, Addresses and Phone Numbers of Witnesses:**

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**Name, Address and Phone Number of Treating Healthcare Provider:**

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**Name, Address and Phone Number of Treating Hospital or Health Care Facility:**

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**Date and Signature of Person Recording Report:**

Date: \_\_\_\_\_  
Signature: \_\_\_\_\_

**Routing:**

*Department  
Director's Office  
NMHC (BBP) or  
Student Health  
(Non-BBP)  
EHS*

*Rejected:*  Yes  No

*Rejected By:* \_\_\_\_\_

*Date:* \_\_\_\_\_

*Reason:* \_\_\_\_\_

**University of Delaware  
Illness/Injury/Loss Investigation Report (Appendix C)**



<b>Case No:</b>	<b>Date of Injury /Illness /Loss:</b>		<b>Name of Injured:</b>	
<b>Injured Person's Department:</b>			<b>Immediate Supervisor:</b>	
<b>Submit a Copy of This Report to Each of the Following:</b>				
Environmental Health & Safety 132 General Services Bldg. Fax: 302-831-1528	Nurse Managed Health Center 540 S College Ave, Ste 130 Fax: 302-831-3193	Department Director's Office		
<b>Identify the Direct and Contributing Causes of the Illness/Injury</b>				
1. Was this person made aware of hazards and proper safety procedures with the task prior to the accident? (Explain)				
2. What mechanical, physical or environmental conditions contributed to the accident (e.g. broken equipment, poor lighting, noise, material defects, slippery surfaces, lack of warning signs or posted directions, etc.)				
3. What act(s) by the injured and/or others contributed to the accident (e.g. wrong tool or equipment, improper position or placement, work rule violation, failed to follow instructions, etc.)				
4. What personal factors contributed to the accident (e.g. improper attitude, fatigue, inattention, substance abuse, etc.)				
5. Was the accident the result of failing to wear personal protective equipment? (Explain)				
6. What corrective action(s) has been or will be taken to prevent a recurrence of this type of accident? (e.g. repair/modify/replace equipment, counseling, training, policies, procedures, etc.)				
7. Who is responsible for implementing corrective actions?				
<b>Investigated by:</b> Supervisor				<b>Date:</b>
<b>Reviewed by:</b> Safety Committee Chair				<b>Date:</b>

**Only submit a copy of this report to:**

Nurse Managed Health Center, 540 South College Ave., Suite 130; Secure Fax: 302-831-3193

**Source Person's Information Form**

**Source Person's HIV Status**

Positive:

Negative:

Verification:  Rapid HIV  Reported  Documented in Chart

Unknown:  Source Not Tested  Source Not Available

**Individual Exposed From Source Person and Reporting Supervisor**

Individual's Name: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Date of Exposure: \_\_\_\_\_

**Location/Facility Where Injury Occurred (e.g. hospital name):**

Location/Facility: \_\_\_\_\_



**Instructions:**

The supervisor is to complete the bottom of the form and supply the completed form to the individual who has the BBP exposure. The individual is to give it to the healthcare facility to which he/she has been referred for treatment.

**Financial Responsibility**

The University of Delaware individual has been referred to your facility for treatment of a Blood Borne Pathogen (BBP) exposure. The individual is financially responsible for this visit. If the individual is not able to provide health insurance information or payment at time of service, the individual should be given a receipt and billed as indicated.

The University of Delaware will assist the student with the health insurance reimbursement process, or navigating mechanisms for payment of services received at your facility, if needed, during their follow-up visit at the UD Nurse Managed Health Center.

**Post-Exposure Treatment**

Individuals presenting at a Medical Aid Unit or Emergency Room should be treated in accordance with the guidelines set forth by the CDC's - National Institute for Occupational Safety and Health (NIOSH).

**Post-Exposure Laboratory Testing Guidelines**

1. ALT/AST, Anti-HIV, Anti-HBs, Anti-HCV
2. If individual to receive Post-Exposure Prophylaxis (PEP) include CBC, CMP, UA, and HCG
3. For questions concerning testing and treatment contact the (24/7) National Clinicians' Post-Exposure Prophylaxis Hotline at 888-448-4911.

**Follow-up Care**

1. Fax copy of all laboratory results to the University of Delaware Nurse Managed Health Center (UD NMHC) at 302-831-3193.
2. Refer the individual for follow-up care to the UD NMHC, phone 302-831-3195.
3. Then UD NMHC will assume responsibility for all subsequent care and treatment of the individual.

**Communication:**

1. Fax the individual's complete medical report to the NMHC at 302-831-3193.
2. All labs ordered will be copied to Carolyn Haines, FNP-C (Nurse Practitioner) at the UD NMHC.

**Contact Information:**

1. Nurse Managed Health Center – 302-831-3195

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Supervisor Name

Phone #

**ALL COPIES OF FIRST REPORT MUST BE TYPED OR PRINTED**

**STATE OF DELAWARE**

Department of Labor  
Office of Workers' Compensation  
P.O. Box 8902  
Wilmington DE 19899-8902  
Telephone 302-761-8200

**OPERATIONAL  
CASE**

\_\_\_\_\_  
CASE OR FILE NO.

LOCATION/DEPT. CODE _____			EMPLOYER'S UC REPORTING NUMBER _____		
1.. EMPLOYEE: FIRST MIDDLE LAST				2. EMPLOYEE SOCIAL SECURITY NO.	
3. ADDRESS – INCLUDE COUNTY AND ZIP CODE			4. MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>	5. EMPLOYEE TELEPHONE NUMBER (INCLUDE AREA CODE)	
6. DATE OF BIRTH	7. AGE	8. WAGE	9. WEEKLY HOURS WORKED		
10. OCCUPATION (REGULAR)		11. DEPARTMENT OF DIVISION REGULARLY EMPLOYED		12. HOW LONG EMPLOYED	
13.. EMPLOYER <b>University of Delaware</b>			14. PERSON MAKING OUT THIS REPORT		
15. ADDRESS – INCLUDE COUNTY AND ZIP CODE <b>413 Academy St. Newark DE 19716</b>			16. EMPLOYER TELEPHONE NUMBER (INCLUDE AREA CODE) <b>302-831-8305</b>		
17. MAILING ADDRESS – IF DIFFERENT THAN ABOVE			18. NATURE OF BUSINESS – TYPE OF MFG., TRADE, CONSTRUCTION, SERVICE, ETC. <b>Educational Institute</b>		
20. DATE OF INJURY AND TIME <input type="checkbox"/> AM <input type="checkbox"/> PM	21. NORMAL STARTING TIME <input type="checkbox"/> AM <input type="checkbox"/> PM.	22. IF EMPLOYEE BACK TO WORK GIVE DATE		23. AT SAME WAGE YES <input type="checkbox"/> NO <input type="checkbox"/>	
24. IF FATAL INJURY, GIVE DATE OF DEATH.	25. DATE EMPLOYER KNEW OF INJURY	26. DATE DISABILITY BEGAN		27. LAST FULL DAY PAID – DATE	
28. DESCRIBE THE INJURY/ILLNESS AND PART OF BODY AFFECTED.					
29. SPECIFY THE DEPARTMENT WHERE INCIDENT OCCURRED AND THE WORK PROCESS INVOLVED.					
30.. LIST THE EQUIPMENT, MATERIALS, AND CHEMICALS EMPLOYEE WAS USING WHEN THE INCIDENT OCCURRED, E.G. ACETYLENE.					
31. DESCRIBE THE EMPLOYEE'S ACTIVITY AT THE TIME OF INJURY OR ILLNESS, I.E.					
32. DESCRIBE HOW THE INJURY/ILLNESS OCCURRED					
33. NAME OF PHYSICIAN			34. PHYSICIAN'S ADDRESS		
35. HOSPITAL (IF APPLICABLE)			36. HOSPITAL ADDRESS		

**WORKER'S COMPENSATION INSURANCE COMPANY AND COMPLETE ADDRESS (PREPRINT OR STAMP INCLUDE IAB CODE)**

**37. (THIS SECTION MUST BE COMPLETED IN ORDER TO PROCESS.)**

**PMA Management Corp  
P O Box 25250 Lehigh Valley, PA 18002**

I.A.B. CODE \_\_\_\_\_ POLICY NO. \_\_\_\_\_

**DISTRIBUTION OF THIS REPORT DOC. NO. #60-07-01-90-10-04**

- 1. ORIGINAL MUST BE SENT IMMEDIATELY TO WORKER'S COMPENSATION INSURANCE CARRIER.**
- 2. COPY TO INDUSTRIAL ACCIDENT BOARD**
- 3. EMPLOYER'S COPY – RETAIN AS RECORD**
- 4. EMPLOYEE'S COPY**

SIGNATURE OF PERSON IN 14 ABOVE  
Last updated: 12/08/2015

\_\_\_\_\_  
OFFICIAL POSITION

## **XXVI. Student/Faculty/Staff Exposure to Tuberculosis Policy and Procedure**

I. Purpose: The purpose of this policy is to establish the procedures the faculty and staff of the School of Nursing need to take when a student, faculty member, or staff member have been exposed or potentially exposed to tuberculosis (TB) in the clinical setting.

II. Authority: Any faculty or staff member that is aware of a confirmed exposure or potential exposure to TB is responsible to report the event to the School of Nursing's Clinical Coordinator so an investigation can be started and completed.

III. Policy: The School of Nursing will investigate any potential and confirmed exposure to TB of students, faculty, and staff in the clinical setting. The School of Nursing will work with the clinical site, University of Delaware Student Health Services, Nurse Managed Primary Care Center, and the Delaware Division of Public Health as needed during the investigation.

IV. Procedure:

### **A. Confirmed Student Cases of TB Exposures**

1. The School of Nursing's Clinical Coordinator will be notified by clinical agencies or faculty of confirmed TB exposures. The Clinical Coordinator will confirm with the involved facility of the unit and dates of the exposure and complete Appendix A – Student Demographics.
2. The School of Nursing Clinical Coordinator will notify Student Health Services of the student exposed to a confirmed case of TB and provide the nurse with the date and results of their last TB testing. Student Health Services will determine the type of testing needed, PPD skin test or laboratory test.
3. The School of Nursing Clinical Coordinator will contact the Delaware Division of Public Health TB Clinic (302-283-7588) and report the student exposure to a confirmed case of TB and type of testing determined by Student Health Services. The information on Appendix A will be provided to the Delaware Division of Public Health Tuberculosis Clinic in New Castle County for their processes.
4. The School of Nursing Clinical Coordinator will contact the exposed student on date of notification to schedule a meeting within 2 business days to discuss the TB exposure and to provide written instructions on what baseline and follow up testing will be needed. The exposed student will confirm their demographic information on Appendix A and sign verification that they received the written instructions, Appendix B. A copy of the signed verification will be placed in the student's academic and clinical requirement files.
5. Any confirmed exposure to TB will require a University of Delaware Injury/Illness report to be completed.

### **B. Confirmed Faculty/Staff Cases of Tuberculosis Exposure**

1. The School of Nursing's Clinical Coordinator will be notified by clinical agencies or faculty of confirmed TB exposures. The Clinical Coordinator will confirm with the involved facility of the unit and dates of the exposure and complete Appendix A – Faculty Demographics.
2. The School of Nursing Clinical Coordinator will notify the Nurse Managed Primary Care Center (NMPCC) of the faculty/staff exposed to a confirmed case of TB and provide the nurse with the date and results of their last TB testing. The NMPCC will determine the type of testing needed, PPD skin test or laboratory test.
3. The School of Nursing Clinical Coordinator will contact the Delaware Division of Public Health TB Clinic (302-283-7588) and report the faculty/staff exposure to a confirmed case of TB and type of testing determined by NMPCC. The information on Appendix A will be provided to the Delaware Division of Public Health Tuberculosis Clinic in New Castle County for their processes.
4. The School of Nursing Clinical Coordinator will contact the exposed faculty/staff on date of notification to schedule a meeting within 2 business days to discuss the TB exposure and to provide written instructions on what baseline and follow up testing will be needed. The exposed faculty/staff will confirm their demographic information on Appendix A and sign verification that they received the written instructions, Appendix B. A copy of the signed verification will be placed in the faculty/staff clinical requirement files.
5. Any confirmed exposure to TB will require a University of Delaware Injury/Illness report to be completed, including the State of Delaware First Report of Occupational Injury form.

C. Potential Student Exposure to Tuberculosis in Cases of Patients with a Strong Suspicion of Tuberculosis

1. If a faculty member or student feels a student has been exposed to a patient with a strong suspicion of TB, they can report the patient information to the School of Nursing Clinical Coordinator. The Clinical Coordinator will complete the Report of Patient with a Strong Suspicion of Tuberculosis form (Appendix C) and contact the facility where the suspected exposure occurred to notify of suspected exposure and the need that testing determination needs to be communicated to the University of Delaware School of Nursing's Clinical Coordinator
2. The School of Nursing Clinical Coordinator will follow up with the affected facility no later than 3 weeks after the report is made to verify if a determination of TB diagnosis has been made on the suspected patient.
3. If the affected facility determines that there was a confirmed exposure, the Clinical Coordinator will start the procedure for a confirmed case of TB exposure.

D. Potential Faculty/Staff Exposure to Tuberculosis in Cases of Patients with a Strong Suspicion of Tuberculosis

1. If a faculty/staff member feels they have been exposed to a patient with a strong suspicion of TB, they can report the patient information to the School of Nursing Clinical Coordinator. The Clinical Coordinator will complete the Report of Patient with a Strong Suspicion of Tuberculosis form (Appendix C) and contact the facility where the suspected exposure occurred to notify of suspected exposure and the need that testing determination needs to be communicated to the University of Delaware School of Nursing's Clinical Coordinator.
2. The School of Nursing Clinical Coordinator will follow up with the affected facility no later than 3 weeks after the report is made to verify if a determination of TB diagnosis has been made on the suspected patient.
3. If the affected facility determines that there was a confirmed exposure, the Clinical Coordinator will start the procedure for a confirmed case of TB exposure.

**APPENDIX A**

Tuberculosis Exposure Policy – Student/Faculty Demographics

**Date of Notification:** \_\_\_\_\_ **Reported by:** \_\_\_\_\_

**Tuberculosis Source Patient:**

Name	
Date of Birth	
Facility	

**Exposed Student**

Name	
Date of birth	
Address	
Home phone number	
Cell phone number	
Approximate date of exposure	
Date and result of last PPD skin test	
Date and type of baseline exposure testing if known	

**Date of Delaware Division of Public Health TB Clinic Notification (302-283-7588):** \_\_\_\_\_

**Name:** \_\_\_\_\_

**APPENDIX B**

Tuberculosis Exposure Policy - Verification of Receipt of Letter

I verify that I have received this letter and will schedule a base line TB testing at the **UD Student Health services / Nurse Managed Primary Care Center or Primary Care provider** and follow up TB testing in 8-10 weeks from \_\_\_\_\_.

\_\_\_\_\_  
Faculty/Student Name

\_\_\_\_\_  
Faculty/Student signature

\_\_\_\_\_  
Date

DATE

Dear (Faculty/Student Name),

As per the e-mail I sent to you on (date), I was notified by (hospital/person) that you were exposed to a patient with confirmed Tuberculosis (TB) while participating in your clinical experience on (unit and hospital) during the dates (dates).

Due to this TB exposure, it is important that you receive base line TB testing at the **UD Student Health services / Nurse Managed Primary Care Center** within a week and follow up TB testing in 8-10 weeks. Please call the **UD Student Health services (302-831-2226) / Nurse Managed Primary Care Center (302-831-3195) or Primary Care Provider** to schedule your initial TB testing.

Please feel free to contact me at 302-831-6918 or hskopow@udel.edu with any questions.

Sincerely,

Heidi L. Skopowski, MS, RN  
Clinical Coordinator  
University of Delaware School of Nursing

**APPENDIX C**

Tuberculosis Exposure Policy – Report of Patient with a Strong Suspicion of Tuberculosis  
Student/Faculty Demographics

**Date of Notification:** \_\_\_\_\_ **Reported by:** \_\_\_\_\_

**Tuberculosis Source Patient**

Name	
Date of Birth	
Facility	
Dates of possible exposure	

**Exposed Student/Faculty/Staff**

Name	
Date of birth	
Address	
Home phone number	
Cell phone number	

**Date and name of facility:** \_\_\_\_\_

**Date of follow up with the facility:** \_\_\_\_\_

**Facility determination:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**XXVII. Building Emergency Evacuation Policy and Procedure**  
**McDowell Hall**  
**(eff. 11/5/2010)**

**I. PURPOSE:**

- A. This protocol establishes the policy and procedures for evacuating the School of Nursing in the event of a drill or real emergency. The purpose of a fire/evacuation drill is to practice exiting the building “in a simulated emergency situation” so that when an emergency does arise, panic will be minimized and an orderly evacuation will be accomplished.

**II. AUTHORITY:**

- A. Any person within the School of Nursing who has knowledge of an imminent threat to the safety and well-being of the employees, students, and visitors (such as, but not limited to, visual smoke, burning odor, fire, an armed intruder, abnormal heating of materials, hazardous gas leaks, hazardous material or flammable liquid spill) has the authority to activate the fire alarm system by pulling one of the fire alarm handles.
- B. Any person within the School of Nursing who has knowledge of a potential threat to the safety and well-being of the employees, students, and visitors (such as, but not limited to, verbal or written threats, bomb threat, or irate person) should immediately contact Public Safety by University phone (dial 911 or 2222) or by a University Emergency Phone identified by a blue light. Indicate the nature of the threat (i.e., what was said, who said it), all information at hand about the threat, including background information. Public Safety will make a determination as to whether an evacuation is warranted.

**III. POLICY**

- A. All School of Nursing personnel are required to comply with an evacuation order, whether disseminated by fire alarm or through verbal communication.
- B. Failure to comply with an evacuation order will result in disciplinary action.

**IV. PROCEDURES:**

- A. Everyone must exit the building immediately when the alarm sounds or when instructed to do so by emergency personnel or designee. Everyone must gather at the **School of Nursing MEETING POINT** – at a distance of 200 ft. from the building to allow the safe arrival of emergency response vehicles. Keep entrances, sidewalks, and driveways clear.

**School of Nursing MEETING POINT – All School of Nursing personnel are to meet on the grassy area to the side of McDowell Hall and immediately in front of Willard Hall Education Building. In the case of inclement weather or long-term evacuation, the alternate meeting place will be the main lobby of Willard Hall Education Building.**

If possible, and you can do so without placing yourself at risk:

1. Gather your keys, purse, briefcase, laptop, and coat as you leave the area.

**NOTE:** When true emergencies occur, evacuation may be required for several minutes to several hours before the incident is resolved and the building is safe to reoccupy. Practice gathering your keys, purse, briefcase, laptop, and coat so you will be prepared when an emergency occurs.

2. Shut any open windows and close each door that you go through.

3. Shut down all equipment and computers in the area, if possible.

4. Inform others of the need to leave.

5. **Exception to Section IV. A. – This exception pertains only to persons with disabilities that would not permit normal evacuation from the building. In case of an emergency, a person with a disability shall do the following:**

- a. Proceed immediately to the designated **“Areas of Refuge”** within McDowell Hall:

- 1) Top of stairwell A – stairwell between elevators at front of building.

- 2) Top of stairwell B – stairwell closest to Willard Hall Education Building.

- b. If an “Area of Refuge” is not available, proceed immediately to the nearest marked exit and wait inside the stair tower landing.

- c. Alert a responsible person of your intentions to wait at the “Area of Refuge” for assistance.

- d. Wait for trained emergency responders to rescue you.

6. **Exception to Section IV. A. – This exception pertains only to a fire situation. If a small contained fire is discovered, the following may be done using good judgment:**

- a. Evacuate the immediate area of the fire using verbal instructions.

- b. Ask for assistance from a person in the immediate area.

- c. Extinguish the fire with a portable fire extinguisher.

- d. Contact Public Safety at 911 or 2222 and wait for their response.

- e. Contact Environmental Health and Safety at 8475 immediately even if no appreciable damage results. This will assure that the City Fire Marshal is notified as required by law, that extinguishers are recharged, insurance reports filed, and hazardous conditions corrected to reduce the chance of recurrence.

- f. Do not allow re-occupancy of the immediate fire area until cleared by Public Safety and/or Environmental Health and Safety.
  
- B. In the event of a true emergency, administrators and persons with information about the cause of the evacuation and special needs of the evacuees shall dial 911 or 2222 and report the emergency and wait for emergency responders.
  
- C. Supervisors will be expected to account for all of their subordinates and notify the emergency responders if someone is missing. Supervisors will be expected to alert Public Safety and/or Emergency Responders outside the building that a disabled employee is waiting at the **“Area of Refuge”** for rescue.
  
- D. **DO NOT LEAVE the School of Nursing MEETING POINT until instructed to do so by Public Safety or Designated Officer.**

This policy was adapted from the University’s Policies and Procedures Manual, Policy #7-6: Safety and Security.

*Approved by SON Safety Committee 11/5/2010*

NOTE: PLEASE SEE SIMULATION RESOURCE CENTER (SRC) STUDENT MANUAL FOR SRC POLICIES.