Graham Hospital School of Nursing reserves the right to change any or all of the requirements, procedures, and policies published herein. Changes occurring after publication take precedence over handbook statements and will apply to present and new students. Changes will be communicated to current students through electronic or written notification.
AFFIRMATIVE ACTION STATEMENT

Equal opportunities are provided for all who apply regardless of race, color, age, religion, national origin, ancestry, physical or mental disability, sex, marital status, military status, pregnancy or sexual orientation. Section 503 and 504 of the Rehabilitation Act of 1973 protects all handicapped persons against discriminatory treatment. Graham Hospital School of Nursing does not discriminate in matters of race, color, age, religion, national origin, ancestry, physical or mental disability, sex, marital status, military status, pregnancy or sexual orientation in admission or access to, or treatment in its program or activities.
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GRAHAM HOSPITAL SCHOOL OF NURSING

HANDBOOK OBJECTIVES

1. This handbook supplements the official school catalog.

2. Curriculum information is included to appraise the student of the structure of the program.

3. Information on rules of conduct and program policies are included for review.

4. Faculty agreed upon standards for written work are included for review.

5. The Student Senate Rules and Regulations are included.
History of Graham Hospital School of Nursing

Graham Hospital and the School of Nursing are located in the southwest portion of Canton, Illinois, approximately three blocks from the downtown business district.

The original need for a hospital in Canton arose during an epidemic of typhoid fever in the winter of 1904 and 1905 when many residents became ill. A large house was leased on South Second Avenue to be used as a hospital, and was called the Canton Public Hospital. A lack of funds closed this hospital within a year. The area residents were without hospital facilities until October 4, 1909, when the original structure of the Graham Hospital, a gift of Misses Alice and Caroline Graham, was formally opened and dedicated to the public. The school also began operating at this time.

The original structure had approximately 30 beds, with 12 beds plus room areas used as living quarters for student nurses, the supervisor, and faculty members. Six students graduated in 1913, the first graduation ceremony of the Graham Hospital School of Nursing. The Graham Hospital School of Nursing was approved by the Illinois Department of Registration and Education on October 18, 1923, as a three-year diploma school. It has been accredited since 1968 by the National League for Nursing Accrediting Commission now known as Accreditation Commission for Education in Nursing.

Graham Hospital is the primary clinical facility utilized. Clinical experiences also occur in other area hospitals. Students participate in a variety of community agencies, which gives exposure to the increasing home health aspects of health care. Students attend Spoon River College, three miles southwest of the city, for the general education courses in the curriculum.

The philosophy and objectives of this hospital-based professional nursing program are implemented throughout the curriculum. All nursing courses are taught by the instructional staff of the home school. Spoon River College courses are taught concurrently with the School of Nursing courses.

All nursing courses include both classroom and clinical nursing experiences that allow students to apply knowledge gained in the classroom. Nursing courses build upon content from biological, physical, and psychosocial sciences.
Graham Hospital School of Nursing is accredited by the Accreditation Commission for Education in Nursing (ACEN). Information about accreditation can be obtained by contacting the ACEN using the following mailing address and/or phone number:

Accreditation Commission for Education in Nursing
3343 Peachtree Road N.E., Suite 850
Atlanta, GA 30326
1-404-975-5000

Graham Hospital School of Nursing is approved by the Illinois Department of Financial and Professional Regulation.
GRAHAM HOSPITAL
SCHOOL OF NURSING

MISSION STATEMENT

Graham Hospital School of Nursing will continuously achieve excellence in diploma nursing education.

Philosophy

Graham Hospital School of Nursing is a three-year diploma program that addresses the health care needs of the community by providing professional nursing education. The program provides comprehensive educational experiences that nurture growth in professional values, develops competencies in nursing, and prepares the graduate to contribute to a diverse society. The curriculum prepares the graduate to practice as a generalist independently or collaboratively with other health care providers.

Biological, physical, and psychosocial sciences are used to formulate nursing practice decisions. Nursing has a specialized body of knowledge and skills derived through research, supported by evidence, and delivered in an effective, efficient, and caring manner.

Nursing education provides the student with the opportunity to develop the knowledge and skills essential for beginning practice as a registered nurse in a variety of health care settings. Nursing contributes to the total health of populations by providing quality care to individuals, families, and groups as aggregates.

The nursing process is an analytical approach that guides nursing activities while individualizing care for client(s), families, and groups. Professional nursing is actualized through the roles of provider of care, communicator, teacher, professional member, leader, and client advocate. Nursing practice decisions incorporate legal, ethical, moral, and economic aspects to advance our communities’ health.

Health is a dynamic state of functioning in which there is continual adaptation to internal and external stressors. These stressors can be from the physical, psychological, social, environmental, and/or spiritual dimensions. Health status is reflected by the extent to which the individual, family, or group has reached certain levels of adaptation within a multidimensional state of wellness. Wellness is an adaptive state encompassing the maximum potential of the individual, regardless of their state of health. Illness is a maladaptation or a breakdown in the ability of the individual, family, or group to cope with stressors in the environment.

Nursing is a caring profession whereby judgments are utilized in a variety of settings to assist man to attain, maintain, or regain an optimum level of wellness. Man’s environment is both internal and external in nature and is understood as those interacting stressors that influence their state of health along the wellness-illness continuum. Man functions as a unified whole within the environment and communicates their needs through an interpersonal process. Man strives continuously to bring into balance those ever-changing environmental stressors. This inherent stress-adaptation process is an integral part of man’s existence.

Also in:
FH
SH
School Catalog
Man is a holistic, integrated being with inherent dignity and worth whose physical, cognitive, and psychosocial development progresses through the life cycle. Freedom of choice and self-determination are inherent rights and responsibilities of man. Nursing formulates decisions that recognize man’s basic needs as a bio-psychosocial-spiritual being.

Education is a life-long process of planned and peripheral learning experiences, which results in the acquisition of knowledge, skills, judgments and attitudes. Important aspects of this process include critical thinking, communication, and goal setting. The educators are facilitators of this process, assisting students to integrate theoretical knowledge and clinical experiences.

Learning is the emergence of new knowledge and/or patterns of behavior through active and dynamic interaction with the environment. Learning is affected by the individual's values, needs, previous knowledge, experience, and reinforcement. Learning is best accomplished in an environment that encourages free exchange of ideas and experiences between educators and students. The educators are responsible for guiding the student toward independent, safe nursing practice based on nursing process and creating an environment which allows for mutual personal growth, freedom of expression, dignity, and self-worth. The students are responsible for their own learning and, with guidance, evaluation of learning outcomes.
STUDENT HANDBOOK
GRAHAM HOSPITAL
SCHOOL OF NURSING

END-OF-PROGRAM STUDENT LEARNING OUTCOMES

Upon completion of the curriculum, the student will be able to:

1. Demonstrate professional values in relationship to self, profession, and society.

2. Analyze theoretical and empirical knowledge from the biological, physical, and psychosocial sciences and nursing as a basis for formulating nursing practice decisions.

3. Utilize the nursing process in a variety of settings to provide health care to individuals, families, and groups throughout the life cycle.

4. Use the roles of direct provider of care, manager, leader, teacher, communicator, client advocate, and professional team member to coordinate, facilitate, and improve the quality of health and the delivery of health care in a variety of settings.

5. Analyze theoretical knowledge relevant to human adaptation to assist individuals, families, and groups experiencing change on the wellness-illness continuum.

6. Evaluate the internal and external environment to promote the optimum wellness of man.

7. Formulate nursing practice decisions that recognize man's basic needs, inherent dignity, self-worth, holistic nature, and self-determination.

8. Use the process of critical thinking to enhance the acquisition of knowledge, skills, and attitudes.

Also in:
FH
SH
School Catalog

Revised: 9/91, 12/91, 4/92, 8/94, 5/17/04, 10/2/06, 10/3/11, 5/22/18
# GRAHAM HOSPITAL SCHOOL OF NURSING

## LEVEL OUTCOMES

### LEVEL I

**Nursing Roles:** Demonstrate professional behavior and relate professional values to beginning nursing practice.

**Body of Nursing Knowledge:** Identify principles and concepts from the biological, physical, and psychosocial sciences and nursing which are applicable to meeting the health care needs of the adult client.

**Nursing Process:** Utilize the nursing process while meeting the basic nursing care needs of the adult client.

**Nursing Roles:** Implement the role of provider of care, communicator, professional team member, and teacher in beginning nursing practice.

**Stress and Human Adaptation:** Implement concepts relevant to human adaptation to assist individuals experiencing change on the wellness/illness continuum.

**Environment:** Identify the effects of internal/external environment on the adult client.

**Man:** Relate man’s basic needs, inherent dignity, self-worth, holistic nature, and self-determination to beginning nursing practice.

**Learning:** Apply beginning critical thinking skills.

### LEVEL II

**Nursing Roles:** Incorporate professional values in nursing practice in a variety of health care settings.

**Body of Nursing Knowledge:** Analyze principles and concepts from the biological, physical, and psychosocial sciences and nursing to provide health care for individuals, families, and groups throughout the life cycle.

**Nursing Process:** Utilize the nursing process in a variety of settings to provide health care to individuals, families, and groups throughout the life cycle.

**Nursing Roles:** Incorporate the roles of provider of care, communicator, professional team member and teacher into the delivery of health care in a variety of settings.

**Stress and Human Adaptation:** Apply theories of human adaptation to assist individuals, families, and groups experiencing change on the wellness/illness continuum.

**Environment:** Analyze the effects of internal/external environmental stressors on the wellness of individuals, families, and groups.

**Man:** Promote man’s basic needs, inherent dignity, self-worth, holistic nature, and self-determination in the nursing plan of care.

**Learning:** Employ the process of critical thinking in a variety of clinical settings.

### LEVEL III

**Nursing Roles:** Demonstrate professional values in relationship to self, profession, and society.

**Body of Nursing Knowledge:** Analyze theoretical and empirical knowledge from the biological, physical, and psychosocial sciences and nursing as a basis for formulating nursing practice decisions.

**Nursing Process:** Utilize the nursing process in a variety of settings to provide health care to individuals, families, and groups throughout the life cycle.

**Nursing Roles:** Use the roles of direct provider of care, manager, leader, teacher, communicator, client advocate, and professional team member to coordinate, facilitate, and improve the quality and delivery of health care in a variety of settings.

**Stress and Human Adaptation:** Analyze theoretical knowledge relevant to human adaptation to assist individuals, families, and groups experiencing change on the wellness/illness continuum.

**Environment:** Evaluate the internal/external environment to promote the optimum wellness of man.

**Man:** Formulate nursing practice decisions that recognize man’s basic needs, inherent dignity, self-worth, holistic nature, and self-determination.

**Learning:** Use the process of critical thinking to enhance the acquisition of knowledge, skills, and attitudes.

Reviewed: 11/17/97, 5/18/15, 5/23/17
Revised: 5/24/95, 11/29/95, 5/17/04, 9/13/04, 10/3/11
Graham Hospital School of Nursing
Recommended Curriculum Plan

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<tr>
<td>SRC COURSE:</td>
<td>SRC COURSE:</td>
</tr>
<tr>
<td>COM 103</td>
<td>Speech Communications</td>
</tr>
</tbody>
</table>

**Courses are interchangeable and may be taken either 2nd Semester 2nd year or 1st Semester 3rd year.

TOTAL SRC Courses = 39 hrs.
TOTAL Nursing Courses = 50 hrs.
GENERAL CONDUCT

The Graham Hospital School of Nursing, which has been in operation since 1909, strives to uphold high ideals and standards of personal behavior and conduct. The school endeavors at all times to create a wholesome environment for the student body. Students who cannot conform to the pattern of wholesome living expected by the school will be asked to withdraw.

DISCIPLINARY ACTION

1. Disciplinary action may be taken for improper conduct and/or violation of School of Nursing rules and policies.
2. Disciplinary action to be taken may be either written or oral; however, a notice that action took place, date of action and the reason for the action shall be completed by your instructor or Director. Such notice shall be counter-signed by the student, a copy will be given to the student, and a copy will be placed in the student's file.

RULE INFRACTIONS WHICH MAY INCUR DISCIPLINARY ACTION PRIOR TO DISMISSAL

Include but are not limited to:
1. Unreported absenteeism, repeated tardiness and excessive absenteeism.
2. Failure to perform assigned tasks in a satisfactory manner.
3. Posting or removal of any matter on bulletin boards or hospital property at any time unless specifically authorized.
4. Leaving clinical prior to the end of assigned time.
5. Inattention to duties during assigned clinical time.
6. Leaving the clinical area without notifying the instructor during assigned clinical hours.
7. Arriving unprepared for clinical.
8. Creating or contributing to unsafe working conditions.
9. Use of tobacco products in restricted areas.
10. Sleeping during assigned clinical hours.
11. Disregard concerning personal appearance, uniforms, dress, or personal hygiene.
12. Failure to render a personal service to any patient if such service is within the normal and usual scope of the student's activities or is required by reasons of an emergency relating to the patient.
13. Indiscretionary public display of affection on hospital property or at school-related activities.
14. Violations of the School of Nursing Social Networking Policy and Civility Policy.
RULE INFRACTIONS WHICH MAY INCUR DISCIPLINARY ACTION WITH IMMEDIATE DISMISSAL

Include but are not limited to:

1. Willfully misusing, destroying, or damaging any hospital property or property of another person.
2. Entering the hospital in an intoxicated condition or bringing liquor and/or controlled substances on the premises.
3. Theft or unauthorized removal from the premises of hospital property or property of another person.
4. Fighting or attempting bodily injury to another person on hospital property including sexual assault.
5. Use of abusive or threatening language.
6. Behaviors which are outside the Code of Ethics for Professional Nurses.
7. Indiscriminate use of drugs.
8. Unauthorized possession, use, copying, or reading of hospital records, or disclosure of confidential information contained in such records to unauthorized persons.
9. Any willful act, or conduct detrimental to patient care, hospital, or School of Nursing operation.
10. Insubordination, refusal or intentional failure to perform work assigned.
11. Unauthorized possession of a weapon while on the hospital premises.
12. Disclosure of patients’ names and private information. (HIPAA)

Reviewed: 6/1/11, 7/1/12, 5/23/17, 7/1/19, 7/1/20
Revised: 1/29/07, 1/19/11, 7/1/14
GENERAL INFORMATION

Smoke-Free Policy

In accordance with the healthcare focus of Graham Hospital, the School of Nursing has a no-smoking policy. Graham Health System prohibits the use of tobacco products in any form (i.e., cigarettes, electronic/battery operated cigarettes (e-cigarettes), cigars, pipes, chewing tobacco, snuff, medical marijuana, etc) is prohibited on Graham Health System property, including land, buildings, parking lots, leased spaces, organization-owned vehicles, and privately-owned vehicles on health system property. Also included are sidewalks adjacent to health system buildings, parking lots, and parking lots and buildings leased by Graham Health System.

USE OF HOSPITAL VEHICLES

A hospital vehicle may be available for use by the School of Nursing during the academic year for group activities. This vehicle is reserved through the School Office. All students requesting to drive a hospital vehicle must show proof of a valid driver’s license, be a Graham Hospital employee, and have read the “Driver’s Handbook”. A copy of the handbook is in the glove compartment of each vehicle.

Utilization of a hospital vehicle is considered a privilege. IT IS THE RESPONSIBILITY OF EACH PERSON WHO UTILIZES THESE VEHICLES TO MAINTAIN THEIR UPKEEP. Those who use these vehicles for transportation purposes will be held accountable for the cleanliness of interior, i.e. wrappers, papers, etc. will be disposed of properly. Smoking is not allowed in hospital vehicles.

If a vehicle is needed on weekends or during evening hours but not previously reserved, the Plant Operator must contact the Director of Plant Services for scheduling approval.

Vehicles are located in the upper west parking lot next to the Wheel Storage garage. There are numbered parking spaces for each vehicle. Please return the vehicle to the same location when you have completed your travel.

Vehicles are to be ready for travel at the time they are picked up. Courtesy is expected by leaving the next driver a full tank of gas. Gas is to be charged to Graham Hospital at stations designated on the vehicle maintenance clipboard. Van/car keys and the vehicle maintenance clipboard may be obtained from the Switchboard and should be returned to the Switchboard. Gas tickets must be turned in with the keys. Gas tickets should include the license number of the vehicle, the odometer miles, your name, and your department name. Please report any vehicle problems on the vehicle maintenance clipboard. Damages to or malfunctions of the vehicle should be reported to Plant Services as soon as possible.

Any traffic violations which one incurs while driving these vehicles are the full responsibility of the driver.
Four Rules for Safe Refueling
1. Turn off engine.
2. Don’t smoke.
3. Don’t use your cell phone - leave it inside the vehicle or turn it off. Mobile phones can ignite fuel or fumes. Mobile phones that light up when switched on or when they ring release enough energy to provide a spark for ignition. Mobile phones should not be used in filling stations, or when fueling lawn mowers, boat, etc.
4. Don’t re-enter your vehicle during fueling.

PARKING

All employees and students are to park in the upper west parking lot on Maple Street or the upper south lot across Maple Street from the hospital. Please do not park in the lot adjacent to the hospital. The lower level lot, in its entirety, is reserved for patients, guests, and disabled persons entering Graham Hospital.

HOSPITAL VISITATION

Students may visit patients during regular visiting hours provided they wear street clothes. Students must adhere to all visiting rules.

SERVICES

Notary Public services are available in the hospital Administration department.

Graham Hospital allows students to purchase prescription and non-prescription drugs at cost from the hospital pharmacy.

An identification badge is issued to each student at the start of their freshman year. There will be a charge for replacement of the badge.

EMPLOYMENT

Work Study
See Coordinator of Admissions, Recruitment, and Financial Aid for federal work study positions such as Library Clerk or Skills Lab Assistant.

General Employment

The number of positions at Graham Hospital vary. Jobs are posted across from the cafeteria and are listed online at www.grahamhospital.org. An online application can also be completed or you can fill out an application at the Human Resources Department located on the ground floor of the hospital.

GRAHAM HOSPITAL

ACT

VISION

We are the Community’s choice for an exceptional healthcare experience.

VALUES

Innovation

We continuously improve our operations and environment by actively encouraging creative solutions.

Accountability

We accept responsibility and follow through to completion.

Communication

We openly share information in all directions in a timely manner.

Compassion

We exhibit empathy and care for each other.

Teamwork

We work together to achieve our common goals.

Also in:

FH
SH
STUDENT HANDBOOK

GRAHAM HOSPITAL SCHOOL OF NURSING
STUDENT DRESS CODE

The students of Graham Hospital School of Nursing contribute to the public image of the school through appropriate dress and appearance. The public’s impression of GHSON is largely formed from interaction with the students. The following dress code guidelines will assist the student in appearing well-groomed and professional in clinical and community agencies.

GENERAL GUIDELINES FOR INPATIENT CLINICAL ATTIRE

1. The uniform is not to be worn in public places unrelated to school activities unless granted special permission by the faculty. Students may wear the uniform to and from clinical and home.
2. Uniforms must be kept clean, neat, well-pressed, and in good condition at all times. Uniforms must fit properly. The hem of uniform pants should not touch the floor. Snug fitting uniforms are not appropriate. Only white professional-style lab coats or sweaters are to be worn with the uniform.
3. Certain clinical sites have specific dress requirements, for example in OB and Surgery, scrubs are provided by the institution. Clinical dress guidelines will be discussed at the beginning of each rotation.
4. When interviewing patients on the clinical unit or getting assignments, all students must be in complete uniform.
5. Lab coats are to be white, clean, and well-pressed at all times. Lab coat length may be mid or full-length as desired. Specialty units with length requirements will furnish coats for temporary use.
6. Name badges are to be worn on the front upper left shoulder of the uniform.
7. GHSON badges are to be worn on the left upper sleeve, four inches below the shoulder on the uniform and lab coat.
8. Gum chewing is not allowed while in uniform.

Female Students:

1. Female students are to wear full uniforms consisting of a white dress with sleeves, white uniform blouse with sleeves, and white skirt, split skirt, or pants. Dress and skirt length must extend at least one inch below the knee. A long-sleeve white tee-shirt-style shirt may be worn under the uniform top, but must not be visible below the uniform hem.
2. All white shoes must be made of impervious (incapable of being penetrated by moisture) material, be polished, and in good condition. Shoe strings must be white and clean. Clog-style shoes will be allowed if worn with a strap in place on the heel. No moccasin style shoes are allowed.
3. Run-free white hose should be worn with the skirt and dress uniform, or white socks may be worn with pants.
4. The uniform will be worn with a name badge and conservative wristwatch.
5. Gender specific white or skin-toned underwear (bras, slips, etc.) must be worn while in uniform. Thong-type underwear are not to be worn.

Male Students:

1. Male students are to wear white tunic tops with white pants. A white belt is to be worn with the uniform, as indicated by the style of the pant. A long-sleeve white tee-shirt-style shirt may be worn under the uniform top, but must not be visible below the uniform hem.
2. All white shoes must be made of impervious (incapable of being penetrated by moisture) material and in good condition. Shoe strings must be white and clean. Clog-style shoes will be allowed if worn with a strap in place on the heel. No moccasin style shoes are allowed.
3. White socks will be worn with the uniform.
4. The uniform will be worn with a name badge and conservative wristwatch.
5. Gender specific white or skin-toned underwear must be worn while in uniform. Thong-type underwear are not to be worn.
GUIDELINES FOR COMMUNITY AGENCY ATTIRE
1. Students are to wear white polo shirts with the GHSON logo and navy scrub pants.
2. Shoes should be conservative, clean leather or tennis shoes. Students should not wear sandals or high heels.
3. Hair should be well-groomed, and attire should be clean and neat at all times.
4. In some agencies, white lab coats will be required. Students will be notified at the beginning of the rotation if lab coats are required.
5. Name badges should be worn at all times.

GUIDELINES FOR SKILLS AND SIMULATION LABORATORY ATTIRE
Simulation activities and skills laboratory days are considered clinical activities. Some courses may require students to wear their clinical uniforms for these activities. Please check with your instructor regarding proper dress. Students who are completing the physical assessment portion of NUR 111 may be allowed to wear clothing in the laboratory that does not meet the guidelines for classroom attire, i.e. midriff tops, sleepwear, etc. This type of clothing should only be worn in the laboratory and not in other areas of the hospital.

GUIDELINES FOR GROOMING – INPATIENT AND COMMUNITY CLINICALS
1. Hair is to be neat and well-groomed at all times. Both male and female hair should be styled so that it does not extend below the top of the shoulder, and is off the face. Hair style should be symmetrical. Hair must not interfere with the performance of duties, or come in contact with patients or equipment. Hair color should be of a natural tone (blue, red, orange, pink, purple, etc. are not appropriate). Hair accessories that are white or blend with the hair color are permitted. Hair bows and other hair ornaments should not be worn.
2. Males may have well-trimmed mustaches, beards, and sideburns.
3. Fingernails are to be of a reasonable length, extending slightly past the tip of the finger (1/16 to 1/8), and well-manicured. Artificial nails and nail polish shall not be worn by students because of the infection risk.
4. Conservative makeup may be worn while in uniform. (Ask if you are in doubt.) Students are NOT allowed to wear scented products.
5. The only jewelry that may be worn with the uniform is a wristwatch, wedding set, earrings. Clinical site specifics in regards to jewelry will be given by the instructor.
6. The only visible piercings permitted are small earrings in the style of small posts (1/8 of an inch), or rings (1/2 inch in diameter) in gold, silver or white tone. Up to two earrings are permitted per lobe/ear. Students will be asked to remove other visible piercing. In accordance with the hospital dress code, plastic pieces worn in place of jewelry and band-aids worn to cover facial piercings will not be acceptable while on clinical. Tongue piercings must also be removed before reporting to clinical.
7. Tattoos should be covered at all times. No tattoos will be visible while on duty. All tattoos must be covered with skin tone bandages only. Colored bandages or colored materials are not acceptable. If visible through clothing, tattoos will need to be covered with skin tone bandages. Tattoos which may be exposed while performing your job duties must be covered as well. Any movement that exposes a tattoo is in violation of our Dress Code Policy. As an example, the tattoos in the small of the back, on the back or side of the neck, or on your wrist must be covered. The Health System is not responsible for supplying materials to cover employee tattoos.
GUIDELINES FOR CLASSROOM ATTIRE

Clothing must be in good condition, i.e. jeans that are not patched or tattered, pants/slacks, capris, skirts, gauchos, dresses, sweaters etc. No halter tops, tube tops, midriff tops, undershirts, see-through, sleepwear or other immodest clothing are allowed. Shorts which are reasonable in length and fit appropriately may be worn. Shoes should be in good repair. See specific course syllabus for guidelines regarding hats and sunglasses.

GUIDELINES FOR PROFESSIONAL ATTIRE FOR SCHOOL FUNCTIONS

School functions include the Professional Issues Luncheon and other faculty-designated functions. The length of all attire may be no higher than 3” above the knee. No midriff tops. No low-cut tops, blouses, or dresses may be worn. Leggings may be worn as long as the top covers the skin with all movement.

Final discretion as to appropriate attire in all settings rests with the individual faculty member.
GUIDELINES FOR USE OF BULLETIN BOARDS

Bulletin boards are a tool for communication and individual boards within the school have been designated for specific purposes. Date materials to be posted.

<table>
<thead>
<tr>
<th>Bulletin Board</th>
<th>Person Responsible</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>3rd Floor Hall (Between 363 &amp; 364)</td>
<td>School Office Manager</td>
<td>Student Senate – Activities, Meetings, Minutes, Student of the Month, etc.</td>
</tr>
<tr>
<td>3rd Floor Hall (Between 363 &amp; 364)</td>
<td>Director and/or School Office Manager</td>
<td>Career Opportunities</td>
</tr>
<tr>
<td>Mailbox 3rd Floor</td>
<td>School Office Manager</td>
<td>Student information</td>
</tr>
<tr>
<td>3rd Floor Hall (Across from 367)</td>
<td>School Office Manager</td>
<td>Hospital and school information announcements coordinated by the Director's Office and the School Office Manager.</td>
</tr>
<tr>
<td>3rd Floor Hall (Between 361 &amp; 362)</td>
<td>NUR 210 &amp; 310 instructors</td>
<td>Class information</td>
</tr>
<tr>
<td>Wall next to Financial Aid Office</td>
<td>Coordinator of Admissions, Recruitment, and Financial Aid</td>
<td>Financial aid information</td>
</tr>
<tr>
<td>4th Floor Hall</td>
<td>Class Advisor</td>
<td>Post information specific to each class. Meetings, Minutes, announcements, activities, etc.</td>
</tr>
<tr>
<td>FRESHMEN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>JUNIORS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SENIORS</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Developed: 5/91  
Reviewed: 5/92, 6/26/15, 6/16/17, 6/9/20  
Revised: 5/23/96, 3/2/98, 2/1/99, 6/26/00, 6/30/03, 5/30/07, 6/1/11, 7/1/12, 5/28/19
STANDARDS FOR WRITTEN WORK

STANDARDS FOR WRITTEN WORK define form and organization of written work including daily class assignments, term or research papers, nursing care plans, and other written assignments.

The faculty will utilize the following criteria for evaluation:

1. All assignments must show appropriate depth of understanding.
2. All written work must be neat and legible.
3. All work must be turned in by the assignment due date.
4. Clear concise ideas must be expressed in complete sentences with appropriate grammar, spelling, and punctuation.
5. Standard white paper, 8⅝ x 11 inches, must be used for formal written work unless otherwise specified by instructor. Informal assignments will be done on paper or forms according to instructor's directions.
6. Any ideas or thoughts must be accurate and properly documented if not the student's original idea or thought. Plagiarism will not be tolerated and may result in disciplinary action.
7. Assignments will be referenced and formatted according to the current APA format.
8. Written assignments with assigned points will be evaluated using a distributed (written/electronic) rubric/grading criteria.

Reviewed: 5/90, 5/92, 5/23/96, 6/1/11, 7/1/12, 7/1/15, 4/8/19
Revised: 5/24/99, 5/30/13, 11/14/16, 5/27/20
GRAHAM HOSPITAL
HARASSMENT POLICY

(Also in Campus Safety Report)

School of Nursing employees follow the Graham Hospital policy in the Employee Handbook located in the Policy Manager. The Harassment Policy related to students is located in the Student Handbook.

Definition of Sexual Harassment

According to the Illinois Human Rights Act, sexual harassment is defined as:

Any unwelcome sexual *advances* or *request* for sexual favors or any conduct of a sexual nature when
- submissions to such conduct is made either explicitly or implicitly, a term or condition of an individual's student status, or
- submission to or rejection of such conduct by an individual is used as the basis for student status decisions affecting such individual, or
- such conduct has the purpose or effect of substantially interfering with an individual's work or school performance or
- creating an immediate, hostile, or offensive working or educational environment.

The courts have determined that sexual harassment is a form of discrimination under the Title VII of the U.S. Civil Rights Act of 1964, as amended in 1991.

Conduct commonly considered to be sexual harassment includes:

- **Verbal:** Sexual innuendoes, suggestive comments, insults, humor and jokes about sex, anatomy or gender-specific traits, sexual propositions, threats, repeated requests for dates, or statements about students, even outside of their presence, of a sexual nature.

- **Non-Verbal:** Suggestive or insulting sounds "whistling", leering, obscene gestures, sexually suggestive bodily gestures, "catcalls", "smacking" or "kissing" noises.

- **Visual:** Posters, signs, pin-ups, slogans of a sexual nature, or sexually explicit material on computer screens obtained from internal or external software or the internet.

- **Physical:** Touching, unwelcome hugging or kissing, pinching, brushing the body, coerced sexual act, or actual assault.
Sexual harassment most frequently involves a man harassing a woman. However, it can also involve a woman harassing a man or harassment between members of the same gender. It also can involve harassing conduct by non-students who may be on the hospital's premises.

Specifically, Graham Hospital School of Nursing students must address an observed incident of sexual harassment or complaint, with seriousness, take prompt action to report the incident in detail either to their instructor, advisor, or the Director of the school. In cases of sexual assault, the student (victim) should notify Security and they will notify the police or the student may notify the police department themselves.

**Sexual Assault Policy**

For the purpose of this policy, sexual assault is defined as attempted or actual unwanted sexual activity including forcible and non-forcible sex offenses which occur on campus. Such conduct is prohibited by the School of Nursing and a violation is subject to disciplinary action. Information on sex offenders can be found at [http://www.isp.state.il.us/sor](http://www.isp.state.il.us/sor).

The Director of the School of Nursing will implement appropriate disciplinary action to bring the incident to an end. Confidentiality to the fullest extent allowed by law will be maintained by all persons involved. This action shall also apply when a student informs an employee or student of behavior considered sexual harassment but does not want to make a formal complaint. Graham Hospital School of Nursing will ensure that no retaliation will result against a student making a sexual harassment complaint. The accuser and the accused are entitled to the same opportunities to have others present during a disciplinary proceeding. Both will be informed of outcome of the disciplinary proceeding.

**Definition of Gender Harassment**

Gender harassment can be different than sexual harassment and consists of belittling remarks against a specific gender, female or male. Examples of gender-based harassment involving students would include:
- comments made regarding the assignment of male students to female patients or vice versa.
- comments or actions which infer male students are not as proficient as female students.

**Race, Religion, Age, and Disability Harassment**

This policy shall also cover harassment based on religion, sex, age, race, sexual orientation, gender identification, national origin, ancestry, or disability. Any comments or actions made to other students or school employees that is demeaning in nature and based upon the student’s religion, sex, age, race, sexual orientation, gender identification, national origin, ancestry, or disability shall be considered harassing, subject to the procedures of this policy.

**Procedures for Filing a Formal Complaint**

A student who either observes or believes he/she to be the object of harassment should deal with the incident as directly and firmly as possible by clearly communicating his/her position to his/her instructor and the offending individual(s). It is not necessary for harassment to be directed at the person making a complaint. The following procedures are generally followed when a harassment complaint is made:

1. **Investigation** - upon receiving a report of harassment, the Director will begin an investigation which normally lasts around ten (10) academic days. After the ten (10) day investigation period, a written response will be given to the student who is the object of the harassment, advising him or her of the results of the investigation and what discipline, if any, is to be issued to the alleged defender. Where there has been injury to the complainant, the complaint will be advised on what action the School intends to take. If the student is unsatisfied with the action taken by the Director, then he or she may
appeal directly to the Non-Academic Grievance Procedure provided in the Student Handbook. The decision of the Non-Academic Grievance Committee will be final and binding. Investigations will include, but not be limited to, the interviewing of witnesses and taking of written statements detailing the charges made, all of which will be done immediately after the information is received from the complaining student. It is the policy of this School to investigate completely, uniformly and without discrimination in any manner, all complaints involving harassment of the nature described herein. The length and manner of the investigation will be dictated on a case-by-case basis by the seriousness of the incident. No complaint will go uninvestigated and each situation will be treated and handled as expeditiously as possible.

2. **Counseling** - Where necessary, the Director will assist students in locating counseling which may be given on a confidential basis to students to help them with any problems associated with the harassment.

3. **Retribution or Retaliation** - Graham Hospital School of Nursing will not condone nor permit any retaliation or retribution for complaints made by individuals who believe they have been sexually harassed. During follow-up inquiries made by the Director or her designee, specific inquiries will be made with each complaining student in this regard. If a student believes that they are being retaliated against for making the complaint of alleged sexual harassment, then they are encouraged to inform their instructor, advisor, or the Director of the school. **Incidents of retaliation may result in dismissal from the School.**

**The Process for Making a Harassment Complaint Fall into Two Categories**

1. **Direct Communication** - If there is harassing behavior in the School or Hospital, the harassed student should directly and clearly express his/her objection that the conduct is unwelcome and request the offending behavior stop immediately. The initial message may be verbal. If subsequent messages are necessary, they should be put in writing either in the form of a note or a memo. When complaints are made to School of Nursing employees, they will be required to report the complaint to the Director, unless he/she is the harasser, in which case it should be reported to the Director of Human Resources.

2. **Indirect communication or informal complaints** - students not wishing to file a formal complaint should report harassment to their instructor or advisor. The instructor or advisor should investigate the alleged incident and report it to the Director of the School. The alleged offender will receive a written warning regarding the harassment complaint from the Director. Confidentiality will be maintained. If harassment continues after the warning, the victim should make a formal complaint.

   An employee or student who has been physically harassed or threatened while on the job or at school may also have grounds for criminal charges of assault and battery.

**False or Frivolous Complaints or Charges**

False or frivolous complaints or charges refer to cases where the accuser is using a harassment complaint or charge to accomplish some end other than stopping harassment. It does not refer to:

- charges made in good faith which cannot be proven. Given the seriousness of the consequences for the accused, a false or frivolous charge will be considered a severe offense that will result in disciplinary action.
Graham Hospital
Safety Information

Unsafe Act, Condition, or Security Incident (CSR, SH, FH)
(Policy Manager/Environment of Care/Safety Management/Unsafe Act or Condition)

An unsafe act or condition is: where the acts of the staff, students, visitors or the conditions of the equipment or facility could result in a personal injury or damage to the organization’s property or both.

A security incident is: any theft or vandalism to an employee’s, visitor’s or student’s personal property or to health system property. The Clarity Portal can be used to document workplace violence and other suspicious behavior. Security should be called.

An Unsafe Act/Condition Report or Security Incident Report should be filled out on the Clarity Portal located on the computer desktop. The report should be filled out by the person(s) most directly involved or who observed the situation. School or hospital personnel can help you complete the report using the Clarity Portal. The occurrence investigation should be initiated during the same shift and completed within 24 hours. The reports should be reviewed by the Director of the school.

Reports should be forwarded to the Safety Officer within 24 hours and acted upon in a timely manner.

Unsafe acts or conditions will be reviewed by the Environment of Care Committee.

Hospital Occurrence Report (Campus Safety Report, SH, FH)

Within Graham Health System an occurrence shall be defined as any happening which is not consistent with the routine care of a patient or the routine operation of the facility. This includes lost, broken or malfunctioning property and accidents involving a patient or visitor.

To report patient care improvement or visitor incident, use the Clarity Portal icon located on hospital and School of Nursing computers. The report is to be initiated by the department in which the occurrence took place by the employee or employees involved. All pertinent information should be completed. Occurrences involving patients and visitors are reported to the Risk Manager. Instructors, staff members, or the Director will assist you in completing the required information.

Injury Report (Campus Safety Report, SH, FH)

Injuries to students and employees should be reported. A witness statement must be filled out if there is a witness to the incident. Have the hospital switchboard page Security and they will come to the accident site with a packet and a camera to take pictures of where the incident occurred and assist with transport to the Emergency Department. If the student does not choose to go to the ED, it is not necessary for the ED physician to sign. The Clarity Portal must be used to report injuries. School of Nursing staff can help you fill out the report. There is a place on the form to circle the type of accident. The packet must be returned to your supervisor/instructor or Director of the School of Nursing. The Director is responsible for reviewing all reports submitted on the Clarity Portal and for returning the packet to the Nursing Administration within 24 hours.
PLANT SERVICES SECURITY (Campus Safety Report, SH, FH)

Security services are provided twenty-four hours each day, seven days a week. Security staff will respond to all requests for assistance by the hospital staff, students, visitors, and guests where suspected violations of security to people or the facility are indicated.

A security incident is any theft, vandalism or attack on an employee, student or visitor or their personal property or on health system property. A Security Incident Report form should be used to document any security incident, workplace violence or other suspicious behaviors.

In the event of a security incident the person needing security support or observing a possible security issue should call the switchboard operator who will page security. The security officer on duty will respond as quickly as possible. The security officer may call on Environmental Services or Plant Operations for additional support.

The staff member or student involved with a security incident or who supported a visitor with a security incident should complete a report in the Clarity Safety Zone Portal (on the employee portal) and send it to the Security supervisor. The Security supervisor will review and forward the report to the Director of Plant Services. These reports are reviewed at Environment of Care Committee meetings as well.

In the event there is a violent crime reported, the security person on duty will call the local police department. The local police will take whatever corrective or procedural action is required by law. The security person on duty will assist in any way requested by the police and will fill out a complete report for the Graham Hospital Environment of Care Committee and the security supervisor.

- Violent crimes include but are not limited to:
  Workplace violence
  Liquor Law Violations
  Drug-Related Violations
  Weapons Violations
  Rape and attempted rape
  Robbery and attempted robbery
  Murder and attempted murder
  Violence against women
  • Dating violence
  • Domestic violence
  • Stalking
  Hate crimes

Access to Graham Hospital after 8:00 p.m.
The hospital lobby entrance doors will be locked at 8:00 p.m. Staff and students that enter the hospital after 8:00 must enter through the Emergency Department. All staff or students that are not wearing an employee badge must be escorted to their destination by a security officer or their designee.
SAFETY POLICY (SH & FH)

A. Safety Policy Statement
   (POLICY MANAGER/EMPLOYEE HANDBOOK)
   Safety is an essential part of the Graham Health System’s service. All Graham Health System personnel have a primary responsibility for the safety, health, and well-being of all patients, visitors, staff, and students.

   This responsibility can be met only if we work together continuously to promote safe work practices, observe all rules and regulations concerning safety and maintain property and equipment in a safe working condition.

   This safety program at Graham Health System is overseen by the Safety Officer who is appointed by the President and approved by the Medical Staff and the Board of Trustees. The Safety Officer is a member of the Environment of Care Committee, which meets every other month. The Safety Officer receives reports of and analyzes all accidents and recommends appropriate measures for corrective action and reports these recommendations to the President.

   Rules and regulations concerning safety in this Student Handbook will be enforced by the Director of the school, faculty, and staff.

B. Environment of Care

   The Environment of Care Committee membership represents Administration, Clinical Services, and Support Services. The committee meets every other month to review and take appropriate action on all Environment of Care related issues. The committee receives reports that are established to cover all the plans of the Environment of Care as well as specific safety related aspects. The Environment of Care Manual contains safety guidelines that apply to all staff. Tell your instructor about unsafe conditions or procedures so that they may be reported to the committee.

C. Reporting Accidents (Also see INJURY REPORT on page 22).

   1. Make every effort to prevent any injury to yourself, patients, doctors, visitors, your fellow employees, and students.
   2. If you are involved in an accident, however minor it may seem, you must report it immediately to hospital Security. Have the hospital switchboard page Security and they will come to the accident site with a packet and a camera to take pictures of where the incident occurred and assist with transport to the Emergency Department.
   3. Security will assist you to the Emergency Department, if needed. It is your responsibility to report any accident immediately. DON’T WAIT. It is your decision whether or not to go to the Emergency Room.
   4. Your instructor, staff member, or the Director of the school will assist you in completing the "Employee Event Form” on the Clarity Portal. Every desktop computer has a Clarity Icon in the School of Nursing.
   5. Failure to report within 72 hours may result in a refusal by the Graham Health System’s insurance carrier to recognize the accident as a work-related injury. (This refers to employees, not students).
CONCEALED FIREARMS POLICY (Campus Safety Report, SH, FH) (POLICY MANAGER/SECURITY)

Definition:
Concealed firearm: a loaded or unloaded firearm carried on or about a person completely or mostly concealed from view of the public or on or about a person within a vehicle.

Concealed firearms are not allowed on or in any Graham Health System building, Graham vehicles (whether owned or leased), or parking area controlled by Graham Health System (unless the firearm is stored within a person’s vehicle in the manner stated in the Concealed Firearms Policy located in the Policy Manager/Browse Manuals/Security/Concealed Firearms).

Substance Abuse and Mental Acuity (SH & FH)

To protect the interests of our employees and patients, we are committed to an alcohol and drug-free work environment. All colleagues must report for work free of the influence of alcohol and illegal drugs. Reporting to work under the influence of any illegal drug or alcohol, having an illegal drug in your system, or using, possessing, or selling illegal drugs while on work time or property may result in immediate termination. We may use drug testing as a means of enforcing this policy.

It is also recognized that individuals may be taking prescription drugs, which could impair judgment or other skills required in job performance. If you have questions about the effect of such medication on your performance, consult with your supervisor.

FIRE PLAN (Campus safety Report, SH, FH)

"PLAN OF ACTION IN CASE OF FIRE"

FIRE DRILLS:
Fire drills will be held unannounced, on all shifts each quarter. During fire drills, all personnel will follow full fire plan procedures except that patients will not be evacuated unless simulated patients have been provided for this purpose and the evacuation has been properly ordered. As the fire drills will be unannounced before-hand, personnel should always assume a fire is actually present and proceed accordingly. Measures must be taken to ensure that patients and visitors are not unduly alarmed.

If you discover a fire, GO IMMEDIATELY TO THE NEAREST FIRE ALARM BOX AND ACTIVATE THE SAME. If the fire alarm system isn’t operating or you cannot reach an alarm box pull station, call 4444 to report the fire. The hospital operator will call 911 and then notify Plant Operations, Security, and the Administrator on call. The Director of the school of nursing should be notified of all fires that have occurred in the student dormitory.

DO NOT SHOUT "FIRE". Report the fire to those in your area in a quiet and calm manner. Obtain the nearest extinguisher and attempt to put out the fire. If the fire is in a small room, ask someone to stay in the hallway while you fight the fire, to direct maintenance personnel and firemen who will be arriving with other equipment.
DO NOT start evacuation of other residents unless they are in immediate danger, until evacuation is authorized by one of the following: President, Administrator on Call, House Supervisor, Hospital Fire Marshal or Fire Department personnel. Wait for the All Clear.

GENERAL ACTION BY ALL DEPARTMENTS
1. Keep calm.
2. Do not shout "FIRE".
3. Do not use elevators unless authorized to do so.
4. Confine the fire by closing all doors and windows.
5. Terminate immediately all telephone conversations. Telephones will be needed for emergency use and you will need to be aware of changing information as it comes in.
6. Assign someone to the telephone to receive and relay emergency instructions.
7. Turn on all ceiling lights.
8. Reassure visitors, clients, residents and patients and let them know what is happening.

FACULTY/STAFF - Faculty and staff, excluding library personnel, in the school assemble in the School of Nursing office. Library personnel will remain in the library.

STUDENTS
On Clinical - Remain at your station with faculty and follow instructions given by the Head Nurse.
The RACE rule is the most efficient manner to react in a fire. It stands for:
   R - Rescue patients
   A - Sound the Alarm
   C - Confine the fire
   E - Extinguish the fire

Off Clinical - Assemble in library and await instructions. Head count conducted by library staff and reported to Director or designee.

After school hours, dorm residents should assemble in the TV lounge of their floor. See Residence Hall rules.

Revised: 9/17/12, 6/25/14, 1/20/15, 6/25/15, 6/26/16, 6/16/17, 6/12/18, 9/13/18, 6/25/19, 7/6/20

Also in SH & FH
MISSING STUDENT POLICY

A student will be considered missing if a roommate, classmate, faculty member, friend, or other member of the campus community has not seen the person for a reasonable amount of time. A reasonable amount of time may vary with the time of day and information available regarding the missing person’s daily schedule, habits, punctuality, and reliability. Most missing person reports in the college environment are the result of a student changing his/her routine without informing roommate(s), family and/or friends of the change.

Individuals will be considered missing immediately if the absence has occurred under circumstances that are suspicious or cause concerns for the student’s safety. If the initial report that a person is missing is made to a Graham Hospital department other than the School of Nursing, the person receiving the report shall ensure that the School of Nursing Director is contacted immediately.

In the event another student or employee believes a student who resides on campus is missing, the School of Nursing Director or Office Manager should be contacted as soon as possible. If the student lives off campus, the local law enforcement agency should be contacted.

Procedures

At the beginning of each academic year, residential students will be asked to voluntarily provide emergency contact information. This emergency information will be maintained by the School of Nursing office, updated annually. Confidential contact information will be accessible only to authorized campus officials, and it will not be disclosed, except to law enforcement personnel in furtherance of a missing person investigation. Upon notification from any entity that a student may be missing, school officials may use any of the following procedures or resources to assist in locating the student.

1. Call the student’s room.
2. Conduct a safety check of the student’s room.
3. Talk to the student’s roommate and floor mates to see if anyone can confirm the missing student’s whereabouts and/or confirm the date, time, and location the student was last seen.
4. Call and text the student’s cell phone and/or e-mail the student.
5. Check all possible locations mentioned by parties above.
6. Check social networking sites.
7. Ascertain student’s car make and license plate. Graham Hospital Security will check parking lots.
8. Technology staff may be asked to obtain e-mail logs or access logs to the Graham Hospital computer system.

The student’s emergency contacts will be notified if the student has not been located after utilizing the above resources.

Note: Students under the age of 18 are advised that a custodial parent or guardian will also be notified within twenty-four hours of determination that student is missing.

Adopted: 6/30/11
Revised: 9/17/12
Reviewed: 7/1/15, 7/3/17, 6/9/20

(Also in Campus Safety Report, FH, SH as a policy and in the Residence Hall Policy)
# Student Emergency Contact & Vehicle Identification Information

## Student Name

<table>
<thead>
<tr>
<th>STUDENT</th>
<th>DORM</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME</td>
<td>CLASS</td>
</tr>
<tr>
<td>STUDENT: _____ YES _____ NO</td>
<td></td>
</tr>
</tbody>
</table>

## Emergency Contact Information

In case of emergency, who would you like us to contact?

<table>
<thead>
<tr>
<th>NAME</th>
<th>RELATIONSHIP</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>PHONE NUMBER</th>
<th>PHONE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>CELL:</td>
<td>OTHER:</td>
</tr>
</tbody>
</table>

## Vehicle Identification

If you drive more than one vehicle to school, please list information below for each vehicle.

<table>
<thead>
<tr>
<th>VEHICLE MAKE:</th>
<th>MODEL OR YEAR:</th>
<th>COLOR:</th>
<th>LICENSE NUMBER:</th>
</tr>
</thead>
<tbody>
<tr>
<td>VEHICLE MAKE:</td>
<td>MODEL OR YEAR:</td>
<td>COLOR:</td>
<td>LICENSE NUMBER:</td>
</tr>
<tr>
<td>VEHICLE MAKE:</td>
<td>MODEL OR YEAR:</td>
<td>COLOR:</td>
<td>LICENSE NUMBER:</td>
</tr>
</tbody>
</table>

Approved: 5/28/19
POLICY

It is the policy of this facility to use overhead paging to announce the implementation of the following codes: Code Black Tornado Warning, Code Yellow, Code Pink, Code Blue, Code Teddy, Code RRT, Code Purple, Code Triage and the All Clear for a code (including a Code Red).

At this time, these codes are the only approved usage of the overhead paging system.

OVERVIEW OF INTERNAL AND EXTERNAL CODES

<table>
<thead>
<tr>
<th>ALERT</th>
<th>MEANING</th>
</tr>
</thead>
<tbody>
<tr>
<td>Code 911</td>
<td>Active Shooter</td>
</tr>
<tr>
<td>Code Red</td>
<td>Fire</td>
</tr>
<tr>
<td>Code Green</td>
<td>Decon Team – Contaminated patient arriving or already on grounds</td>
</tr>
<tr>
<td>Code Spill</td>
<td>Chemical Spill</td>
</tr>
<tr>
<td>Code Yellow</td>
<td>Patient Elopement</td>
</tr>
<tr>
<td>Code White</td>
<td>Hospital Evacuation</td>
</tr>
<tr>
<td>Code Teddy</td>
<td>Medical Pediatrics</td>
</tr>
<tr>
<td>Dr. Armstrong</td>
<td>Disorderly patient or visitor</td>
</tr>
<tr>
<td>Code Blue</td>
<td>Medical</td>
</tr>
<tr>
<td>Code Pink</td>
<td>Infant/Pediatric Abduction</td>
</tr>
<tr>
<td>Code Power</td>
<td>Utility/Computer system failure</td>
</tr>
<tr>
<td>Code Purple</td>
<td>OB Rapid Response Team</td>
</tr>
<tr>
<td>Code Gray</td>
<td>Bomb Threat</td>
</tr>
<tr>
<td>Code Triage</td>
<td>Disaster/Mass Casualty Incident</td>
</tr>
<tr>
<td>Code Black</td>
<td>Weather Warning</td>
</tr>
<tr>
<td>Code RRT</td>
<td>Rapid Response Team</td>
</tr>
<tr>
<td>Code Zebra</td>
<td>Bioterrorism</td>
</tr>
</tbody>
</table>

See Policy Manager for most recent version

Also in:
- Campus Safety Report
- Faculty Handbook
- Student Handbook

- 29 -
Policy Title: Code 911 – Active Shooter (Campus Safety Report pg. 15-17, SH pg. 37-39)

Version Date: 4/19

I. OBJECTIVE: To assist employees and students in responding to an active shooter event.

II. DEFINITIONS:

   A. Active Shooter - An active shooter is defined as "... an individual actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, active shooters use firearm(s) and there is no pattern or method to their selection of victims.

III. POLICY:

   In order to preserve life and address the reality of an active shooter event, these guidelines have been established to guide our response to this event to maximize survivability. Most importantly, quickly determine the most reasonable way to protect your own life.

IV. PROCEDURES:

   A. The intent of most active shooters is to kill as many people as quickly as possible. Traditional law enforcement response will include the concept of “surround and contain” in order to minimize the number of victims. In order to save lives, the law enforcement agency having jurisdiction will initiate an immediate response.

   B. Upon discovery of an active shooter situation, as soon as possible and when safe to do so, notify law enforcement (911) and provide overhead announcement of a “Code 911” and location.

      1. The phone call to 911 (from the area where they are safely concealed) should provide the following information:

         a. Description of suspect and possible location.
         b. Number and types of weapons.
         c. Suspect’s direction of travel.
         d. Location and condition of any victims

   C. Security Officers and/or the Administrator/Person in Charge will meet and guide law enforcement officers if possible and as appropriate. The goal of law enforcement is to locate, isolate, and neutralize the shooter as quickly as possible to prevent additional deaths or injuries.
D. **Response:**

**Evacuate** - If there is an accessible escape path, attempt to evacuate the premises.

Be sure to:
- Have an escape route and plan in mind
- Evacuate regardless of whether others agree to follow
- Leave your belongings behind
- Help others escape, if possible
- Prevent individuals from entering an area where the active shooter may be
- Keep your hands visible
- Follow the instructions of any police officers
- Do not attempt to move wounded people
- Call 911 when you are safe

**Hide out** - If evacuation is not possible, find a place to hide where the active shooter is less likely.
- Direct personnel into resident rooms or other adjacent rooms, close the door and attempt to barricade the door.

Your hiding place should:
- Be out of the active shooter’s view
- Provide protection if shots are fired in your direction (i.e., locating into a resident bathroom and locking the door, stay as low to floor as possible and remain quiet and still)
- Not trap you or restrict your options for movement

To prevent an active shooter from entering your hiding place:
- Lock the door
- Blockade the door with heavy furniture

If the active shooter is nearby:
- Lock the door
- Silence your cell phone and/or pager
- Turn off any source of noise (i.e., radios, televisions)
- Hide behind large items (i.e., cabinets, desks)
- Remain quiet

If evacuation and hiding out are not possible:
- Remain calm
- Dial 911, if possible, to alert police to the active shooter’s location
- If you cannot speak, leave the line open and allow the dispatcher to listen
Take action against the active shooter - As a last resort, and only when your life is in imminent danger, attempt to:

- Disrupt and/or incapacitate the active shooter by:
  - Acting as aggressively as possible against him/her
  - Throwing items and improvising weapons
  - Yelling
  - Committing to your actions.

E. An “all clear” Code 911 will be announced overhead when the situation has been addressed and the scene is declared safe by law enforcement officials.

F. **School of Nursing personnel and students should follow the Active Shooter Policy stated above.**

- **Get OUT!** Depending on the location of the shooter given by the switchboard operator, you should evacuate the building. The regular School of Nursing evacuation route is down the stairs by the front doors.

**If unable to evacuate:**

- **Hide out** – Lock the door to your location, if possible, or go to areas such as offices, dorm rooms, library, small classrooms that have doors that lock from the inside.

Students on Clinical – follow directions of instructor and/or staff member in charge.

G. **Recovery:**

**Share Information with Employees/Students** – The health and wellbeing of our patients, visitors, employees, and students is critical. As soon as possible after law enforcement has relinquished command and control of the scene, the facility Incident Management Team (IMT) will develop information strategies to address patient, employee, student, and family questions related to the event.

Initially, the site of a violent incident will be secured as a crime scene. After the authorities have completed their investigation and have released the crime scene, Administration will need to have the facility appropriately cleaned and sanitized. Cleanup for the safe removal of bio-hazardous substances including blood-borne pathogens must take place, yet must be sensitive compassionate, and caring for the deceased.

**Buffer those Affected from Post-Event Stresses** – Effective coordination with the media and timely dissemination of information can help reduce media pressure on those who are the most vulnerable. Employees should not speak to the media or answer questions; all requests for information should be directed to Administration or a Public Information Officer are authorized to speak on behalf of the facility to the media.

**Bring in Crisis Response Professionals** – Trained mental health professionals will be made available and will as soon as possible, provide any necessary physical, emotional and psychological support. See **Emergency Mental Health Needs** in the Emergency Operations Plan for additional information.
Title: Overhead Paging of Codes – Scripts

Department: Environment of Care

Original Date: 2/05

Review Dates: 7/11, 1/12, 2/13, 1/14, 4/19, 1/20

Revision Dates: 8/08, 2/09, 4/09, 5/10, 5/13, 2/15, 10/17

APPROVED BY: Director of Plant Services

Date: 1/20

CODE YELLOW RESPONSE – Patient Elopement – Live Message (Also in Campus Safety Report, FH, & SH)

“May I have your attention please, Code Yellow, (insert number indicating the patient’s age, male or female and brief description.)”

Example: “May I have your attention please, Code Yellow 78-year-old male in a plaid shirt, Code Yellow 78-year-old male in a plaid shirt, Code Yellow 78-year-old male in a plaid shirt.”

Students should continue their regular activities and report any sighting of the patient to staff.

CODE PINK RESPONSE – Infant/Pediatric Abduction – Live Message (Also in Campus Safety Report, FH, & SH)

“May I have your attention please, Code Pink, (insert patient’s age, male or female and a brief description. If available, give description of the abductor.)”

Example: “May I have your attention please, Code Pink 2-year-old female with man in tan jacket, Code Pink 2-year-old female with man in tan jacket, Code Pink 2-year-old female with man in tan jacket.”

Students should continue their regular activities and report any sighting of the patient to staff.

THUNDERSTORM WARNING OR TORNADO Watch - (Also in FH & SH) (POLICY MANAGER/EMERGENCYMANAGEMENT/CODES/CODE BLACK – 4/19)

1. The hospital ED registrar will receive the details of the severe weather warning from the weather radio or Fulton County ESDA.

2. The hospital ED registrar will note the type of weather message received and the time the warning/watch is expected to expire and contact the House Supervisor.

CODE BLACK RESPONSE – TORNADO WARNING - (Also in Campus Safety Report, FH, & SH) (POLICY MANAGER/EMERGENCYMANAGEMENT/CODES/CODE BLACK – 4/19)

1. The hospital ED registrar will receive the details of the tornado warning from the weather radio or ESDA and will notify the House Supervisor of the warning.

2. The hospital ED registrar will note the type of weather message received, the time the warning is expected to expire and will activate the Code Black. The ED registrar will announce the Code Black via overhead paging in the format below. Only the statement listed below should be announced.

   “May I have your attention please, Code Black, a tornado warning is in effect until ______.” Please make sure radios are on Channel 1 and begin implementing department specific procedures.

3. The announcement above will then be made over the two-way radios.

CODE TRIAGE – DISASTER PLAN RESPONSE - (Also in Campus Safety Report, FH, & SH)

PROCEDURE TO BE FOLLOWED IN THE EVENT OF A DISASTER

The Code Triage message will be broadcast via the overhead paging system. Upon notification, the faculty who are not on clinical will report to the School of Nursing Office.

Instructors on duty in the clinical area (nursing units, OR, OB) should remain in the clinical area with the students assigned to that area. Instructors and students in the classroom or dormitory area will report respectively to the School of Nursing office and the library to await notification of assignment. The number of people available should be reported to the school Director.
Depending on the number of available School of Nursing personnel, students and faculty may be utilized as follows:

1. Faculty – As notified from personnel pool
2. Seniors – Senior Nursing Assistants
3. Juniors – Junior Nursing Assistants
4. Freshmen – Transporting Patients and/or as runners

All personnel should be able to present their employee identification card at all times.

Exception: When the school is closed or after office hours, dorm residents will assemble in the living room on the 3rd floor. One of the residents will report the number of students to the Incident Command Center, ext. 2699 and await further instructions.

**CODE WHITE RESPONSE** – (See Campus Safety Report, FH, & SH)

A Code White is defined as a hospital evacuation. The ED registrar will notify the organization of a CODE WHITE by overhead paging. School of Nursing employees and students should exit the building and assemble in the parking lot next to the main hospital entrance. After hours, dorm residents should evacuate upon notification by using the stairway that is next to the front entrances of the dormitory and assemble in the parking lot.

**BURGLARY PLAN** - (See Campus Safety Report, FH, & SH)
(POLICY MANAGER/EMPLOYEE HANDBOOK)

Confrontation by an armed robber or thief while on duty in the hospital is a dangerous event that may be minimized by adherence to the following recommended procedures.

1. React positively and calmly to any demands for money, drugs or other valuables.
2. Help minimize the time the perpetrator is in the building by obeying all demands or instructions.
3. Contact your instructor to inform him/her of the incident at the earliest, safest opportunity.

**EARTHQUAKE PLAN** - (See Campus Safety Report, FH, & SH)
(POLICY MANAGER/EMERGENCY MANAGEMENT/EARTHQUAKE GUIDELINES)

Earthquakes occur suddenly and with little or no warning. Be aware that some earthquakes are actually foreshocks and a larger earthquake might occur. Minimize your movements to a few steps to a nearby safe place and stay indoors until the shaking has stopped and you are sure exiting is safe.

Injuries are caused by:

- Building collapse or damage, such as falling brick, light fixtures, collapsing walls, etc.
- Flying glass from broken windows.
- Overturned bookcases, fixtures, furniture, appliances, equipment, etc.
- Fires from broken gas lines, etc. This danger could be aggravated by a lack of water caused by broken mains.
- Fallen power lines.
- Drastic human reaction from fear.

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Policy Manager
Emergency Management
Earthquake Guidelines (Version Date 4/19)

See Policy Manager for most recent version
What to do during the shaking occurrence.

DON'T PANIC. The motion is frightening but, unless it shakes something down on top of you, it is harmless. Keep calm and ride it out. Reassure patients and visitors.

If indoors-

- Stay indoors. Drop to the ground and take cover by getting under a sturdy table or other piece of furniture and hold on until the shaking stops. If there isn't a table or desk near you, cover your face and head with your arms and crouch in an inside corner of the building.
- Do not use elevators.
- Stay away from glass. Pull curtains around patients and put extra blankets over patients.
- Stay in bed if you are there when an earthquake strikes. Hold on and protect your head with a pillow, unless you are under a heavy light fixture that could fall. In that case, move to the nearest safe place.
- Use a doorway for shelter only if it is in close proximity to you and if you know it is a strongly supported, load bearing doorway.
- Stay inside until shaking stops and it is safe to go outside. Research has shown that most injuries occur when people inside buildings attempt to move to a different location inside the building or try to leave.
- Be aware that the electricity may go out or the sprinkler systems or fire alarms may turn on.
- Do not use candles, matches, or any open flame, either during or after tremor. Put out all fires.

If outdoors –

- Stay there.
- Move away from the buildings, streetlights and utility wires.
- Once in the open, stay there until shaking stops. The greatest danger exists directly outside buildings at exits and alongside exterior walls. Do not attempt to remain standing.

If in a moving vehicle –

- If driving, park in the safest spot possible, and stay low in the car. Keep your seatbelt fastened. Avoid stopping near or under buildings, trees, overpasses and utility wires.
- Proceed cautiously once the earthquake has stopped. Avoid roads, bridges or ramps that might have been damaged by the earthquake.

If in a high rise building –

- If in a high-rise building, get under a desk or similar heavy furniture. Do not dash for exits. Stairways may be broken and/or jammed with people. NEVER use elevators.
- Do not use elevators or stairwells. Keep visitors, patients, and other employees out of stairwells and elevators.
- The most important thing to remember is to REMAIN CALM. Reassure and assist patients and visitors. DO NOT ABANDON YOUR PATIENTS.

What to do after the shaking subsides

1. STAY CALM.
2. Assemble personnel and take a head count of patients. Take a head count of employees, students, and known visitors.
3. Shut off/conserve all non-essential utilities, equipment and hazardous material supply lines.
4. Put out or contain fires as required.
5. If you smell gas, open windows and notify Plant Services. Evacuate rooms in areas with heavy gas leakage. Do not turn on radios, pagers, cell phones, light switches or flashlights in the area where the leak is located.
6. Do not use telephone except to report emergencies.
7. Turn on two-way radio if your department has one and there is no gas leak in the area.
8. Assess damage, supplies needed and functioning capability.
9. Standby in your immediate area for internal directions.
10. Give aid to others in your area as it is available.
11. Check for injuries. Do not move injured persons unless in immediate danger of further injury.
12. Immediately clean up spilled medicines and other harmful materials.
13. DO NOT eat or drink anything from open containers near shattered glass.
14. DO NOT touch downed power lines or objects touched by the downed or shorted power supply lines.
15. Assist as directed with salvage operations.
16. Stay out of severely damaged areas; after-shocks can shake them down.
17. DO NOT go sight-seeing. If evacuation is necessary, follow evacuation procedures outlined in Hospital Evacuation.

Revised: 5/90, 5/93, 5/95, 11/29/95, 6/97, 3/2/98, 2/1/99, 8/1/00, 5/29/02, 6/30/03, 5/27/04, 5/27/05, 9/26/05, 6/12/08; 5/09, 6/10, 6/30/11, 7/1/12, 7/1/13, 1/14, 6/25/15, 6/16/17
Reviewed: 1/18, 4/19

Policy Manager
See Campus Safety Report
Emergency Management
See Policy Manager for most recent version
Earthquake Guidelines (Version Date 4/19)

Emergency Notification of Students and School of Nursing Personnel

The School of Nursing has a system that allows notification of students and school personnel in the event of dangerous situation that may arise on Graham Hospital property, weather-related events, or other situations that would be deemed an emergency by the school or hospital administration. The notification system allows text messages to be sent to students, faculty, and staff. All participants are required to provide current cell phone numbers and provider. The Director, Office Manager, and the Coordinator of Admissions, Recruitment, and Financial Aid are the designated staff members to send out emergency messages via Remind.com. Recipients receive the message by text, email or through the Remind App. (See Campus Safety Report, FH, SH)

Non-Emergency Notifications
Instructors may set up their own account with Remind.com or use another message system to mass communicate with students in their courses. (See FH & SH)

Dev. 4/2/15
Revised: 5/16/18
GRAHAM HOSPITAL SCHOOL OF NURSING LIBRARY

LIBRARY POLICIES

1. All library services are coordinated by the Director of Library Services and implemented by the Director, Library Assistant, Technology Coordinator and the Federal Work Study students.

2. The Library Committee recommends purchases, services and matters of policy. The Committee meets four times an academic year in September, November, February and April. The Library Committee is made up of the Library Director, Technology Coordinator, a student representative, a faculty member and a hospital representative. The Committee members are responsible for bringing before the committee the concerns of the group they represent.

3. Borrowing privileges are extended to SON students, faculty, staff and alumni, plus hospital employees, volunteers, hospice association members and other health related institutions and community members with approval of the Director of Library Services, Library Assistant or Technology Coordinator.

LENDING PERIODS:

A. BOOKS
   General Collection: 2 weeks with one 2-week renewal
   Reserve Materials: Overnight
   Reference Books: In library use only

B. PERIODICALS
   Current Issue: In library use only
   Back Issue: One week

C. AUDIOVISUAL
   Equipment:
   - Overhead Projector: In house use only or by approval
   - PowerPoint Cart: In house use only or by approval
   - TV/VCR/DVD Cart: In house use only or by approval
   - Laptops: See Laptop Circulation Policy
   - Cassette Player/Recorder: 24 hours, over the weekend, or by approval
   - CD Disc Player: 24 hours, over the weekend, or by approval
   - CD Player/Recorder: 24 hours, over the weekend, or by approval
   - Digital Camera: 24 hours, over the weekend, or by approval
   - Video Recorder: 24 hours, over the weekend, or by approval
   - Screens: 24 hours, over the weekend, or by approval
   - Slide Projector: 24 hours, over the weekend, or by approval
   - Tripod: 24 hours, over the weekend, or by approval
   - Video and Audio Tapes, CDs, DVDs, models, charts, and kits: 3 days, over the weekend, or by approval
   - Computer software: In library use only
4. The library staff has the right to assess fees for delinquent, damaged and unreturned materials and equipment checked out to library patrons.

FINES AND CHARGES:
A. OVERDUE
   - General Books, Periodicals = $.05 per day
   - Reserve Materials, AV Materials and Equipment = $1.00 per day
B. LOST
   - Current replacement cost of item(s) lost/unreturned.
   - Overdue items are considered lost to the library 60 days from their due date.
C. DAMAGED
   - A damage fee of 25% of the cost of the book will be assessed for books returned in a damaged condition, but still usable. A 100% replacement cost fee will be assessed if an item is returned in unusable condition.
D. DELINQUENT FINES/CHARGES
   - At the end of each term, the Library Assistant will contact anyone with delinquent fines and/or charges that must be paid prior to registration for the next course. Registration or graduation may be denied until charges are paid or materials returned.

5. The SON computer lab includes sixteen up-to-date desktop computers with secure, high speed internet access. As with all SON Library services, SON students and faculty have priority for its use. SON instructors may reserve the computer lab by placing a reservation through the Outlook calendars or by contacting a library staff member. Students can access the computer lab 24/7 via the lab badge reader. Other Graham employees are welcome to use the lab during open library hours, when not reserved by instructors. One workstation with internet access and word processing functions is available in the Library for alumni, volunteers, other health related institutions/staff and community members.

6. The Director of Library Services will maintain all holdings including: reference books, professional and technical books, historical materials, periodicals, audiovisual equipment and materials, and any other items needed to support student learning and faculty development. The collection is organized according to the National Library of Medicine classification system and the Library of Congress classification system, where appropriate. All holdings are maintained in the RSA and OCLC databases for author, title and subject access to the collection.

7. Library hours are posted on the Library door at the beginning of each academic year. Changes throughout the year are immediately posted. Open hours are also posted on Library webpage.

8. An atmosphere conducive to study and reading will be encouraged in the library. Quiet group and/or individual study or video viewing may be held in room #364.

9. The Library or Library staff cannot be responsible for any items, including personal belongings, left in the Library, Library Computer Lab or Study Room.

RULES
-Food may NOT be taken into the library
-Beverages MAY be taken into the library. Caution should be used and containers should be disposed of properly.

Reviewed and Revised: 5/94, 5/96, 5/97, 5/26/98, 5/06/99, 5/15/00, 4/401, 4/27/02, 4/13/04, 4/18/05, 4/17/06, 4/16/07, 4/21/08, 4/20/09, 4/19/10, 5/2/11, 4/16/12, 4/15/13, 4/21/2014, 4/20/15, 4/18/16, 4/10/17, 4/16/18, 4/15/19, 4/20/20

Also in: FH SH
Graham Hospital School of Nursing

Academic Alert Policy

Academic Alert will be used as an academic accountability, support, and remediation program. Academic Alerts place a student at risk of mandatory withdrawal from Graham Hospital School of Nursing. It may be used at the discretion of an instructor at any time during a course. Reasons for using it are related to academic performance and include, but are not limited to, issues in these areas: clinical attendance or tardiness, clinical performance, test performance, failure to complete test assessments, and/or completion of required remediation. Students who are placed on Academic Alert must:

1. Meet with their instructor to develop an action plan. A copy of this action plan will be sent to the student’s advisor.

2. Meet with their advisor within three weeks to review the action plan.

3. Meet with either the instructor or advisor on an ongoing basis until removed from Academic Alert.

If the student does not meet with the instructor or advisor, the Director of the school will be notified.

The student will be removed from Academic Alert at the end of the course. A student can be placed on Academic Alert only two times in the duration of the program. A third Academic Alert goes directly to the Director of the school and may result in mandatory withdrawal from the school.

Dev. 3/23/15
Reviewed: 5/23/16, 5/23/17, 4/16/18, 2/19/19, 2/20/20

Also in:
SH
FH
Academic Alert will be used as an academic accountability, support, and remediation program. Academic Alerts place a student at risk of mandatory withdrawal from Graham Hospital School of Nursing. It may be used at the discretion of an instructor at any time during a course.

<table>
<thead>
<tr>
<th>Student name</th>
<th>Course</th>
<th>Date student notified</th>
</tr>
</thead>
</table>

You have been placed on Academic Alert for the following reason(s):

- ___ clinical attendance or tardiness
- ___ clinical performance
- ___ test performance
- ___ failure to complete test assessments
- ___ failure to complete required remediation
- ___ other: __________________________

You are required to do the following:

4. Meet with your instructor to develop a measurable action plan. A copy of this action plan will be sent to your advisor.
5. Meet with your advisor within three weeks to review the action plan.
6. Meet with either your instructor or advisor on an ongoing basis until removed from Academic Alert.

Student signature ______________________________

Faculty signature ______________________________ Date ____________

Please be advised: If you do not meet with the instructor or advisor, the Director of the school will be notified. You will be removed from Academic Alert at the end of the course. You can be placed on Academic Alert only two times in the duration of the program. A third Academic Alert goes directly to the Director of the school and may result in mandatory withdrawal from the school.

<table>
<thead>
<tr>
<th>Date</th>
<th>Faculty Initials</th>
<th>Action Completed</th>
<th>Comments:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
Academic integrity is the honest pursuit of an education following the rules and regulations as set forth by the Director and faculty of the Graham Hospital School of Nursing. Academic dishonesty lowers the standard of professional nursing practice. Dishonesty on the clinical setting affects the well-being of the client. Academic honesty is the responsibility of every student.

When academic dishonesty is suspected by a faculty member, it is reported to the Director. It may be dealt with by the instructor, the Director of the School of Nursing, and/or the Admission, Retention, Promotion, and Graduation Committee. Academic dishonesty may result in any of the following:

- A loss of points for examination, quiz, or paper in question
- A “zero” for the examination, quiz, or paper in question
- Course failure

1. Academic dishonesty in theory includes, but is not limited to:
   - **Cheating:** On examinations and quizzes, i.e. having unauthorized materials or devices, providing or receiving information, possessing test materials (e.g., text book and test banks) before administration.
   - **Plagiarism:** Presenting the work of another as one’s own without proper acknowledgment of the source or sources, or submitting a piece of work which in part or in whole is not entirely the student’s own work without attributing the unoriginal portions to their correct sources.
   - **Falsification and Fabrication:** Altering, counterfeiting, or inventing information or material presented in a course evaluation activity.
   - **Abuse of Academic Materials:** Destroying, stealing, altering simulations lab or other academic resource materials, including computer data, or attempting to do so; stealing examinations or other course materials or attempting to do so.
   - **Complicity in Academic Dishonesty:** Helping, or attempting to help, another to commit an act of dishonesty, especially providing material or information to another person with knowledge that the material or information will be used deceitfully in a course evaluation activity; permitting one’s own work to be submitted by another person as if it were that person’s original work.

2. An unsatisfactory clinical rating for the day will be given for clinical fabrication, and the student will be dismissed for the day. The dismissed day will count as one clinical absence.

3. Immediate expulsion with ineligibility for re-admission will be imposed for:
   - Falsification of Records and Official Documents: Altering transcripts or documents affecting academic records; forging signature of authorization or falsifying information on any other official academic document.

4. When academic dishonesty occurs in a course being provided by another institution, the incident will be dealt with according to their policy.

Reviewed: 5/94, 4/15/98, 6/1/11, 7/1/12, 9/16/13, 4/18/16, 5/23/17, 4/16/18, 4/22/19
Revised: 10/22/03, 11/18/13, 5/22/15, 2/20/20
STUDENT HANDBOOK

GRAHAM HOSPITAL
SCHOOL OF NURSING

ACADEMIC REGULATIONS

Upon completion of a course, a grade will be assigned by the instructor. The basis for the grades will be described in the course syllabus. Grades provide academic evaluation and are the basis for determining academic standing.

Scholastic Standards

Students will be notified of grades earned each semester. The School of Nursing uses the following grading system:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Scale</th>
<th>Grade Point</th>
<th>Performance Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>94-100</td>
<td>4</td>
<td>Superior</td>
</tr>
<tr>
<td>B</td>
<td>87-93</td>
<td>3</td>
<td>Above Average</td>
</tr>
<tr>
<td>C</td>
<td>80-86</td>
<td>2</td>
<td>Average</td>
</tr>
<tr>
<td>Failure</td>
<td>D</td>
<td>73-79</td>
<td>Below Average, not passing</td>
</tr>
<tr>
<td>F</td>
<td>0-72</td>
<td>0</td>
<td>Unsatisfactory, not passing</td>
</tr>
</tbody>
</table>

Clinical Grades: S-Satisfactory, U-Unsatisfactory

Credit/No Credit

I            Incomplete - Temporary grade
W            Withdrawal from course of school
WP           Withdrawal from course of school passing
WF           Withdrawal from course of school failing

A grade of incomplete is not granted automatically and may be given at the discretion of the instructor based upon the following criteria:

1. The student has completed at least twelve weeks of a semester course or six weeks of an eight-week course with a minimum theory grade of “C” and satisfactory clinical performance.

2. The student is unable to complete the course and/or other assignments due to illness or a family emergency. The Admission, Retention, Promotion, and Graduation Committee, with input from the instructor(s), will determine whether an absence due to illness is excusable. Written physician verification will be required for the student’s permanent file.

A contract will be signed by the student and instructor showing the requirements to be completed before the “I” can be removed. The student has one month from the date noted on the contract to complete all required work. After one month an “I” becomes an “F” if the student has not met the specifications of the contract. A student may request to advance to the next nursing course, but will be required to withdraw if the “I” is not removed with a minimum grade of “C”.

- 42 -
A student earns one final grade for each course according to the grading scale. (Grades are not rounded off until the end of the course, at which point the grade will be rounded to the nearest percentage point.) A grade of “C” (2.00) must be attained in all nursing courses. In all nursing courses, the clinical performance is evaluated as satisfactory or unsatisfactory. If the student's clinical performance is satisfactory, the grade for the course is the theory (lecture/discussion) grade. An unsatisfactory in the clinical area results in a failure (“F” grade) for the course.

A student who earns a grade of “D” or “F” in a nursing course can apply to repeat the course only once. Likewise, a student who fails to meet the course requirements to advance to the next course can also apply to repeat the course only once. Once a student repeats a course, that option will not be available for any other nursing course. All credit hours and grade points will appear on the permanent transcript. Repeated courses will be reflected on the transcript with an (R). The grade received on the repetition of the course will replace the first grade in the calculation of the cumulative grade point average.

A student who receives below a "C" in a support course must repeat the course prior to enrollment in the nursing course for which this is a prerequisite.

If a student withdraws during the first week, no grade will be recorded. Students cannot withdraw after two-thirds of the course is completed. After the first week, a grade of “W” will be recorded. Students withdrawing after the course mid-term will have the grade “WP” or “WF” recorded on their transcripts. Students can only apply once to repeat a specific course for which a “W”, “WP” or “WF” has been given. A student who leaves without completing the process of notifying the institution of the intent to cease attendance (unofficial withdrawal) will receive an “F” for the course.

Students will be notified of grades each semester. Official grades are withheld if the student has unpaid school charges, library fines, pharmacy charges or incomplete health requirements. Mid-term nursing course grades are issued only to students who are doing unsatisfactory work at that time.

**Promotion Policy**

To be eligible for promotion to the next level or course, the student must:

1. Maintain a cumulative grade point average of 2.00 or above. The cumulative grade point average is defined as the total of all grade points received for courses listed in school curriculum plan divided by the total number of credit hours.

2. Complete course prerequisites or their equivalent with a “C” or better.

3. Submit a completed End-of-School Year Checklist (including financial obligations) at the end of each academic year.

When a student fails to maintain a cumulative and semester grade point average of 2.00 or above due to a grade in a support course, the student will be placed on financial aid warning until the end of the following semester. A warning period is considered one semester. In order to be removed from financial aid warning, a student must obtain a cumulative and semester GPA of 2.00 at the end of the warning period. Failure to resolve warning status will result in mandatory withdrawal from the School of Nursing.
Graduation Requirements

To be eligible for graduation, each student must:

1. Satisfactorily complete the required nursing courses within a five-year calendar period.
2. Complete non-nursing support courses as stated in the school catalog.
3. Settle financial account with the accounting department of the hospital.
4. Complete and return the End-of-School Year Checklist to the Admissions, Recruitment, and Financial Aid office.
5. Have a minimum cumulative G.P.A. of 2.00.
6. Complete 12 hours of community service.

Licensure Eligibility

The graduate of this program is eligible to apply to take the National Council Licensure Examination (NCLEX) for licensure as a registered professional nurse. In the state of Illinois, applicants must provide information on convictions of any criminal offenses in any state or federal court, personal history of any past or present chronic illnesses that would interfere with the ability to practice, dishonorable discharge from the service, and loss of professional license or permit. Graduates must be fingerprinted and include the receipt with the application for testing.

Audit Policy

Request for auditing a theoretical and/or lab component of a course will be considered on an individual basis. Clinical components may not be audited.

Withdrawal and/or Dismissal

The School of Nursing faculty has the responsibility to recommend the withdrawal and/or dismissal of any student whose physical or emotional health or behavior makes continuance in the nursing program inadvisable. Conditions under which this may occur are identified in the school catalog.

A student who withdraws, is asked to withdraw, or is dismissed must complete the school Withdrawal Form available from the office of the Coordinator of Admissions, Recruitment, and Financial Aid and may reapply in accordance with the admission procedure policy. Reapplication will be considered on an individual basis by the Admissions, Retention, Promotion, and Graduation Committee. A student who withdraws or is dismissed while enrolled at Spoon River College is requested to also complete a Withdrawal Form at Spoon River College.

Submission of falsified documentation for admission, financial aid, or promotion, will result in dismissal from the program.

Failure to Progress Form

A student who fails to meet the requirements to progress in the program is asked to complete this form, which is available from the office of Admissions, Recruitment, and Financial Aid. To receive honors, students must have been enrolled in and successfully completed a nursing course during the semester.
Grade Reports

Grade reports are sent to the student at the end of each semester after an official transcript of support course grades are received. Mid-term nursing course grades are issued only to students who are doing unsatisfactory work at the time.

Nursing course grades are issued to individual students by their instructor.

Semester grade reports include courses completed at Spoon River College and Graham Hospital School of Nursing and are issued to the individual student and the agencies or organizations that are sponsoring a student, upon the student's written authorization.

Students have one week from the date of release to raise questions concerning grade reports. Contact should be made with the proper instructor.

Honors

At the end of each semester, students who have achieved a semester grade point average of 3.50 to 4.00 are named to the Director's Academic Honor List. Students who have a semester nursing course grade point average of 3.00 to 3.49 are named to the Nursing Honor Roll.

Graduation Honors

Graduation Honors are based upon the following cumulative grade point average:

- 3.50-4.00 Graduating with High Honors
- 3.00-3.49 Graduating with Honors

Credit/Clock Hour Definitions

The semester hour is the unit of academic credit. Semester credit hour calculation is based on the number of theory and clinical hours (clock hours) in our 16-week semester. A clock hour is equal to 60 minutes. Theory and clinical hours listed in the course descriptions refer to clock hours per week. Theory: one (1) semester credit hour = 16 theory hours/semester (1:1 ratio). Clinical: one (1) semester credit hour = 48 clinical/laboratory hours/semester 1:3 ratio).

Revised: 3/9/92, 7/95, 2/26/96, 6/97, 1/13/99, 4/24/00, 5/29/02, 5/22/03, 5/27/05, 5/24/06, 5/25/07, 5/20/08; 5/20/09, 5/24/12, 5/19/14, 8/1/14, 5/22/15, 5/23/17, 4/16/18, 4/22/19, 2/20/20, 3/25/20
Reviewed: 4/18/16, 5/23/17, 4/16/18, 4/22/19
At Graham Hospital School of Nursing credit is given for support courses that were completed at a college or university other than Spoon River College (SRC), if one of the following is true:

1. The Illinois Articulation number for the course matches with the SRC course Illinois Articulation number.

2. The student has an official evaluation of their transcript completed by SRC with courses listed that are accepted, or on the student’s SRC transcript courses accepted from another institution will be listed.

3. Students that intend to take Anatomy and Physiology and Microbiology at SRC must abide by their current prerequisite for these courses: high school biology within the past five years or BIO 101 or 105.

4. Transfer courses must be relevant to the curriculum plan of Graham Hospital School of Nursing.

5. Graham Hospital School of Nursing requires a grade of “C” or better on all transfer courses.

6. Review of a course that a student believes is comparable to an SRC support course is done by the Admission, Retention, Promotion, and Graduation Committee. This is done by comparing the course descriptions of the two courses. The student is notified if the course will be accepted in lieu of the SRC course.

7. Courses completed at a college on quarter hours are converted to semester hours.

Adopted: 6/30/11
Reviewed: 5/19/14, 5/22/15, 4/18/16, 5/23/17, 4/16/18, 4/22/19
Revised: 2/20/20
Graham Hospital

School of Nursing

Guidelines for Administration of Test Assessment

Students who receive two consecutive examination failures before mid-term (less than 80% on each examination) or those who the instructor feel would benefit from an assessment will be offered a test assessment with the assigned instructor. Additional assessments may be used at the discretion of the instructor or at the request of a student. This assessment tool consists of up to four parts: Part A (Test Assessment Agreement), Part B (Student Test Preparation Assessment), Part C (Student Test Assessment Remediation/Action Plan), and Part D (Analysis of Incorrect Questions). Part B may be administered orally by the responsible instructor or the instructor may choose to have the student complete this section prior to the scheduled conference. If deemed necessary by the instructor after examining the student’s study skills (Part B), Part D will be completed. After completing the Test Assessment, the instructor, with student input, will analyze the results. A plan will then be developed on how to improve the student’s success.

Rationale/reasons to complete a test assessment:
1. This assessment tool is to help the student recognize and/or evaluate potential problem areas that in turn may have influenced their performance on the examination(s).
2. Adequate documentation by the instructor allows for verification that student needs are being met.
3. These questions will possibly reveal the student’s potential impediments to successfully pass an examination and in turn being successful on NCLEX.
4. It will ensure that students, who want help, will receive help.
5. Students who have poor study skills will benefit.
6. Students who have difficulty focusing may learn coping skills and can be referred to those who may help with those situations.

This test assessment is not mandatory; however, this should be offered to the student who meets the above criteria.

The following are references that may help the student to be successful:


www.atitesting.com

Dev. 1/90
Reviewed: 7/1/12, 10/5/15, 5/22/17
Revised: 1/12, 4/8/13, 10/6/14, 5/22/18, 5/22/19, 5/22/19

Also in:
FH
SH
Graham Hospital School of Nursing

PART A: Test Assessment Agreement

I acknowledge that my instructor has offered me the option to take the Test Assessment for the following reasons: (mark all that are applicable)

1) Two examination failures
2) My desire to benefit from the Test Assessment
3) At discretion of the instructor
4) Other

I will make an appointment with my instructor to complete a Test Assessment.

I decline to make an appointment with my instructor to complete a Test Assessment.

Student Name__________________________ Date__________________

Faculty Name__________________________ Date__________________

Instructor’s Follow-up Comments:______________________________________

____________________________________

____________________________________

____________________________________

Approved: 4/8/13
Revised: 5/20/13, 10/6/14
Reviewed: 10/5/15, 5/22/17, 5/22/19

Also in:
FH
SH
PART B: Student Test Preparation Assessment

Directions: Complete the following with brief and concise answers.

Preparation:

Did you attend class? If answer is no, why not?

Did you study for this examination? If answer is no, why not?

How many hours per week did you spend time studying this content?

Did you read your assignment before class? If yes: All of the assigned readings? Portions of the assigned reading? If the answer is none of the readings, what is the reason for not doing this?

When you did read, did you take notes while reading the information?

Did you study the objectives? Did you review and answer the objectives?

Did you review the content/topics discussed/handouts from class before and after the content/topic has been discussed in class?

Did you use a tape recorder in class?

Did you belong to a study group? If so, how many were in the group? How did the group function? In what environment did you meet?

Did you attend the review session? (When offered)

Did you complete the sample questions that were provided? (When offered)

Did you “cram” for the examination?
**Time Management:**

Are you taking other courses? When do those courses meet?

Are you employed? What is your typical work schedule?

What are your family roles/responsibilities?

Do these family roles/responsibilities allow you adequate, uninterrupted study time in your home environment?

**Personal:**

Did you receive adequate rest/sleep (7 hours) the night before the exam?

Did you eat a healthy breakfast?

Do you believe that you suffer from test anxiety?

Do you do relaxation exercises prior to the examination?

Do you believe you have a problem with test-taking ability?

Student signature: ________________ Instructor signature: ________________ Date: ______

Dev. 1-12-09
Reviewed: 10/5/15, 5/22/17, 5/22/19
Revised: 3/5/12, 7/1/12, 10/6/14

FH & SH
PART C: Student Test Assessment Remediation/Action Plan

As a result of completing the Test Assessment, what do you think are your main problems with study habits and test-taking skills?

______________________________________________________________________________________________________________________________________________________________________________________________________________________________

MY GOAL(S) FOR IMPROVING MY COURSE GRADES AND TEST GRADES:

______________________________________________________________________________________________________________________________________________________________________________________________________________________________

______________________________________________________________________________________________________________________________________________________________________________________________________________________________

As a result of what you learned from your Test Assessment, how are you going to change your study habits in order to achieve better grades as well as a better understanding of the course materials?

______________________________________________________________________________________________________________________________________________________________________________________________________________________________

______________________________________________________________________________________________________________________________________________________________________________________________________________________________

As a result of what you learned from your Test Assessment, how are you going to change your test-taking strategies?

______________________________________________________________________________________________________________________________________________________________________________________________________________________________

______________________________________________________________________________________________________________________________________________________________________________________________________________________________

Instructor’s Follow-up Evaluation

______________________________________________________________________________________________________________________________________________________________________________________________________________________________

______________________________________________________________________________________________________________________________________________________________________________________________________________________________

Student Name_________________________________________ Date__________________________

Faculty Name_________________________________________ Date__________________________
PART D: Analysis of Incorrect Questions

This section, if necessary, is completed only after examining the student’s preparation for the test. This section focuses on the process of test taking. First, complete the Analysis of Incorrect Questions; then proceed to Testing Process Analysis.

Enter the question numbers that will be analyzed across from left to right in the first row. For the rest of the page, mark an X in the box where the column and row intersect. Check all of the rows appropriate to each question.

Tally the Xs horizontally; look for patterns.

<table>
<thead>
<tr>
<th>Analysis of Incorrect Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enter incorrect test question numbers to the right here:</td>
</tr>
<tr>
<td>Could not recall/understand the information.</td>
</tr>
<tr>
<td>Read into the question, i.e. added data that was not present or made assumptions about the scenario.</td>
</tr>
<tr>
<td>Misread the item (scenario or question)/misread the options.</td>
</tr>
<tr>
<td>Answered before reading all of the options.</td>
</tr>
<tr>
<td>Entered a different option letter than remembered entering (wrong bubble on Scantron sheet).</td>
</tr>
<tr>
<td>Changed the answer to the incorrect option.</td>
</tr>
<tr>
<td>Alternate-type question (e.g. “Select all that apply”)</td>
</tr>
</tbody>
</table>

FH & SH
<table>
<thead>
<tr>
<th>Testing Process Analysis</th>
<th>YES ( )</th>
<th>NO ( )</th>
<th>I don’t know ( )</th>
</tr>
</thead>
<tbody>
<tr>
<td>I remained calm during the test (my heart did not race, my hands did not shake)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>When I became especially frustrated or nervous I took a calming breath</td>
<td>YES ( )</td>
<td>NO ( )</td>
<td>Not applicable ( )</td>
</tr>
<tr>
<td>I remained focused on the test (the distractions in the room did not bother me)</td>
<td>YES ( )</td>
<td>NO ( )</td>
<td></td>
</tr>
<tr>
<td>I finished in time to review my answers</td>
<td>YES ( )</td>
<td>NO ( )</td>
<td></td>
</tr>
<tr>
<td>I felt confident that I was correct, as I answered the questions.</td>
<td>YES ( )</td>
<td>NO ( )</td>
<td></td>
</tr>
</tbody>
</table>

Dev. 1/09
Reviewed: 7/1/12, 10/5/15, 5/22/17
Revised: 1/12, 10/6/14, 5/22/19

FH & SH
Academic Grievances: Academic grievances are defined as those pertaining directly to final theory grades and clinical evaluation.

Academic Grievance Procedure

The Academic Grievance Procedure should be processed in the following manner:

1. The student should contact the instructor involved to attempt to resolve the problem prior to filing an academic grievance.

2. If the problem is not resolved through informal contact with the instructor, the student should submit an Academic Grievance Form (form can be obtained in the school office) to the Chairperson of the Admissions, Recruitment, Promotion, and Graduation Committee with copies to the instructor involved and the Director, detailing the reasons for requesting a hearing. The completed form must be submitted within five business days after the end of the course, which is always Friday.

3. Notification of the formal hearing date will be sent in writing to the student and the instructor involved within five business days. The hearing will be held within five business days of the receipt of the Academic Grievance Form, unless postponed in writing by the Chairperson of the Admissions, Recruitment, Promotion, and Graduation Committee.

4. Only members of the Admissions, Recruitment, Promotion, and Graduation Committee not directly involved in the grievance situation will be eligible to serve as members of the Grievance Committee for this hearing. The Director of the school will select alternative instructors to serve as committee members during the hearing to serve as replacements for ineligible members of the Admissions, Recruitment, Promotion, and Graduation Committee.

5. Minutes of the hearing will be filed in the office of the Director.

6. The only ones that have the right to be present in the hearing are the student and the instructor(s). The instructor(s) presence may be requested by the committee. If the student refuses the committee's request to attend, the grievance will be dismissed.

7. After closing statements, the Admissions, Recruitment, Promotion, and Graduation Committee will make their decision out of the presence of the student and the involved instructor.

8. A simple majority will constitute a decision and voting will be done by secret ballot.

9. The Chairperson of the Admissions, Recruitment, Promotion, and Graduation Committee will convey the decision in writing to the student, the involved instructor, and the Director of the School of Nursing within five business days.
10. PROCEDURE TO APPEAL COMMITTEE DECISIONS ON ACADEMIC GRIEVANCES

A. If the student desires to appeal the decision of the Committee, the request for appeal must be submitted in writing to the Director within five business days after receipt of the written decision.

B. If a request for appeal is not made within five business days following receipt of the written notice, the decision shall be final and binding.

C. The Director will appoint an Appeal Committee to review the grievance and decision. Members of the Appeal Committee shall not be instructors involved directly in the grievance or members of the Admissions, Recruitment, Promotion, and Graduation Committee. In the event that two instructors are not available, the Director may ask the President to serve on the committee.

D. The Appeal Committee chaired by the Director will meet within five business days. Presence of the student and/or involved instructor may be requested.

E. The student and involved instructor will be notified in writing within five business days of the appeal decision.

F. Formal minutes of the appeal meeting will be kept in the office of the Director.

11. The Academic Grievance procedure must be completed within the academic year in which the grievance was filed.

Adopted: 5/92
Reviewed: 4/14/99, 6/1/11, 7/1/12, 4/18/16, 5/23/17, 4/16/18, 4/22/19, 2/20/20
STUDENT HANDBOOK

GRAHAM HOSPITAL SCHOOL OF NURSING
ACADEMIC GRIEVANCE FORM

NAME_________________________ DATE_________________

Instructions: Please make a brief statement of your academic grievance. If you are grieving an academic policy, please list the policy and reason(s) that you are grieving enforcement of stated policy.

Grievance:

Grievant’s Signature_________________________ Date______________

Submit the completed grievance form to the Chairperson of Admission, Retention, Promotion, and Graduation Committee within five business days of the end of the course.

Note: Refer to the Academic Grievance Policy and Procedure in the Student Handbook. A hearing will be held within five business days of receipt of the Academic Grievance Form. You will be notified of the hearing date and time in writing. The student must be present at the hearing. If you refuse to attend, the grievance will be dismissed.

Date of Response to Grievant

(Within five business days after receipt of grievance)

Initial hearing date & time_________________________

Decision Rendered: ____________________________ Date: __________

Grievant Response:

I have read the decision of the Grievance Committee. Please check response:

I agree_________ I disagree_________ I wish to appeal decision__________________________ 

*Written request for appeal must be submitted to Director within five business days of receipt of written decision.

Grievant’s Signature_________________________ Date________________

Date 5/23/96
Reviewed: 6/1/11, 7/1/12, 4/18/16, 5/23/17, 4/16/18, 4/22/19, 2/20/20
Revised: 9/24/03, 5/19/14, 5/22/15, 3/25/20
Graham Hospital School of Nursing

Annual Mandatory Health Stream Training

Policy:

Each student of Graham Hospital School of Nursing is required to complete computerized education courses on mandated topics annually.

Practice Guidelines:

Topics in the computerized education include, but are not limited to: Standard Precautions; Infection Control – MDRO’s; Patient Responsiveness; Rapid Regulatory Compliance: Non-Clinical I; Rapid Regulatory Compliance: Non-Clinical II; HIPAA; Preventing Slips, Trips, and Falls in the Workplace; Radiation Safety; Hand Hygiene; Environment of Care; Transgender Nondiscrimination Policy; Impaired Healthcare Workers; Patient Satisfaction; Corporate Compliance; Electrical Panel and Medical Gas Panel Safety; Abuse Education; Customer Service; Bed Bugs; and Behaviors that Undermine Patient Safety.

Procedure:

The Director of the School of Nursing is responsible for ensuring that students complete computerized education within 30 days of the start of the fall semester each year. Students cannot participate in patient care/clinical settings until completed.

Reviewed: 6/1/11, 7/1/12, 5/22/15, 4/18/16, 5/23/17, 4/22/19, 2/20/20
Revised: 12/06, 7/10/13, 5/19/14, 4/16/18

Also in: CAMPUS SAFETY REPORT
GRAHAM HOSPITAL SCHOOL OF NURSING ATTENDANCE POLICY

Regular, prompt attendance in the classroom and clinical experience is necessary if students are to accomplish the objectives of the course. An absentee record is turned in daily by each instructor and a cumulative absentee record is kept by the Office Manager. A student will be counted absent if more than 50% of the class/clinical is missed.

Attendance and punctuality for clinical and theory are professional behaviors that are considered when awarding some scholarships and writing job references.

**Theory Absence Policy**

Students are encouraged to attend all classes. The student is required to notify the instructor of all absences according to the instructor’s guidelines. When students are absent from theory, they are responsible for the course work missed. Individual instructors may record tardiness. “Tardy” is arriving after the time class is scheduled to begin. Unreported and/or unexcused tardiness to class have consequences according to the instructor’s guidelines in the course syllabus.

**Clinical Absence Policy**

An integral component of each course is the clinical experience. It is designed to allow students to demonstrate that they have met the clinical objectives. Excessive clinical absences leave instructors with insufficient data to evaluate whether a student has the necessary skills to advance through the program. As such, **clinical absences are highly discouraged.** The student is required to notify the instructor of all absences according to the instructor’s guidelines.

If an absence be unavoidable, the student is required to notify the instructor according to each instructor’s guidelines in the course syllabus. All clinical absences must be made up before a student can pass a course. The type and date of the make-up will be decided by the clinical instructor and may be a clinical experience or an alternate assignment. Clinical time that is made up does not eliminate the original clinical absence from a student’s record. Scheduled make-up clinicals that are missed are recorded as additional absences.

If a student misses more than one clinical in a course or more than six over the full length of the program, a meeting with the Director of the program may be required to address the situation, and this could result in course failure and/or program withdrawal.

**Medical Restriction**

If a student has medical restrictions, a physician’s written statement of verification is required and should be submitted to the clinical instructor. A copy is maintained in the student’s health file. In accordance with the clinical agency’s guidelines regarding medical restrictions, the clinical instructor will notify the student whether a clinical absence is required. Appeals are handled through the Academic Grievance Procedure.

Reviewed: 7/1/12, 5/19/14, 5/23/17, 4/16/18, 4/22/19, 2/20/20
Revised: 4/14/04, 4/19/06, 9/17/07, 11/17/14, 3/21/16, 4/18/16
**Bereavement**

Students may be allowed three unrecorded absences upon the death of an immediate family member. Immediate family is defined as follows:

Students may be allowed one unrecorded absence upon the death of other near relatives for the purposes of attending the funeral or memorial service. Near relative is defined as follows:

Request for absence due to bereavement not listed above may be considered by the Director of the school.

Adopted: 5/92  
Reviewed: 7/1/12, 5/19/14, 4/18/16, 5/23/17, 4/16/18, 4/22/19, 2/20/20  
Revised: 4/93, 7/95, 2/26/96, 5/24/99, 12/6/99, 3/13/00, 5/22/03, 5/24/06, 5/22/15

**ATTENDANCE POLICIES FOR SCHOOL FUNCTIONS**

Attendance at the Professional Issues Luncheon, Welcome Picnic, and Senior Recognition Banquet is mandatory for ALL students. Attendance at the Graduation ceremony is mandatory for all seniors. Excused absences may be granted by the Director of the school.

Revised: 1/93, 4/15/96, 4/28/97, 1/28/98, 5/20/08, 5/26/11, 7/1/12, 4/22/19  
Reviewed: 5/19/14, 5/22/15, 4/18/16, 5/23/17, 4/16/18, 2/20/20

**STUDENT PREGNANCY DISCLOSURE**

Complete Student Pregnancy Disclosure Form on next page.

Reviewed: 7/1/12, 5/19/14, 5/23/17, 4/16/18, 4/22/19, 2/20/20  
Revised: 4/14/04, 4/19/06, 9/17/07, 11/17/14, 3/21/16, 4/18/16
GRAHAM HOSPITAL SCHOOL OF NURSING

STUDENT PREGNANCY DISCLOSURE FORM

Graham Hospital School of Nursing ensures compliance with the Department of Education (DOE) regulations whereby a college “shall not discriminate against any student, or exclude any student from its education program or activity, including any class, or extracurricular activity, on the basis of such student’s pregnancy, childbirth, false pregnancy, termination of pregnancy or recovery therefrom.”

In order for Graham Hospital School of Nursing to be compliant with this directive, and in order to be cognizant of special needs that may arise for a pregnant person, it is important that the student disclose the pregnancy to the Coordinator of Admissions, Recruitment, and Financial Aid, the Director of the School of Nursing, and any faculty members or staff on a need-to-know basis. Disclosure to faculty is necessary so that the faculty member can be aware of the pregnancy if any problems arise, as well as for safety in course and clinical planning. Disclosure of the pregnancy to fellow students or other individuals is at the student’s own discretion.

I AM VOLUNTARILY DISCLOSING TO GRAHAM HOSPITAL SCHOOL OF NURSING MY PREGNANCY. MY ANTICIPATED DUE DATE IS _____________________________.

IN THE EVENT THAT THERE MAY BE MODIFICATIONS REQUIRED AT GHSON DUE TO MY PREGNANCY, I REQUEST TO PARTICIPATE IN ANY DISCUSSIONS REGARDING THESE MODIFICATIONS.

VOLUNTARY STUDENT COMMENTS:

STUDENT SIGNATURE: ___________________________ DATE: ________________

GHSON REPRESENTATIVE: ___________________________ DATE: ________________

Approved:
Reviewed: 5/23/17, 4/16/18, 4/22/19, 2/20/20
Graham Hospital School of Nursing

Cell Phone Policy During Testing and Test Reviews

All cell phones must be turned off and placed in an instructor-designated area during testing and test review.

Dev. 5/18/15
Reviewed: 5/22/17, 5/22/19
GRAHAM HOSPITAL SCHOOL OF NURSING
CIVILITY POLICY

Graham Hospital School of Nursing is an academic professional environment where a certain etiquette or set of customary rules of courtesy apply. All students, instructors, and staff have a responsibility to maintain a positive environment conducive to teaching and learning. Each individual has a responsibility to behave professionally, and to treat others with respect at all times. Distractions and inappropriate behavior, by any individual, can easily hinder and disrupt this process.

This policy is supported by the ANA in the published ANA Code of Ethics:
Provision 1: “The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual.…”
1.5: Principles of respect extend to all encounters, including colleagues. “This standard of conduct precludes any and all prejudicial actions, any form of harassment or threatening behavior, or disregard for the effect of one’s actions on others”
3.4: “Nurse educators have a responsibility to….promote a commitment to professional practice prior to entry of an individual into practice”

In order to assure that all students have the opportunity to gain the most from time spent in the school, classroom, and clinical setting, students are prohibited from engaging in any form of incivility including, but not limited to, the behaviors listed below.

**Level I Behaviors**

See course syllabus.

**Level II Behaviors**

1. Cheating on exams, quizzes, homework. (See Academic Dishonesty Policy)
2. Behavior, at any facility or activity, demonstrating gross disrespect in any form to anyone including the use of taunting, belittling, vulgarity, and profanity.
3. Harassment related to religion, sex, age, race, sexual orientation, gender identification, national origin, ancestry, or disability. (See Harassment Policy)
4. Demanding make-up exams, extensions, grade changes, special favors, or arguing relentlessly over a grade.

**Level II behaviors will result in the following**

Because these behaviors result in a negative learning environment that impedes the ability of the other students to learn, the student will be asked to leave the classroom or clinical setting.
1. Refusal to leave the class or clinical setting will result in notification of Security.
2. The instructor will schedule a meeting with the Director and student as soon as possible.
3. Disciplinary action by the Director may include any or all of the following:
   - Failure of assignment, activity or test.
   - Academic failure of course and/or clinical.
   - Academic suspension at the discretion of the Director.
   - Dismissal from the School of Nursing.
4. Documentation of the incident may be placed in the student’s file and given to appropriate Graham Hospital administration personnel/departments with possible referral of the incident to the Graham Hospital attorney.
5. All penalties, reimbursements, and fines applicable to Financial Aid.
6. Hospital Security assistance as indicated.

**Level III Behaviors**

1. Threats – Spoken or written words and/or behaviors that intimidate or menace others.
2. Actual physical harm against anyone.

**Level III behaviors will result in the following**
Because these behaviors result in an unsafe learning environment, there will be zero tolerance.

1. Security personnel will be called immediately.
2. Director will be notified immediately.
3. Security personnel will escort the student off of the hospital/school premises.
4. The student will not be allowed on the hospital/school premises until notified by the Director or designee.

Approved:  1/29/07  
Reviewed:  6/1/11, 7/1/12, 5/19/14, 5/22/15, 5/23/17, 4/16/18, 2/20/20  
Revised:  2/22/16, 6/25/19
GRAHAM HOSPITAL SCHOOL OF NURSING

CIVILITY POLICY INCIDENT FORM

NAME OF STUDENT ___________________________ DATE/TIME OF INCIDENT __________

NAME OF INSTRUCTOR ________________________ PLACE OF INCIDENT __________

DESCRIPTION OF INCIVILITY INCIDENT: (Circle one) Level I/ II/ III Behavior

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

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STUDENT RESPONSE TO INSTRUCTOR:

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ACTION

PLAN:

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COMMENTS:

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STUDENT SIGNATURE ___________________________ DATE ______

INSTRUCTOR SIGNATURE ___________________________ DATE ______

DEV. 5/22/13
Reviewed: 5/22/15, 5/23/16, 5/23/17, 4/16/18, 2/20/20
WHAT IS ATI??

- ATI ® (Assessment Technologies Institute) contains programs and resources designed to enhance student academic, NCLEX success and your career in nursing!

- The very comprehensive program offers multiple assessment (tests) and remediation activities. These include assessment Indicators for academic success, critical thinking and learning styles. Also available online are tutorials, practice testing, and proctored testing over the major content areas in nursing. The ATI tools, in conjunction with our nursing program content, assist students to prepare more efficiently, as well as increase confidence and familiarity with nursing content, test taking, NCLEX preparation and your professional career.

- Data from student testing and remediation can be used for program’s quality improvement and outcome evaluation.

- ATI information and orientation resources can be accessed online, refer to the tutorial on the ATI website.

- It is highly recommended that every student spends time navigating these valuable orientation resources.

The instructor has online access to how the student is accessing, and performing in ATI. The information available includes, time and duration of time spent in all of the ATI programs, as well as all scores on each ATI program. Students may be required to provide documentation of completion of all ATI programs that have been assigned. To provide documentation of completion, use the “My Transcript” feature under the “My Results” on the student HOME PAGE. In addition, submission of written remediation templates may also be required.
STUDENT ACKNOWLEDGEMENT:  Initial and sign below:

_____  I have received and read the ATI RESOURCES POLICY.

_____  ATI Confidentiality Statement:  I understand that “All assessment questions are the copyrighted property of Assessment Technologies Institute®, LLC. The removal or attempt to remove questions, or other assessment material from the test site is prohibited. It is forbidden under federal copyright law to copy, reproduce, record, distribute, or disclose these assessment questions by any mean, in whole or in part. A violation of this type can result in civil and criminal penalties.” (Source: ATI Online Assessments – Proctor Manual Rev. 2015)  *This statement applies to any Practice or Proctored Assessments.*

_____  I understand that academic dishonesty concerning the use of ATI assessment products can result in being denied access to all ATI site assessments and products as well as potential civil or criminal penalties, as well as disciplinary action deemed necessary by GHSON.

_____  The Graham Hospital School of Nursing ACADEMIC DISHONESTY policy (GHSON Student Handbook: ACADEMIC DISHONESTY) prohibits academic dishonesty, which includes but is not limited to, cheating, plagiarism, falsification, fabrication, any abuse of academic materials, and complicity in academic dishonesty which includes all ATI materials that may be used in your curriculum.  *Sharing academic materials in any form is academic dishonesty.*

_____  I understand that it is my responsibility to utilize all of the ATI books, tutorials, modules, learning systems/remediation, practice assessments, focused reviews and other ATI resources to the best of my ability.

Signature___________________________  Printed Name_______________________
Date_________________________

Approved:  10/12/15
Reviewed:  5/22/17
Revised:  5/28/19

FH & SH
COMMUNITY SERVICE
Graham Hospital School of Nursing values service and giving back to the community. For future nurses, participating in community service activities provides a sense of personal values and civic responsibility. Service activities are rewarding experiences for all persons involved. Graham Hospital School of Nursing has incorporated community service into the curriculum. Students will have the opportunity to provide a service to their community, but at the same time gain a better understanding of the resources available.

COMMUNITY SERVICE REQUIREMENTS
Each nursing student will be required to complete a minimum of 12 community service hours while enrolled at Graham Hospital School of Nursing. A maximum of 4 hours per year will be accepted for any individual activity. The student must complete a minimum of four hours per year while completing the three-year curriculum. These 12 hours are to be completed by the last week of school of the student’s graduating year. A community service activity is one that meets an unmet need, and the provider of the service is not directly benefited. In other words, it provides a service where no one is normally paid to do the service.

Community service activities include, but are not limited to:
* volunteering to work at health screenings/health fairs
* serving as volunteers for Graham Hospital-sponsored events that serve the public
* volunteering to work with various human service agencies

Examples that would not be accepted include:
* Community service requirements assigned as part of a course requirement at GHSON.
* Walking in an event (such as the Fragile X Walk/Run) is not a service – but working as a volunteer would be acceptable.
* Donating food, clothing, etc. to an agency is not a service – but working as a volunteer to go around and collect the donations would be acceptable.
* Donating money to a charity is not service – but working as a caller or canvassing would be acceptable.

Because all opportunities students may explore may not meet the community service criteria, students should inquire about the acceptability of a particular activity with the program Director, before it is completed if unsure of whether it will qualify as required hours. One example is volunteering at Rock Steady Boxing, which is available only to students who have completed NUR 250 or who are currently enrolled in NUR 310.

COMMUNITY SERVICE REPORTING
Service hours must be signed and submitted by the end of each semester in order to receive credit for your community service hours. You must submit your signed report form to the GHSON Word Processor/Secretary. If not signed and submitted by the end of that semester, you will not receive those hours and you will have to replace them.

Each community service activity will be submitted on a Community Service Hours Report Form.

Dev. 5/23/12
Revised: 8/20/12, 7/23/13, 5/19/14, 5/22/15, 4/16/18, 2/19/19, 4/22/19, 1/23/20, 4/20/20
Reviewed: 5/23/16, 5/23/17
Graham Hospital School of Nursing

Community Service Hours Report Form

Student Name: ____________________________________________

Class of ______________________

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Agency Representative Name: ________________________________ Phone: ______________

Agency Representative Signature: __________________________________________________

I certify that the above information was completed in good faith and is correct to the best of my abilities.

Student Signature: _____________________________________________________

Date: ________________________

Approved: 5/23/12
Revised: 8/20/12
Reviewed: 5/19/14, 5/22/15, 5/23/16, 5/23/17, 4/16/18, 4/22/19

FH & SH
CONFIDENTIALITY OF STUDENT RECORDS

In accordance with the Family Educational Rights and Privacy Act of 1974, Graham Hospital School of Nursing ensures the confidentiality of student records, and that records (including emergency contact information, the cumulative record, health record, advising record, and financial aid record) will not be released other than emergency situations without the written consent of the student, except in the following situations:

1. to other school officials including faculty within the institution who have legitimate educational interests.

2. to authorize representatives of: a) the Comptroller General of the United States, b) the Secretary of the Department of Education, c) State educational authorities, d) accrediting authorities, e) auditors, f) law enforcement personnel in furtherance of a missing person investigation.

3. in connection with the student's application for and receipt of financial aid.

Records will be maintained in locked files in the office of the Coordinator of Admissions, Recruitment, and Financial Aid. Individuals, other than the Coordinator, who review records will be required to sign an Educational Records Review form indicating date and purpose of review.

Approved: 2/18/91
Revised: 9/17/12
GRAHAM HOSPITAL ASSOCIATION SCHOOL OF NURSING

EDUCATIONAL RECORDS REVIEW FORM

Student________________________________________________________ Class of__________

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Directions: This sheet is stapled on the inside cover of each student's Official Admissions Record and Grade folder. Persons who have reason to review these educational records will sign with date, signature, and purpose of the review.

Rationale: The Graham Hospital School of Nursing adheres to the Family Educational Rights & Privacy Act, 1974, as amended.

Approved: 2/18/91
Reviewed 4/28/97, 2/10/99, 5/21/03, 6/1/11, 7/1/12, 5/19/14, 5/22/15, 4/18/16, 5/23/17, 4/16/18, 1/23/20
Revised: 4/22/19
HEALTH RECORD REVIEW FORM

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Directions: This sheet is stapled on the inside cover of each student's official health record folder. Students requesting to review their records after having followed the procedure should, upon viewing their record, date, and sign and describe the purpose of viewing.

Rationale: The Graham Hospital School of Nursing adheres to the Family Educational Rights & Privacy Act, 1974 as amended.

Approved: 2/18/91
Reviewed: 6/1/11, 7/1/12, 5/19/14, 5/22/15, 4/18/16, 5/23/17, 4/16/18, 1/23/20
Revised: 4/22/19
Graham Hospital School of Nursing
Counseling and Guidance Policy

The Coordinator of Admissions, Recruitment, and Financial Aid is available for individual guidance throughout the school year.

Each student will be assigned a faculty advisor. Faculty advisors are available for individual guidance on academic and professional matters. Students are required to meet with their advisors at least once in the fall. Additional meetings can be arranged by either faculty or students at any time throughout the year.

Graham’s Employee Assistance Program (EAP) is a free and confidential service available to employees and students. Services are provided by counselors with a master’s degree. Services provided include: marriage, family problems, stress-related problems, financial and legal difficulties, psychological and workplace conflicts. There is no cost for up to six EAP sessions. EAP is accessible 24-hours a day, 7 days per week through Spoon River Counseling and Wellness by calling 309-740-2171. If you choose to call them, please identify yourself as a Graham employee and/or student so they recognize that you are under the Graham assistance plan. EAP is a confidential resource where no one at work or school will know you’ve come unless you choose to talk about your experience. Names are not used on reports received by the hospital. They are just told numbers using the service for financial reimbursement.

4/28/97
Reviewed: 2/10/99, 6/1/11, 7/1/12, 5/19/14, 5/23/17, 1/23/20
Revised: 5/21/01, 2/13/13, 5/22/15, 2/22/16, 4/18/16, 4/16/18, 4/22/19

Graham Hospital School of Nursing
Tutoring Policy

Tutoring assistance is available to students from a variety of sources. Please contact your instructor/advisor first if you feel that you need additional help. Graham Hospital School of Nursing students can also obtain assistance through Spoon River College’s Student Success program. The Director maintains a current list of sources each year including peer tutors.

Approved: 4/18/16
Reviewed: 5/23/17, 1/23/20
Revised: 4/16/18, 4/22/19
GRAHAM HOSPITAL
SCHOOL OF NURSING

C.P.R. POLICY

Students must have a current American Heart Association Basic Life Support (B.L.S.) card for health care providers by the start of the academic year.

5/24/95
Reviewed: 6/1/11, 5/24/12, 5/19/14, 4/18/16, 5/23/17, 4/16/18, 1/23/20
Revised 2/26/96, 4/28/97, 5/22/03, 7/11/13, 5/28/15, 4/22/19
Graham Hospital School of Nursing
Disability Support Services Policy

It is the policy of Graham Hospital School of Nursing, in compliance with Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990 (ADA), and ADA Amendments Act of 2008 (ADAAA), to provide support services ensuring that students with disabilities have equal access to all educational opportunities offered at Graham Hospital School of Nursing. Reasonable accommodations will be made for qualified students with disabilities unless those disabilities impose an undue hardship on the School or fundamentally alter the essential characteristics or nature of the academic program. Likewise, the School need not provide the exact accommodation requested by the student. The School may provide alternate accommodations as long as they are reasonable and appropriate to make the School’s programs, activities, services, and facilities accessible to that individual.

_Disability_ means, with respect to an individual, a physical or mental impairment that substantially limits one or more of the major life activities of such an individual; a record of such an impairment; or being regarded as having such an impairment.

_Physical or mental impairment_ means any physiological disorder or condition affecting one or more body systems; or any mental or psychological disorders.

_Physical or mental impairment_ includes, but is not limited to, diseases and conditions such as orthopedic and sensory impairments, emotional illness, dyslexia and other specific learning disabilities, and Attention Deficit Hyperactivity Disorder, among others.

_Major life activities_ include, but are not limited to, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, sitting, reaching, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, writing, communicating, interacting with others, and working; and the operation of a major bodily function.

For the purposes of this policy, a _qualified student with a disability_ means an individual with a disability who meets the eligibility criteria established for acceptance and continued participation in the School's nursing program, including performance of the Essential Functions for Students of Nursing, with or without reasonable accommodations.

Students seeking accommodations must document that they are a person with a disability by providing information on the nature and extent of the disability, the functional limitations resulting from the disability, and the accommodation requested. Documentation is used to design a plan that:

1. Provides an equal opportunity to meet the standards of the nursing program;
2. Is based on the types of reasonable accommodation as identified by the health/education professional;
3. Accommodates only those areas impacted by the disability; and
4. Identifies the exams and testing modalities that are exempt from reasonable accommodation because they are designed to measure a particular skill and/or essential function associated with the normal roles of a professional registered nurse.
In order to initiate services, new students must first complete the Graham Hospital School of Nursing Disability Support Services Initial Request for Services form, available from the Coordinator of Admissions, Recruitment, and Financial Aid.

Additional current and relevant documentation may be required by Graham Hospital School of Nursing from an evaluator qualified to make the diagnosis. A list of acceptable document and qualified evaluators can be obtained from the Coordinator of Admissions, Recruitment, and Financial Aid.

Other requests for Disability Support Services for disabilities not listed on the previous page will be reviewed by the Admission, Retention, Promotion, and Graduation Committee on a case-by-case basis.

Once the student's documentation is on file with the Coordinator of Admissions, Recruitment, and Financial Aid, the Coordinator will review the information and documentation provided by the student and, if and as necessary, consult with other members of the School community. In some cases, it may be necessary for the Coordinator to contact the medical or health professional providing the report to obtain further information or clarification. Although documentation from professionals may include specific recommendations for accommodation, the Coordinator reserves the right to determine what accommodation is reasonable and appropriate within the School setting and within technical and academic requirements of the program.

After her evaluation, the Coordinator will schedule an appointment with the student to discuss the appropriate accommodations, how to access available services available from Graham Hospital School of Nursing and Spoon River College, and answer any questions the student may have. The student will then complete the Disability Support Services Request for Services form, which the Coordinator will share with the student’s instructor(s). The instructor(s) may request a meeting with the student to discuss the implementation of the accommodation. The student must complete a new Request for Services form each semester.

Examples of accommodations include texts in an alternate format, preferential seating, extended time (50% more) for testing, and a reduced-distraction testing environment. A reduced-distraction testing environment is an area that is reasonably quiet with low auditory and visual distractions. The environment doesn't need to be a private or completely distraction-free room. The Instructor may spread out test takers, provide desk carrels and/or provide ear plugs/noise-canceling head phones. A private testing environment will be approved only for a student whose accommodation could prove a distraction to other students, such as reading aloud, having a reader, or having a scribe.

Accommodations are not retroactive; that is, they do not impact tests or work completed prior to the student’s submission of the relevant forms and documentation and the School’s determination of any necessary accommodation. The NCLEX or standardized tests for graduate schools may require additional documentation and may not approve accommodations granted by Graham Hospital School of Nursing.

The student should inform the Coordinator of Admissions, Recruitment, and Financial Aid when the accommodation is not being implemented, when it is not effective or necessary, when it might need to be adjusted, or when it is no longer being utilized.
GRAHAM HOSPITAL SCHOOL OF NURSING
DISABILITY SUPPORT SERVICES
INITIAL REQUEST FOR SERVICES

The purpose of this form is to give the student the opportunity to tell us about their temporary and permanent physical, psychological, and learning disabilities and to assist the School in assessing whether we can provide effective accommodations. The request process includes:

1. Submission of this Initial Request for Services form;
2. Interview with the Coordinator of Admissions, Recruitment, and Financial Aid;
3. Submission of Request for Verification of Disability/Disorder form or other documentation (if applicable); and
4. Submission of Request for Services form (notification to instructor(s) and academic advisor).

Name ___________________________ S.S.# XXX-XX-________

Telephone ________________

What is the nature of your disability? □ Physical □ Mental/Psychological □ Learning

Please describe your disability.__________________________________________________________

__________________________________________________________

Have you been tested for and/or received a diagnosis for your disability? If yes, please explain:________

____________________________________________________________________________________

__________________________

Please indicate the name of the agency and/or health care professional with whom you are working.

____________________________________________________________________________________

__________________________

Are you currently taking any medication(s) related to your disability?

____________________________________________________________________________________

☐ Yes Specify:__________________________________________________________

Possible side effects:__________________________________________________________

☐ No

Please describe the major life activities that are substantially limited by your disability.__________________________
Please describe how the disability affects your academic performance and/or school experience.

Have you received accommodations for your disability in previous academic settings? If yes, please explain.

Accommodations requested:

I understand that professional documentation of my disability may be required before I begin receiving accommodation services, and that I am responsible for obtaining and providing this documentation to the Coordinator of Admissions, Recruitment, and Financial Aid.

I further understand that, if I have an existing disability, I must submit this Request and any supporting documentation by August 1. If I later suspect I have a disability, I must submit this Request and schedule an appointment with an evaluator qualified to the disability by September 30.

Signature

Date

Office Information Only

Documentation of disability received:

□ Yes  Date: ________________________________

□ No

Student eligible for disability support services:

□ Yes

□ No (explain): ________________________________

Please describe how the disability affects your academic performance and/or school experience.________

Have you received accommodations for your disability in previous academic settings? If yes, please explain.__________________________________________

Accommodations requested:__________________________________________

I understand that professional documentation of my disability may be required before I begin receiving accommodation services, and that I am responsible for obtaining and providing this documentation to the Coordinator of Admissions, Recruitment, and Financial Aid.

I further understand that, if I have an existing disability, I must submit this Request and any supporting documentation by August 1. If I later suspect I have a disability, I must submit this Request and schedule an appointment with an evaluator qualified to the disability by September 30.

Signature__________________________________________

Date__________________________________________

Office Information Only

Documentation of disability received:

□ Yes  Date: ________________________________

□ No

Student eligible for disability support services:

□ Yes

□ No (explain): ________________________________
Disability Support Services
Request for Services

By completing this form, I understand that a notice will be sent to my instructor(s) and, if appropriate, my academic advisor informing them of the services that are recommended.

I understand that I must complete a new Disability Support Services Request for Services form each semester/term no later than one week prior to the start of that semester/term.

Name ________________________________ S.S.# XXX-XX-

Phone ________________________________ Semester/Term ________________________________

Signature ________________________________ Date ________________________________

Complete this section for each course in which you need classroom or testing accommodations.

<table>
<thead>
<tr>
<th>Course ________________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Instructor(s) __________________________</td>
</tr>
<tr>
<td>Approved Classroom Accommodations:</td>
</tr>
<tr>
<td>• __________________________________________</td>
</tr>
<tr>
<td>• __________________________________________</td>
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<tr>
<td>• __________________________________________</td>
</tr>
<tr>
<td>Approved Testing Accommodations:</td>
</tr>
<tr>
<td>• __________________________________________</td>
</tr>
<tr>
<td>• __________________________________________</td>
</tr>
<tr>
<td>• __________________________________________</td>
</tr>
</tbody>
</table>

Signature, Coordinator of Admissions, Recruitment & Financial Aid ________________________________ Date ________________________________
English as a Second Language  
Request for Services  

At Graham Hospital School of Nursing, we do not offer English as a Second Language classes for students whose native language is other than English. However, Spoon River College does offer English as a Second Language (ESL) classes. These classes are designed to help students become proficient in both spoken and written English skills with cultural orientation to the community. Students are assisted by trained volunteer tutors. Contact Spoon River College at 649-6278 for more information.

In order to initiate services, you must complete the English as a Second Language Form available from the Coordinator of Admissions, Recruitment, and Financial Aid office.

Adopted 5/23/11
Reviewed: 7/1/12, 5/19/14, 5/28/15, 4/18/16, 5/23/17, 4/16/18, 4/22/19
English as a Second Language  
Request for Services Form

By completing this form, I understand that a notice will be sent to my instructor(s) informing them of the services that I am requesting. **I understand that I must complete a new English as a Second Language Request for Services each semester.**

Name_________________________________________

What is your native language? ___________________________

How long have you been in the United States? _____________

Have you completed any English as a Second Language (ESL) classes? ______

Academic Term: ______________________

Signature: ____________________________ Date: __________________________

**Complete this section for each course in which you are in need of classroom or testing accommodations**

<table>
<thead>
<tr>
<th>Course</th>
<th>____________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Instructor(s)</td>
<td>________________________________________________</td>
</tr>
</tbody>
</table>

**Approved Classroom Accommodations:**

- ____________________________________________
- ____________________________________________
- ____________________________________________

**Approved Testing Accommodations:**

- ____________________________________________
- ____________________________________________
- ____________________________________________

Adopted 5/23/11  
Reviewed:  7/1/12, 5/19/14, 5/28/15, 4/18/16, 5/23/17, 4/22/19  
Revised: 4/16/18
Drug-Free Schools and Communities Act Amendments

Under the Drug-Free Schools and Communities Act Amendments of 1989, Public Law 101-226, all schools must provide students with information regarding standards of conduct, legal and institutional sanctions, health risks and counseling services related to substance abuse on campus. Questions concerning this policy and/or alcohol and other drug programs, interventions and policies may be directed to the Director of the School of Nursing at (309) 647-4086.  (Campus Safety Report)

School Policies & Sanctions

As an academic community, Graham Hospital School of Nursing is committed to providing an environment in which learning and scholarship can flourish. The possession or use of illegal drugs, or the abuse of those which may otherwise be legally possessed, seriously affects the learning environment, as well as the individual potential of our students and staff. The school enforces state laws and related school/hospital policies.

The abuse of alcohol and other drugs by students, regardless of age and location (on-campus or off-campus), is prohibited by the Graham Hospital General Conduct (pgs. 9-10). The school can, and will, impose disciplinary sanctions for violations. Students are also subject to city ordinances and state and federal laws.

The school strongly encourages students and staff members to voluntarily obtain assistance for dependency or abuse problem before such behavior results in an arrest and/or disciplinary action which might result in their separation from the institution. (See Drug Screening Program & Substance Abuse Policy, pgs. 85-93).

The use of, or addiction to alcohol, marijuana, or controlled substances is not considered an excuse for violations of the Graham Hospital Code of Conduct or staff expectations, and will not be a mitigating factor in the application of appropriate disciplinary sanctions for such violations. (Campus Safety Report)

Counseling & Treatment

Help is available through the school and within the community for students and staff members who are dependent on, or who abuse the use of alcohol or other drugs. Graham Hospital has an Employee Assistance Program (EAP) which is a free and confidential service available to employees and members of their immediate household. This service is also available for students at Graham Hospital School of Nursing. (See Counseling & Guidance Policy, pg. 72) (Campus Safety Report)

<table>
<thead>
<tr>
<th>On-Campus Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Graham Hospital Employee Assistance Program</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

(Campus Safety Report)
Off-Campus Resources

<table>
<thead>
<tr>
<th>Resource</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol &amp; Drug Professionals of Fulton County, Canton, IL</td>
<td>(309) 649-1002</td>
</tr>
<tr>
<td>Countermeasures, Pekin, IL</td>
<td>(309) 347-8282</td>
</tr>
<tr>
<td>Gateway Foundation Inc. Alcohol &amp; Drug Treatment, Pekin, IL</td>
<td>(309) 346-8282</td>
</tr>
<tr>
<td>North Central Behavior Health Systems, Fulton &amp; McDonough Counties</td>
<td>(309) 647-1881</td>
</tr>
<tr>
<td>Richardson Counseling Center, Bartonville, IL</td>
<td>(309) 633-1030</td>
</tr>
<tr>
<td>Schuyler Counseling &amp; Health Services, Rushville, IL</td>
<td>(217) 322-4373</td>
</tr>
<tr>
<td>Tazwood Center for Wellness, Pekin, IL</td>
<td>(309) 347-5522</td>
</tr>
<tr>
<td>United in Jesus Outreach Ministries</td>
<td>(309) 649-1618</td>
</tr>
<tr>
<td>Wells Center Mason County</td>
<td>(309) 543-2330</td>
</tr>
</tbody>
</table>

(Campus Safety Report)

LEGAL SANCTIONS

For specific legal sanctions and/or information on substance abuse and prevention, please go to the following links:

**Controlled Substances:**

- **Federal:** U.S. Department of Justice, Drug Enforcement Administration – [www.dea.gov](http://www.dea.gov) Click on “Drug Info – Federal Trafficking Penalties”. Information on prevention can be found by clicking on the “Prevention” tab.


**Alcohol – Illinois laws and penalties**


**Other Helpful Sites:**

- [www.samhsa.gov](http://www.samhsa.gov) – U.S. Department of Health & Human Services, Substance Abuse & Mental Health Services Administration

(Campus Safety Report)

Reviewed: 7/1/12, 7/1/13, 4/22/19
Revised: 7/1/14, 6/19/17
### Health Risks of Commonly Abused Substances

<table>
<thead>
<tr>
<th>Substance</th>
<th>Nicknames/Slang Terms</th>
<th>Short Term Effects</th>
<th>Risks/Long Term Effects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol</td>
<td>Slurred speech, drowsiness, headaches, impaired judgment, decreased perception and coordination, distorted vision and hearing, vomiting, breathing difficulties, unconsciousness, coma, blackouts</td>
<td>Toxic psychosis, physical dependence, neurological and liver damage, fetal alcohol syndrome</td>
<td></td>
</tr>
<tr>
<td>Amphetamines</td>
<td>Increased heart rate, increased blood pressure, dry mouth, loss of appetite, restlessness, irritability, anxiety</td>
<td>Loss of appetite, delusions, hallucinations, heart problems, hypertension, irritability, insomnia, toxic psychosis</td>
<td></td>
</tr>
<tr>
<td>Barbiturates and Tranquilizers</td>
<td>Slurred speech, muscle relaxation, dizziness, decreased motor control</td>
<td>Severe withdrawal symptoms, possible convulsions, toxic psychosis, depression, physical dependence</td>
<td></td>
</tr>
<tr>
<td>Cocaine</td>
<td>Loss of appetite, increased blood pressure and heart rate, contracted blood vessels, nausea, hyper-stimulation anxiety, paranoia, increased hostility, increased rate of breathing, muscle spasms and convulsions, dilated pupils, disturbed sleep</td>
<td>Loss of appetite, depression, weight loss, seizure, heart attack, stroke, hypertension, hallucination, psychosis, chronic cough, nasal passage injury</td>
<td></td>
</tr>
<tr>
<td>Gamma Hydroxy Butyrate</td>
<td>Euphoria, decreased inhibitions, drowsiness, sleep, decreased body temperature, decreased heart rate, decreased blood pressure</td>
<td>Memory loss, depression, severe withdrawal symptoms</td>
<td></td>
</tr>
<tr>
<td>Heroin</td>
<td>Euphoria, flushing of the skin, dry mouth, “heavy” arms and legs, slowed breathing, muscular weakness</td>
<td>Physical dependence, constipation, loss of appetite, lethargy</td>
<td></td>
</tr>
<tr>
<td>Ketamine</td>
<td>Dream-like states, hallucinations, impaired attention and memory, delirium, impaired motor function, high blood pressure, depression</td>
<td>Major convulsions, muscle rigidity</td>
<td></td>
</tr>
<tr>
<td>LSD</td>
<td>Dilated pupils, change in body temperature, blood pressure and heart rate, sweating, chills, loss of appetite, decreased sleep, tremors, changes in visual acuity, mood changes</td>
<td>May intensify existing psychosis, panic reactions, can interfere with psychological adjustment and social functioning, insomnia</td>
<td></td>
</tr>
<tr>
<td>MDMA</td>
<td>Impaired judgment, confusion, blurred vision, teeth clenching, depression, anxiety, paranoia, sleep problems, muscle tension</td>
<td>Same as LSD, sleeplessness, nausea, confusion, increased blood pressure, sweating</td>
<td></td>
</tr>
<tr>
<td>Marijuana/Cannabis</td>
<td>Sensory distortion, poor coordination of movement, slowed reaction time, panic, anxiety</td>
<td>Bronchitis, conjunctivitas, lethargy shortened attention span, cancer</td>
<td></td>
</tr>
<tr>
<td>Drug</td>
<td>Common Names</td>
<td>Symptoms</td>
<td>Possible Complications</td>
</tr>
<tr>
<td>------------</td>
<td>----------------------</td>
<td>-------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------</td>
</tr>
<tr>
<td>Mescaline</td>
<td>Peyote cactus</td>
<td>Nausea, vomiting, anxiety, delirium, hallucinations, increased heart rate, blood pressure, and body temperature</td>
<td>May intensify existing psychosis, hallucinations at high doses</td>
</tr>
<tr>
<td>Morphine</td>
<td>M, morf</td>
<td>Euphoria, increased body temperature, dry mouth, “heavy” feeling in arms and legs</td>
<td>Physical dependence, constipation, loss of appetite</td>
</tr>
<tr>
<td>PCP</td>
<td>Crystal, tea, angel dust</td>
<td>Shallow breathing, flushing, profuse sweating, numbness in arms and legs, decreased muscular coordination, nausea, vomiting, blurred vision, delusions, paranoia, disordered thinking</td>
<td>Psychotic behavior, violent acts, psychosis, hallucinations at high dose</td>
</tr>
<tr>
<td>Psilocybin</td>
<td>Magic mushrooms, shrooms</td>
<td>Nausea, distorted perceptions, nervousness, paranoia</td>
<td>May intensify existing psychosis, confusion, memory loss, shortened attention span, flashbacks</td>
</tr>
<tr>
<td>Steroids</td>
<td>Roids, juice</td>
<td>Increased lean muscle mass, increased strength, acne, oily skin, excess hair growth, high blood pressure</td>
<td>Cholesterol imbalance, acne, baldness, anger management problems, masculinization in women, breast enlargement in men, premature fusion of long bones preventing attainment of normal height, atrophy of reproductive organs, impotence, reduce fertility, stroke, hypertension, congestive heart failure, liver damage</td>
</tr>
</tbody>
</table>

In the United States during 2019, the most commonly abused drugs were alcohol, marijuana, and opioids.

Opioids are a class of drugs that include illegal drugs such as heroin, synthetic opioids such as fentanyl, and prescription pain relievers such as Vicodin, codeine, and morphine. Opioids are often misused to create a sense of euphoria. They alter a person’s thinking and judgment. Regular use of opioids can lead to dependence, addiction, overdose, and death.

Reviewed: 7/1/12, 7/1/13
Revised: 7/1/14, 7/3/19
Graham Hospital School of Nursing

Drug Screening Program

All students must clear an initial urine drug test. Failure to undergo this test, a positive drug screen, or a tampered-with urine sample may result in dismissal from the program.

The initial drug screen will be completed during the summer months prior to classes starting in August. Students who are current employees of Graham Hospital and have had a drug screen completed for employment are not exempt from the school drug screening. The school conducts a different drug panel from the hospital in accordance with the requirements needed to satisfy all clinical agencies used by the school.

Initial Procedure

1. Students receive drug screen forms from the School of Nursing Office. A school representative will escort the student to the Graham Hospital laboratory on the date determined by the school.
2. All urine specimens will be collected by trained personnel in a manner to ensure integrity of the specimen. Tampering with, altering, or contaminating a specimen in any manner will result in dismissal from the School of Nursing.
3. The student will be notified only of positive test results by the Medical Review Officer. Students have the right to appeal a positive drug test by immediately requesting in writing a retest of the original specimen at their own expense.
4. Any student with a positive test result for drugs will be provided a reasonable opportunity to establish a legitimate medical explanation for the positive test result to the satisfaction of the Medical Review Officer.

Random Screenings

Students will be subject to random drug/alcohol screening throughout the duration of their nursing curriculum. Student names will be randomly drawn each month for a drug screen. Upon notification of a random screen, the student is required to immediately report to the office to be escorted to the lab for testing. A student could be selected more than once in a year as the names are placed back into the selection pool.

1. Positive Drug Screen: Students who have a positive drug/alcohol screen from a random test will be notified by the Medical Review Officer (steps 3 and 4 of the initial procedure listed above will be followed).
2. Disciplinary Action: Students who test positive on a random screen will be placed on probation until their graduation and will be subject to random testing for the rest of the program. A second positive test will result in dismissal from the program. Readmission will be determined on a case-by-case basis by the Admission, Retention, Promotion, and Graduation Committee. If readmitted, the student will be subject to random drug testing until graduation. Failure to comply with testing or a positive test will result in immediate dismissal.

(Campus Safety Report)

Adopted: 5/24/12
Revised: 7/11/13, 5/19/14, 5/28/15
Reviewed: 4/18/16, 5/23/17, 4/16/18, 4/20/20
GRAHAM HOSPITAL SCHOOL OF NURSING  
SUBSTANCE ABUSE POLICY

Students have a responsibility to their clients to deliver care in a safe and conscientious manner. In order to ensure that this responsibility is met, students must be able to work free from the effects of alcohol and other performance-impairing substances. The School of Nursing has instituted this policy to address the hospital's need to assure our employees, students, and patients can coexist in an environment free of substance abuse in the classroom and clinical setting.

1. Any student who:

   A. unlawfully manufactures, distributes, dispenses, possesses, or uses alcohol or a controlled substance (which has not been prescribed for use by the student) on Graham Hospital owned and controlled property and/or any site where students participate in clinical experiences and/or;

   B. reports for class, clinical, skills lab practice, graduation, or conferences sponsored by Graham Hospital or the School of Nursing under the influence of alcohol or a controlled substance and/or;

   C. becomes under the influence of a controlled substance while acting in the scope of student responsibilities as a result of the use of alcohol and/or drugs which have not been properly prescribed and used in accordance with the doctor’s instructions and/or;

   D. is confirmed by faculty member or nursing supervisor to have alcohol on the breath while acting in the scope of student responsibilities while on Graham Hospital controlled property and/or any site where students participate in clinical experiences.

will be subject to the following discipline:

   A. SUSPENSION: Immediate temporary removal from the program while possible substance abuse violations are being investigated through an alcohol or drug test to be administered by Graham Hospital and until drug and/or alcohol test results are available. If test results are positive, suspension will be for a total of one week of class and clinical, recorded as school absences. Further disciplinary action will be instituted as below:

   B. PROBATION: For a first offense, the student whose drug and/or alcohol tests results are positive will, after the suspension period of one week, be placed on probation for the remainder of the student's nursing program. Probation requires the student not use or be under the influence of drugs or alcohol while on Graham Hospital owned and controlled property and/or any site where the student participates in clinical experiences. The student will also be subject to random testing for the remainder of their school curriculum. If the random testing shows the use of any alcohol or controlled substance which has not been properly prescribed and used, the student will be subject to discipline up to and including termination. Random testing will be done while the student is at school at times and dates determined by the instructor or school Director at their sole discretion. The student will also be required to obtain substance abuse counseling, at their own cost, and follow the recommendations of the counselor after evaluation and treatment. The student, as a condition of continued enrollment, agrees to authorize the release of the evaluation results and any recommendations of the counselor to Graham Hospital so that they can monitor the recommendations imposed upon the student by the counselor. Referral information for substance abuse counseling will be provided.

(Campus Safety Report)
C. DISMISSAL: If a student on probation is confirmed to have violated the terms of Probation, the student will be immediately dismissed from the program.

Should the school later decide to readmit the student to the program, the student would be placed on probation for the remainder of the school program and be subject to random drug and/or alcohol testing which could be requested by the instructor or school Director at any time.

2. Whenever the instructor or staff has reason to suspect that a student is using illegal drugs, using legal drugs illegally, or using alcohol while on the Graham Hospital owned and controlled property and/or any site where the student participates in clinical experiences, the school reserves the right to require the student to submit to a breath, blood, and/or urine test. See "Procedure for Implementation of the Substance Abuse Policy" for guidelines.

3. The student undergoing medically prescribed treatment with a controlled substance which may limit the student's ability to perform on the job or in school must report that treatment and possible side effects to the instructor and school Director at the beginning of each course. The student may have their responsibilities changed to maintain a safe environment for the student and/or the patients the student is working with. Failure to report this information to the instructor shall be cause for appropriate disciplinary action. It is the student's responsibility to determine from his/her physician whether a prescribed drug may impair clinical or class performance. This information will be treated confidentially.

4. It shall be the responsibility of each student who observes or who has knowledge of another student in a condition which impairs his/her ability to perform in the clinical setting, who poses a hazard to the safety and welfare of others, or who is otherwise in violation of this policy to promptly report that fact to the clinical/course instructor or staff.

5. Students are required to notify the Director of the School of Nursing of any criminal drug conviction resulting from a violation occurring at the hospital no later than five days after conviction.

6. Graham Hospital School of Nursing will notify the appropriate federal agency from which the student receives federal funds within ten days after receiving notice of such a conviction from a student.

7. Within 3 days of receiving notice of a conviction, the school will institute appropriate disciplinary action as listed in #1 on the previous page.

8. For the purposes of this policy, the following definitions apply:
   a. A CONTROLLED SUBSTANCE or ILLEGAL DRUG is one which either:
      1) is not legally obtainable.
      2) is being used in a manner different from that prescribed.
      3) is legally obtainable but has not been legally obtained.

   b. A CONVICTION is defined as finding of guilt (including a plea or no contest) or imposition of a sentence, or both, by any judicial body charged with responsibility of determining violations of the federal or state criminal drug statutes.

(Campus Safety Report)

Adopted: 5/26/93
Reviewed: 4/15/98, 6/1/11, 7/1/12, 5/28/15, 4/18/16, 5/23/17, 4/16/18, 4/20/20
Revised: 7/11/13, 5/19/14
PROCEDURE FOR IMPLEMENTATION OF THE SUBSTANCE ABUSE POLICY

Graham Hospital School of Nursing will require a blood and/or urine test to be obtained (1) for analysis on the student suspected of being under the influence of using drugs and/or alcohol or (2) for a student placed on probation. The school must have reasonable cause based on specific, objective facts to suspect substance abuse. These behaviors may include, but are not limited to, chronic absenteeism, tardiness, sleeping in class, erratic behavior, inattention to direction, alteration in usual behavior, appearing intoxicated, having the smell of alcohol on the breath, or other behavior that would suggest substance abuse. If the student has no reasonable, verifiable explanation for his/her behavior, the following procedure will be implemented. (Campus Safety Report, pg. 33)

BEFORE REQUESTING DRUG AND/OR ALCOHOL TESTING

When a student's behavior in classroom or clinical performance suggests substance abuse:

a. The supervising instructor must identify specific behaviors that indicate there is reasonable cause to require questioning and/or testing.

b. The instructor should inform the Director of the school as soon as possible.

c. The instructor shall have the Director of the school or another instructor present during questioning to learn of the student’s explanation of his/her condition and in so doing determine the need for testing. If the Director or another instructor is unavailable, a Nursing Service Department Head or Hospital Administrator should be present.

d. If the student has a reasonable explanation for his/her condition and the instructor or Director determined, in their sole discretion, the explanation is reasonable and supported by facts, and further, the student is then fit for class or clinical, then in that event, the student should return to his/her previous setting. (Campus Safety Report, pg. 34)

DRUG AND/OR ALCOHOL TESTING AND SUSPENSION

1. If the student refuses to respond to questioning, the instructor shall request that the student meet privately with the Director of the school to provide an explanation of the refusal to respond. If the student refuses to respond to questioning AND refuses to meet with the Director of the school, the student will be informed that he/she is immediately dismissed from the program by the Director of the school.

2. If the student responds to questioning but refuses to comply with drug and/or alcohol testing as requested, the Director of the school will inform the student that he/she is immediately dismissed from the program.

3. If the student responds to questioning and agrees to drug and/or alcohol testing as requested, the Director of the school or instructor shall have the student sign the Consent Form for Alcohol and/or Drug Testing. The Director of the school or the instructor shall personally escort the student to the laboratory.

(Campus Safety Report)
a. The specimen(s) shall be treated with caution to preserve the "chain of evidence" as much as possible, according to the hospital procedure.
b. The specimen(s) shall be processed by the lab in the same manner as random drug screens.
c. Results will be reported to the Medical Review Officer. He/she will then communicate the significance of the results to the Director of the school.
d. Pending determination of test results, the Director of the school will inform the student that he/she will be suspended from class and clinical and that, in the event of positive test results, he/she will be placed on probation.

4. Information concerning possible violations of the School of Nursing regulations concerning drug and/or alcohol use is to be restricted to those persons who are participating in reporting, questioning, observation, assessment, investigation, prosecution, or implementation of disciplinary action. Counsel for the hospital shall also be privy to the test results and any information relevant to or necessary for the investigation and prosecution of the incident.

5. Instructors and the Director of the school are not to attempt to use force in seeking compliance of the student with questioning or with testing. Security personnel should be called if the instructor or Director of the school determines that the student should not remain in the clinical or classroom setting, but the student refuses to leave.

6. Once the student has been suspended or determined to be unfit for school, arrangements for disposition must be made. The student will not be allowed to drive or go home alone. An adult family member or friend may be permitted to escort the student from the hospital or school premises.

7. A severely impaired student should be taken to the Emergency Department for appropriate evaluation and treatment.

8. The School of Nursing will refer illegal drug activities to law enforcement, licensing, financial aid, and/or credentialing agencies when appropriate.

(Campus Safety Report)

5/26/93
Reviewed: 4/15/98, 6/1/11, 7/1/12, 5/28/15, 4/18/16, 5/23/17, 4/16/18, 4/22/19, 4/20/20
Revised: 5/19/14
## SECTION I
### OBSERVATION CHECKLIST FOR STUDENT SUSPECTED OF SUBSTANCE ABUSE

Directions: Check all appropriate boxes in each category.

1. **Walking/Standing:**
   - Stumbling
   - Swaying
   - Unable
   - **normal**
   - **Unsteady**

2. **Speech:**
   - Shouting
   - Slow
   - Rambling/incoherent
   - **normal**
   - **Silent**

3. **Demeanor:**
   - Sleepy
   - Talkative
   - **normal**
   - **Excited**

4. **Actions:**
   - Sluggish
   - Threatening
   - Hyperactive
   - Resisting communication
   - **normal**
   - **Fighting**

5. **Eyes:**
   - Bloodshot
   - Watery
   - **normal**
   - **Glassy**

6. **Face:**
   - Flushed
   - **normal**
   - **Sweaty**

7. **Clothing:**
   - Bizarre
   - Body excrements
   - **normal**
   - **Stained**

8. **Breath:**
   - Alcohol odor
   - **normal**
   - **Faint alcohol odor**

9. **Movements:**
   - Fumbling
   - Slow
   - **normal**
   - **Jerky**

10. **Eating/chewing:**
    - Gum
    - Tobacco
    - **normal**
    - **Mints**

Record any other specific observations:

---

Instructor/Staff Member's Signature

Witness' Signature

5/26/93

Reviewed: 4/15/98, 6/1/11, 7/1/12, 7/11/13, 5/19/14, 5/28/15, 4/18/16, 5/23/17, 4/16/18, 4/22/19, 4/20/20
SECTION II
QUESTIONNAIRE
FOR STUDENT SUSPECTED OF SUBSTANCE ABUSE

Directions: Conduct interview with student in the presence of another faculty or nursing staff member. Allow student to choose a peer to be present during the interview if desired. Use a private office or meeting room whenever possible. The instructor/staff member shall ask each question in order and will record student's answer.

If the student refuses to answer every question, he/she will be immediately suspended from the School of Nursing.

Student's Name:__________________________________________ Date:__________________

Co-worker name (if present):__________________________________________

1. Are you feeling ill? { } yes { } no
   If "yes", what are your symptoms?
   ________________________________________________________________

2. Are you under a doctor's care? { } yes { } no
   If "yes", what are you being treated for?
   ________________________________________________________________
   If "yes", when did you last visit the doctor?
   ________________________________________________________________
   What is your doctor's name?
   ________________________________________________________________
   May we contact your doctor to verify this information? { } yes { } no

3. Are you taking any medication? { } yes { } no
   If "yes", what medications?
   ________________________________________________________________
   If "yes", when did you take your last dosage(s)?
   ________________________________________________________________

4. Do you have any medication in your possession? { } yes { } no
   May we examine the medication(s)? { } yes { } no
   Record any identifying information and take sample if permitted by employee.

5. Do you have any medical problems? { } yes { } no
   If "yes", please explain:
   ________________________________________________________________
   Are you diabetic? { } yes { } no
   Are you taking insulin? { } yes { } no
   Do you have a seizure disorder or epilepsy? { } yes { } no
6. Do you have a cold or flu? { } yes { } no
   Are you taking any cold pills? { } yes { } no
   Are you taking any cough medicine? { } yes { } no
   Are you taking any antihistamines? { } yes { } no

   Record any comments:______________________________________________________

7. Did you use any type of drug? { } yes { } no
   If "yes", what kind, when, where, with whom, and how much?________________________
   ____________________________________________

8. Did you drink alcohol or an alcoholic beverage today? { } yes { } no
   If "yes", what kind, when, where, with whom, and how much?________________________
   ____________________________________________

9. Do you have any explanation for your present condition? { } yes { } no
   Record any comments:________________________________________________________

   Questioner’s Signature

   Witness’ Signature

5/26/93
Reviewed: 4/15/98, 6/1/11, 7/1/12, 7/11/13, 5/19/14, 5/28/15, 4/18/16, 5/23/17, 4/16/18, 4/22/19, 4/20/20
SECTION III
ASSESSMENT AND DISPOSITION OF STUDENT SUSPECTED OF SUBSTANCE ABUSE

Directions: Check the appropriate boxes in each item and write comments below.

Student Name:

1. Student appears to be under the influence of drugs and/or alcohol. { } yes { } no { } uncertain

2. Student is fit for class or clinical. { } yes { } no { } uncertain

3. Discussed Section I, II, and III with Director of the school. { } yes { } no

4. Testing ordered by Director of the school. { } yes { } no

5. Student suspended. { } yes { } no

6. Student disposition:
   { } returned to class or clinical { } taken to ED for treatment
   { } sent home:
       { } with family member
       { } with friend
   { } refused assistance and left premises

7. Police notified by Director of the school with the approval of President/CEO of Graham Hospital.
   { } yes { } no { } not applicable

Record any additional comments or student's response:_______________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

Instructor's Signature                           Witness' Signature

A. Submit original copies of I, II, and III to Director of the school.
B. After review by Director of the school, original copies will be placed in the student's file.

5/26/93
Reviewed: 4/15/98, 6/1/11, 7/1/12, 5/28/15, 4/18/16, 5/23/17, 4/16/18, 4/22/19, 4/20/20
Revised: 7/11/13, 5/19/14, 7/3/14
Graham Hospital School of Nursing
Financial Aid Policy

All students receive a Financial Aid Handbook and School Catalog each academic year outlining the federal, state, private, and institutional guidelines for financial aid policies and procedures.

The student's financial aid file is maintained in the office of the Coordinator of Admissions, Recruitment, and Financial Aid. The guidelines for record-keeping are in this handbook.
Graham Hospital School of Nursing

Gift Policy

In keeping with the Graham Health System policy on gifts and tipping, faculty and staff of the School of Nursing must avoid accepting any kind of gratuities, tips, or gifts from a student or on a student’s behalf. If a student insists on showing appreciation in the form of a gift, faculty and staff may accept gifts of nominal value; i.e., candy, flowers, fruit, etc., but not to exceed a value of $25.00.
## NUR 110

### Grooming:
- Hand hygiene
- Oral hygiene
- Hair care
- Facial Shaving
- Nail Care

### VS:
- Temperature
- Peripheral (radial) pulse
- Respirations
- Blood Pressure

### ADLs:
- Unoccupied bed
- Final Unit Check
- Feeding
- Bedpan (w/perineal care)
- Urinal
- Intake and Output
- Food intake record
- Height
- Weight
- Dressing

### Patient in bed:
- Occupied bed
- Bag bath
- Passive ROM
- Positioning
- Transfer techniques

### NP:
- Apical pulse
- Doppler

### Asepsis:
- Transmission-based precautions
- Sterile glove application

### Elimination:
- Specimen collection:
  - Stool
  - Clean catch
  - Midstream urine
  - 24-hour urine
- Urinary catheterization
- Enema
- Ostomy care:
  - Emptying ostomy bag
  - Changing ostomy appliance

### Nutrition:
- NG tube:
  - Insertion
  - Maintenance
- Enteral feeding:
  - Bolus
  - Continuous
- Oral suctioning
- Blood glucose monitoring

### Oxygen:
- Application of oxygen
- Pulse oximetry
- Sputum specimen collection

### Wound:
- Wound drain care
- Wound packing
- Wound dressing
- Staple removal
- Suture removal

### NUR 210

### IV Therapy:
- Insertion of IV catheters
- IV medications
- Central line dressing
- Mediport access

### Trach:
- Care
- Suctioning

### NUR 111

### Medication Administration:
- Oral
- Topical
- Enteral
- Intradermal
- Subcutaneous
- Intramuscular

### IV Therapy:
- IV site care
- Bag and tubing change
- Physical assessment
Non-Academic Grievance
Non-academic grievances concern those areas which are not directly related to the pursuit of knowledge or skills as defined by the school curriculum. If the student believes he or she has been treated in an unfair manner in non-academic school-related activities or disciplined for alleged misconduct not in an academic context, the student may file a non-academic grievance.

Non-Academic Grievance Policy
1. The student must contact his/her faculty advisor within five business days of the occurrence giving rise to the grievance. The faculty advisor will mediate the grievance as she/he deems appropriate.

2. If a resolution is not achieved, the student may petition the Non-Academic Grievance Committee for a formal hearing. (Official form can be obtained in the school office.)

3. The Non-Academic Grievance Committee faculty members are appointed annually by the Director of the school and shall include four faculty members (one from each level plus one more being the Chairperson) and student members of the Community Projects Committee.

4. The Non-Academic Grievance Committee Chairperson shall only vote in the event of a tie.

5. The student has the option of presenting the grievance in person to the committee. The student's presence may be requested by the Non-Academic Grievance Committee.

6. The Non-Academic Grievance Committee will meet within five business days of receipt of the grievance form.

7. The student will be notified in writing of the date of the Non-Academic Grievance Committee meeting.

8. Minutes of the meeting will be filed in the office of the Director of the school.

9. A simple majority will constitute a decision. Voting will be done by secret ballot out of the presence of the student.

10. The student will be notified in writing of the decision by the Chairperson of the Non-Academic Grievance Committee within five business days.

11. RIGHT TO APPEAL
A. The student has the right to appeal the decision of the Non-Academic Grievance Committee.

B. Request for an appeal must be made in writing to the Director of the school within five business days following the receipt of the written decision.

C. If the request for appeal is not made within five business days as stated, the decision of the Non-Academic Grievance Committee is final and binding.

D. The grievance and decision will be reviewed by the Director who will make the final decision regarding the grievance.

Adopted: 5/92
Reviewed: 5/23/96, 4/14/99, 6/1/11, 7/1/12, 5/19/14, 2/22/16, 4/18/16, 5/23/17, 4/16/18, 4/22/19
Revised: 5/28/15, 4/20/20
Graham Hospital School of Nursing

Orientation Plan for New Students

In addition to the annual mandatory education/Health Stream, new students are given the School Catalog, Student Handbook, Financial Aid Handbook and receive the following orientation in August:

I. Introduction of faculty/staff

II. Orientation to physical facilities
   A. Phone system
   B. Mailboxes
   C. Parking
   D. Elevator use
   E. Smoking policy
   F. Food Service
   G. Optional tour of school/hospital

III. Orientation to the library and technology

IV. Student Organizations
   A. Student Senate
   B. Class groups
   C. Student of the Month

V. School calendar

VI. Assignments
   A. Faculty advisor
   B. Clinical rotation schedule

VII. Health policies
   A. Drug Screening Policy

VIII. Campus Security

IX. Financial Aid policies and procedures

3/31/97
Reviewed: 7/1/12, 5/19/14, 5/28/15, 4/18/16, 5/23/17, 4/16/18, 4/22/19, 4/20/20
Revised: 5/20/08, 5/20/09, 5/25/10, 5/25/11
GRAHAM HOSPITAL
SCHOOL OF NURSING

PROFESSIONAL LIABILITY INSURANCE

Graham Hospital maintains professional liability insurance covering students during all theory and clinical nursing courses.

Reviewed: 5/90, 5/93, 5/26/98, 6/30/11, 7/1/12, 5/19/14, 4/18/16, 5/23/17, 4/16/18, 4/22/19, 4/20/20
Revised: 1/88, 5/22/13, 3/23/15
STUDENT HANDBOOK

GRAHAM HOSPITAL SCHOOL OF NURSING

PRIVACY ACT/CONFIDENTIALITY

The Family Educational Rights and Privacy Act of 1974, as amended, is a Federal Law that protects the privacy of eligible student education records. The law provides that the institution will maintain the confidentiality of student records.

Graham Hospital School of Nursing accords all the rights under the law to students who are 18 years of age or older. No one outside the institution shall have access to nor will the institution disclose any information from students' educational records without the written consent of students, except to personnel within the institution, to officials of other institutions in which students seek to enroll, to persons or organizations providing students' financial aid, to accrediting agencies carrying out their accreditation function, to persons in compliance with a judicial order, and to persons in an emergency in order to protect the health or safety of students or other persons. All these exceptions are permitted under the Act.

Within the Graham Hospital School of Nursing community, only those members individually or collectively acting in the students' educational interest are allowed access to student education records. These members include personnel in the school/hospital as defined by the institution, e.g., Coordinator of Admissions, Recruitment, and Financial Aid, School of Nursing Director, the Vice President of Finance, and academic and accounting personnel within the limitation of their need to know.

At its discretion, the institution may provide directory information in accordance with provisions of the Act to include: student name, address, telephone number, email address, photograph, date and place of birth, grade level, dates of attendance, honors, and awards received. Students may withhold directory information by notifying the Director of the School of Nursing in writing within two weeks after the first day of class for the fall semester.

Request for non-disclosure will be honored by the institution for only one academic year; therefore, authorization to withhold directory information must be filed annually in the office of the Director of the School of Nursing.

The law provides students with the right to inspect and review information contained in their education records, to challenge the contents of their education records, to have a hearing if the outcome of the challenge is unsatisfactory, and to submit explanatory statements for inclusion in their files if the decisions of the hearing panels are unacceptable. The Director of the School of Nursing at Graham Hospital has been designated by the institution to coordinate the inspection and review procedures for student education records, which include admissions, academic, and health records. Education records do not include records of instructional, administrative, and educational personnel that are the sole possession of the maker and not accessible or revealed to any individual except a temporary substitute; records of the law enforcement unit of the institution; or records created or received by the school after an individual is no longer a student in attendance. Students wishing to review their education or health records must make written requests to the Director of the School of Nursing listing the item or items of interest. Only records covered by the Act will be made available within a reasonable amount of time, but not more than forty-five days after it is received. Students may have copies made of their records with certain exceptions, (e.g. a copy of the academic record for which a financial "hold" exists, or a transcript of an original or source document which exists elsewhere). These copies would be made at
the student's expense at prevailing rates which are listed in the Student Handbook. Health records may be reviewed by physicians of the student's choosing.

Students may not inspect and review the following as outlined by the Act: financial information of their parents; confidential letters and recommendations associated with admission, employment, or receipt of an honor to which they have waived their rights of inspection and review; or education records containing information about more than one student, in which case the institution will permit access only to that part of the record which pertains to the inquiring student. The institution is not required to permit students to inspect and review confidential letters and recommendations placed in their files prior to January 1, 1975, provided those letters were collected under established policies of confidentiality and were used only for the purposes for which they were collected.

Students who believe that their education records contain information that is inaccurate or misleading, or is otherwise in violation of their privacy or other rights, may discuss their problems informally with the Director of the School of Nursing. If the decisions are in agreement with the student's request, the appropriate records will be amended. If not, the student will be notified within a reasonable period of time that the records will not be amended, and they will be informed by the Director of the School of Nursing of their right to a formal hearing. Student requests for a formal hearing must be made in writing to the Director of the School of Nursing who, within a reasonable period of time after receiving such requests, will inform students of the date, place, and time of the hearings. Students may present evidence relevant to the issues raised. The hearing panels that will adjudicate such challenges will be the Student Grievance Committee.

Decisions of the hearing panels will be final, will be based solely on the evidence presented at the hearing, will consist of written statements summarizing the evidence and stating the reasons for the decisions, and will be delivered to all parties concerned. The education records will be corrected or amended in accordance with the decisions of the hearing panels, if the decisions are in favor of the student. If the decisions are unsatisfactory to the student, the student may place with the education records statements commenting on the information within the records, or statements setting forth any reasons for disagreeing with the decisions of the hearing panels. The statements will be placed in education records, maintained as part of the student's records, and released whenever the records in question are disclosed.

Students who believe that the adjudications of their challenges were unfair or not in keeping with the provisions of the Act may request, in writing, assistance from the Director of the School of Nursing to aid them in filing complaints with the Family Educational Rights and Privacy Act Office (FERPA), Department of Health, Education, and Welfare, Washington, D.C., 20201

Reviewed: 2/10/99, 6/1/11, 7/1/12, 5/19/14, 5/28/15, 4/18/16, 5/23/17, 4/16/18, 4/22/19
Revised: 5/95, 7/11/13, 4/20/20
Graham Hospital School of Nursing
Professionalism Policy
Graham Hospital School of Nursing requires professional conduct in all learning environments, e.g. on-site and off-site clinical settings and all classroom situations.
Professional conduct includes adherence to a set of standards and criteria of civility within the norms of the IACCT (Innovation, Accountability, Communication, Compassion, and Team work) of Graham Hospital. These standards include responsibility to maintain an attitude of caring and compassion and ethical behaviors including confidentiality and unbiased care.
This policy is supported by the ANA in the published ANA Code of Ethics: Provision 1: “The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth and uniqueness of every individual…”

Commitment to Graham (As the primary educational institution)
Which includes, but is not limited to:
- Addressing all clinical and class/student concerns with the involved instructor.
- Following the chain of command for all concerns such as class grading criteria, travel expectations, and off-site clinical settings (travel location and hours). (e.g. student → instructor → director → hospital/organizational management).

Commitment to Patients and Families
Patient care personnel are accountable for the following:
- Timely and accurate communication with patients and their families
- Unbiased treatment regardless of the patient's sex, age, culture, or financial situation
- Protection of the patient's private information unless the patient is a potential harm to self, others, or confesses to a crime.
- Establishing and maintaining healthy interpersonal relationships with patient, their family, and visitors.
- Respectful communication with the patient, their family, and visitors.
- Prompt answering of the call light (within the time parameters set in system).
- Development of an individualized plan of care on admission with daily assessment of the patient's progress
- Education of the patient and family regarding the disease process, medications, treatments, tests, and follow-up care
- Timely response to needs and requests of patients and families.
- Attend to patient’s basic needs (i.e. bathing, linens, oral care, and ADL’s etc.)
Commitment to Team Members
Patient care personnel are accountable for the following:

- Establishing and maintaining healthy interpersonal relationships with all team members. Team members will be accepted regardless of their sex, age, or professional status and home department.
- Promotion of a healthy work environment conducive to positive collaboration
- Discussing promptly interpersonal problems only with the affected person. All staff will refrain from discussing the situation with anyone else.
- Respectful communication with all team members
- Proactive problem-solving
- Engaging in the practice of the 3 C’s - Caring, Committing, and Collaborating.
- Refrain from participating in non-professional related activities (i.e. use of cell phone for calls, texting, or social media purposes, reading non-medical related materials, reading on nook/kindle/tablets, surfing internet etc.) during paid work hours.

Commitment to Physicians
Patient care personnel are accountable for the following which includes, but is not limited to:

- Timely and accurate assessment of the patient.
- Accurate and complete documentation of the patient’s response to care.
- Respectful communication with all team members.
- Positive communication focused on the patients and their families.
- Timely reporting of changes in patient condition.
- Timely administration of medications and treatments ordered.
- Promotion of a healthy work environment conducive to positive collaboration
- Discussing promptly interpersonal problems only with the affected person. All staff will refrain from discussing the situation with anyone else
- Proactive problem-solving
- Engaging in the practice of the 3 C’s – Caring, Committing, and Collaborating

Infractions will be resolved with the individual instructor (with either verbal or written comments) first. If consensus is not achieved, the instructor will present the situation to the Director for further action or determination. At this time, the initiation of all actions will be recorded and placed in the student’s file.

References


Approved: 4/13/09
Reviewed: 6/1/11, 7/1/12, 5/19/14, 5/28/15, 4/18/16, 5/23/17, 4/16/18, 2/19/19
Revised: 8/17/09, 5/23/16, 4/20/20
GRAHAM HOSPITAL
SCHOOL OF NURSING

RECORDS POLICY

All student financial aid files are kept for a period of 5 years after the student terminates from this school. Most current year of students’ files are kept in the office of the Coordinator of Admissions, Recruitment, and Financial Aid while the previous 4 years is kept in the locked file room for a total of five years of records. These records are subject to audit by federal and/or state agencies and include:

- Institutional Student Information Record
- Monetary awards
- Billing
- Release of grade reports to scholarship sponsors
- Educational purpose/registration compliance
- Family Educational Rights & Privacy Act of 1974

Post-admission student records are kept for a period of 5 years after the student terminates from this school. Most current year of students’ files are kept in the office of the Coordinator of Admissions, Recruitment, and Financial Aid while the previous 4 years is kept in the locked file room for a total of five years of records. These records include:

- Application form
- Official H.S. transcript and/or G.E.D.
- Application payment receipt
- College transcripts
- Grade reports
- Clinical and student evaluations
- Health records
- Release forms and checklists
- Profile sheet
- All correspondence
- Acceptance letter

The following are kept on permanent file on all graduating students:

- SON transcript
- Address changes
- Transcript requests

Counseling and guidance records are destroyed upon graduation.

All destroyed records are placed in a security container supplied by Graham Hospital.

1/88
Reviewed: 5/90, 5/93, 2/10/99, 7/1/12, 5/19/14, 5/28/15, 4/18/16, 5/23/17, 4/16/18
Revised: 4/28/97, 5/29/02, 5/20/08, 6/30/11, 4/22/19, 7/1/20
GRAHAM HOSPITAL SCHOOL OF NURSING

RIGHT TO APPEAL

A student has the right to appeal decisions regarding academic and disciplinary action according to the Grievance Procedures outlined in this handbook.

Reviewed: 4/14/99, 6/1/11, 7/1/12, 5/19/14, 5/28/15, 4/18/16, 5/23/17, 4/16/18, 4/22/19, 4/20/20
Revised: 5/23/96
Graham Hospital School of Nursing

Simulation Confidentiality Policy

As a student using simulation, I understand the significance of confidentiality with respect to information concerning simulated patients and fellow students. I will uphold the requirements of the Health Insurance Portability and Accountability Act (HIPAA) and any other federal or state laws regarding confidentiality.

I agree to adhere to the following guidelines:

- All CLIENT/PATIENT information is confidential and any inappropriate viewing, discussion, or disclosure of this information is a violation.
- This information is privileged and confidential regardless of format: electronic, written, overheard or observed.
- Simulation is a learning environment. All scenarios, regardless of their outcome, should be treated in a professional manner. The students involved in the scenario should have everyone’s respect and attention. Situations simulated in the lab are to be used as a learning tool and no discussion of the action(s) of fellow students should take place outside the lab. A debriefing session is provided for experiences that occur in the Simulation Lab.
- I may view, use, disclose, or copy information only as it relates to the performance of my educational duties. Any inappropriate viewing, discussion, or disclosure of this information is a violation of policy and may be a violation of HIPAA and other state and federal laws.
- I may be video-recorded during participation in learning activities, and I understand this will be used for educational purposes only by the faculty as deemed appropriate. Faculty will assure the confidentiality of the assigned recordings.
- The simulation mannequins are to be used with respect and be treated as if they were live patients.
  - No Betadine, no ink pens (near the mannequins), 22g IV or smaller for IV starts.
  - Please wash hands and wear gloves when working with all mannequins.
- Minimum Expectations for all simulations include and are not limited to:
  - Follow pre-procedure guidelines.
  - Active participation in case scenarios/simulation debriefing.
  - Communicate with the patient, faculty, family, and other team members.

9/23/10
Reviewed: 7/1/12, 7/14, 7/15, 10/5/15, 6/16/17
Revised: 11/09, 5/25/17

FH & SH
Graham Hospital School of Nursing
Social Networking Policy

Students in the School of Nursing increasingly use personal websites, online blogs, online journals, and online communities such as Facebook.com to communicate and network within and outside of the school of nursing community. Students should remember that these sites are accessible to the public. The following policy deals with social networking while a student in the school of nursing:

1. Be careful about how much and what kind of personally identifiable information you post to these sites. Don’t post anything you wouldn’t want the world to know, including personal information that could lead to identity theft, harassment, stalking, or other safety concerns.

2. Be aware that your entries may be seen by unintended viewers. Faculty, administrators, potential current and future employers can often access information you place on these sites. Assume that any information you post may at some point be the basis for the impression others have of you.

3. The School of Nursing does not tolerate online harassment. If you feel that you are the subject of online harassment or threatening behavior, please contact your instructor, your advisor, or the Director. There could be legal consequences.

4. A conflict of personal boundaries and professional boundaries should be considered a conflict of interest. You are accountable for what you post on networking sites.

5. Profanity is prohibited.


7. Legal concerns, such as HIPAA laws must always be considered. **NEVER** post any information about patients or their families on networking sites. It is grounds for dismissal from the program.

8. Defamatory remarks directed toward the school, other students, faculty, staff, the Graham Health System, or clinical agencies are considered as bullying, defamation of character, or harassment and will subject the student to disciplinary action.

9. Do not take for granted that your personal social networking site is private. The remarks are public for the world to see and may be interpreted very differently than the original author intended.

10. If you acknowledge that you are a student at Graham Hospital School of Nursing, be aware that many people will assume you are speaking on behalf of the school. Use good judgment and accuracy in posts. Maintain clear personal and professional boundaries to prevent a conflict of interest.

11. Communications should be honest, ethical and accurate, considerate, respectful of other students, faculty and staff and of copyright laws.

12. Follow the Code of Conduct and the Civility Policy as identified in the Student Handbook.

**NOTE:** **If you are an employee or work study student, you are expected to adhere to Graham’s Employee Electronic Social Networking Policy.**

References:


1/19/11
Reviewed: 7/1/12, 6/25/14, 6/25/15, 6/16/17, 7/6/20

FH & SH
STUDENT HANDBOOK
GRAHAM HOSPITAL
SCHOOL OF NURSING
STUDENT - ANNUAL ONE-STEP TB SKIN TEST

DATE: ____________________________

NAME: __________________________

HOME PHONE: ____________________

TB test given. Date _______ Location: L / R ______ Arm _______________________
(Circle) (nurse signature)

TB test read. Date _______ Result: _______ mm _______________________
(after 48-72 hours) (nurse signature)

If history of previous positive reactions, student will not receive TB testing and is advised to observe
for and report any symptoms that may be due to TB: cough which lasts longer than 2 weeks, bloody
sputum, fever, night sweats, chills, loss of appetite, loss of weight, and/or unexplained fatigue.

Date advised ________________

If TB test is positive or symptoms develop, advise student to complete the following:

TB Quantiferon blood test: Date______________
(attach results)

Physician referral: Date______________

Physician _______________________
(attach physician's report of evaluation)

1/94
Reviewed: 7/1/12, 5/19/14, 5/28/15, 5/23/17, 4/16/18, 4/22/19, 4/20/20
Revised: 6/18/08
The Health Screening Program is required for all new students to ensure that persons providing direct patient care do not pose undue risk of infections or disease to the patients or others.

I. Each new student must complete required health screening procedures and immunizations as a condition of admission.

II. Each student must demonstrate correction of any disorder/disease that would prohibit functioning as a direct provider of care to his/her assigned patients before entry into or continuation in the nursing program.

Required Procedures Before Entry

1. Health History (Family and Personal)
2. Physical Examination
3. Eye Examination
4. Urine Dipstick and Complete Blood Count
5. Required Immunizations:
   - MMR (Measles, Mumps, Rubella) - you must provide 2 vaccine dates or have a titer done to document that you are immune.
   - History of Varicella/Chicken Pox - varicella titer results or two varivax vaccine dates.
   - Tdap - Tdap is needed every 10 years.
   - Hepatitis B Series - dates of initial series of vaccine (three vaccines).
   - TB 2-step - TB testing will be completed during the first weeks of the semester. If you already have this completed, submit verification of it.

HEALTH STATUS - Current Students

1. T.B. skin test required annually and on exposure.
2. All students will be required to follow Infection Control policies of Graham Hospital regarding: (See Appendix A)
   A. Illness on duty.
   B. Exposure to communicable disease.
   C. Work restrictions.
   D. Protocol for Occupational Exposure Incident.
3. If an exposure incident occurs while assigned to another hospital, the student is to follow the protocol of that hospital, and a copy of the care given is to be returned to Graham Infection Control.

Developed: 11/91
Reviewed: 2/02, 2/03, 2/05, 7/12, 5/28/15, 5/23/17, 4/16/18
Revised: 2/01, 5/22/00, 5/27/04, 6/28/10, 7/1/13, 5/19/14, 4/18/16, 4/22/19, 8/19/19, 4/20/20
GRAHAM HOSPITAL SCHOOL OF NURSING

STUDENT NURSE HEALTH POLICY

The student is expected to assume the cost and the responsibility for a preadmission physical examination and routine laboratory tests. The student is responsible for all health care costs and is encouraged to have health insurance. The student is responsible for reporting to the Coordinator of Admissions, Recruitment, and Financial Aid any health-related problems affecting his/her progress in this school.

Students may purchase prescription and non-prescription drugs for themselves at a reduced rate from the Graham Hospital Pharmacy. Students will place pharmacy order in person and must show pharmacy personnel their I.D. cards. They may call later that day to inquire if their order is ready and what the charge is. The student must pay the cashier first then return to the pharmacy with the receipt in order to obtain the prescription/non-prescription order.

Students using the Graham Hospital Emergency Room will have the emergency room bill sent initially to the student's own health insurance company. Students who do not have insurance will need to complete the Financial Aid Application with the Business Office to apply for financial help on their bill. All health costs incurred are the student's responsibility including injury-related incidences in clinical and class.

6/92
Reviewed: 2/10/99, 6/1/11, 7/1/12, 5/19/14, 5/28/15, 4/18/16, 5/23/17, 4/16/18, 4/22/19, 4/20/20
Revised: 4/28/97, 5/22/00, 6/30/03, 6/12/08, 6/28/10, 7/11/13
StUDENT HANDBOOK

Graham Hospital School of Nursing
Student Testing Policy

1. Students may not have any unauthorized textbooks or notebooks or any type of food or beverage on the desk at any time during an exam.

2. Students may not wear hats, scarves, gloves, or coats/hoodies during an exam. This includes any clothing with kangaroo-type or large pockets on the front or sides.

3. All books, coats, backpacks, and other belongings will be placed in a faculty-designated location during exams.

4. Cell phones are to be turned off and placed in a faculty-designated location during exams and exam reviews. All watches/internet/blue-tooth capable devices will be placed in a faculty-designated location during exams and exam reviews.

5. Only instructor-issued calculators and scratch paper/white boards are allowed.

6. No extra credit is allowed on any nursing exams.

7. If a student misses an exam, a different version of the exam may be given (for example, an essay exam).

8. All comprehensive final exams will be an individual assessment, therefore no group testing is allowed.

9. Students may not leave exams in progress except for emergencies.

10. Students who disagree with an exam item may submit the rationale for their chosen answer, including documentation from their assigned reading(s), to the faculty for review.

11. During a group review of an exam that has been scored, students cannot record or take notes.

12. If a student scores less than 80% on two consecutive exams before midterm, refer to the Guidelines for Administration of Test Assessments policy.

13. Students will remediate for every exam failure (scoring less than 80%) per faculty directions.

Approved: 12/14/15
Revised: 1/30/17
Reviewed: 5/22/19
GRAHAM HOSPITAL SCHOOL OF NURSING

Computer Testing Policy

The purpose of the Computer Testing Policy is to facilitate the provision of an environment conducive to fair and equitable testing in the school of nursing computer lab and in the classroom.

Academic Integrity:

- All students must adhere to the Computer Testing Policy, and all other applicable school of nursing policies including but not limited to all other terms of applicable software licensing agreements or copyright laws.
- Students must adhere to the instructions provided by the instructor or exam proctor.
- Failure to comply with these policies and instructions, may be considered a violation of academic integrity, and may result in disciplinary actions up to and including receiving no credit for the examination, dismissal from the exam, and/or other sanctions as designated by the instructor and/or the director.

Student Conduct:

- Students will not participate in any cheating incident, breach of security, misconduct or any other behavior that could be considered a compromise of the integrity or confidentiality of any school of nursing exam.

Misconduct behaviors will include, but are not limited to:

  a. Disseminating actual exam content by any means, including but not limited to, web postings, formal or informal test preparation or discussion groups, reconstruction through memorization, study guides or any other method.

  b. Copying, publishing, selling, offering to sell, distributing in any way, or otherwise transferring, modifying, making derivative works of, reverse engineering, decompiling, disassembling, or translating any exam or any part thereof.

  c. Seeking and/or obtaining unauthorized access to examination materials and/or any unauthorized publication of exam questions with or without answers.

- Students will not talk or cause a disturbance of any kind during an exam, including but not limited to, pencil clicking, foot tapping, gum-chewing or other bothersome noise-making behaviors.

- Students will not remove or attempt to remove any exam materials (in any format) from the testing area.

- Students will not tamper with the operation of the computer, or attempt to use it for any function other than taking the assigned examination.

- Students may not insert any devices that can read and write data during an exam e.g. compact disks, flash memory drives.

- Students may not unplug or disconnect school of nursing equipment to provide personal computers with power, or network connectivity.

- Students should NOT attempt to access the internet or use common keystrokes e.g. CTRL+C, CTRL+V, CTRL+ALT+DEL, CTRL+X or Print Screen.
• Students will not give, receive, obtain, attempt or ask for any unauthorized assistance during the exam.

• Students will not cue answers to other students by tapping, or making certain movements or sounds.

• Students will not make notes of any kind while in the classroom, except on writing materials provided by the instructor/proctor to be handed in at the end of the exam.

• The instructor/proctor is authorized to dismiss a student from an exam session for violation of any school policy, misconduct or cheating.

Arrival and Check-in at the Exam:

• Students must be in their seats and ready to start the test at least ten (10) minutes before the scheduled start time of the examination.

• Computers will be turned on and ready for testing at least five (5) minutes before the scheduled start time of the examination.

• Late Arrivals: If a student is not in the examination room and seated before the examination starts, he/she will be considered absent from the exam.

• The instructor/proctor will provide white boards or scratch paper and calculators prior to the exam. Some electronic testing formats may include a built-in calculator.

Absence:

• If a student is going to be absent for an exam, he/she must notify the instructor per course syllabus directions before the start of class.

• If a student is absent from an exam without prior instructor notification before class, at the instructor’s discretion, there may be a pre-determined deduction of points before the test is taken.

• If a student arrives after the start of the exam, or is absent from school, the student will be permitted to take a make-up examination at a date, time and location and in the format determined by the course instructor.

• At the instructor’s discretion, the make-up examination may consist of, but is not limited to: a paper and pencil exam, essay exam, alternative type of exam, or another version of the exam.

Restroom Breaks:

• Students should use the restroom before entering the testing room.

• Students may not leave an exam in progress except for emergencies. If a student must use the restroom, they must empty their pockets in front of the exam proctor. No additional time will be added to the exam time period to compensate for any breaks.

Personal Belongings:

• During an exam, students are not permitted to have access to unauthorized items, which include but are not limited to: cell phones, Bluetooth devices, pagers, earphones, wallets, pencil cases, eyeglass cases, calculators, smart watches, fitness bands, books, notes, hats, food, drinks, purses, backpacks, briefcases, purses, media players, recorders, language translators, picture-taking devices, written materials, dictionary, scratch paper of any kind, mechanical pencils/pens, highlighters, and rulers.
• No hats, sunglasses, earmuffs, hoodies, jackets, coats, scarves, gloves, or other shirts/sweaters etc. with front/side pockets can be worn in the testing room. The student will be asked to remove any garment that is not allowed.

• Prior to the test, personal belongings will be stored against the wall and out of reach in the exam room.

• Cell phones and all other electronic devices will be turned off and stored at a place designated by the instructor, or in the student’s belongings.

• If an electronic device is found in the possession of the student, the school of nursing has a strict no-tolerance policy regarding students in possession of electronic devices during any exam, regardless if it is turned on or not. In this case, the student may be dismissed from the exam.

• The student is allowed to bring to the exam up to three (3) No. 2 lead pencils.

**Food and Drink:**

• There is no food or drink allowed in the testing area.

• Any exceptions to this rule will require documentation of need from a medical provider.

**Testing Setup:**

• All computer tests are secured by the Safe Exam browser.

• The instructor sets up all exams with a time limit.

• Instructor’s discretion will be used when setting up the exam e.g. question look-back, test retake, feedback of exam and key, scores, rationales, and review of unanswered questions at the end of the test.

• Any student requesting extra time or accommodation for exams, must provide appropriate documentation for verification of their disability to the Coordinator of Admissions, Recruitment and Financial Aid. The accommodation may vary depending on the type of disability.

• Upon completion of the exam, all materials provided to the student (test, Scantron, calculator, white board, scratch paper with the student’s name on it), must be returned to the instructor/proctor before leaving the testing area.

• Upon completion of the exam the student will click DONE. At that time the student may leave the testing area very quietly so as not to disturb others still taking the exam.

**Communication:**

• All communication between students during the exam is strictly prohibited.

• The instructor/proctor will not answer any questions regarding exam content.

• All exams will be an individual assessment of the student’s knowledge, therefore group testing is not allowed.
Technology Issues:

• In the event a student experiences a computer issue, the student should immediately raise his/her hand to inform the instructor/proctor.

• A substitute computer may be available to replace the failed computer. If a substitute computer is not available, the student will complete the exam via paper/pencil exam and Scantron.

• Power Outage: If a power failure occurs, the test will be administered via paper/pencil exam, and Scantron. Once power is restored, the technical staff may be able to recreate the portion of the test that was taken, which may be considered in the final exam grade.

• If the student is “kicked off” of the computer while taking an exam:
  
  a. If the instructor has enabled the “test retake” function, the student will retake the test.
  
  b. If the instructor has not enabled the “test retake” function, the student will complete/retake the test on a paper/pencil test, or the instructor can go in and override the previous test so the student can retake the test.

• Once the student has completed the test, the instructor will manually log the student off of the Safe Exam Browser, or the student can hit control, alt, delete and then log off.

Approved: 11/12/18
GRAHAM HOSPITAL
SCHOOL OF NURSING STUDENT SENATE

BYLAWS

ARTICLE I. – NAME
The name of this organization shall be the Student Senate of Graham Hospital School of Nursing.

ARTICLE II. – MISSION
Student Senate is the voice of the student body which provides an avenue of self-government that comes together with differences, yet is united and working toward common goals.

ARTICLE III. – PURPOSE
The purpose of this organization shall be to provide opportunities for self-government and the personal and professional growth of students.

ARTICLE IV. – FUNCTIONS
1. Plan, implement, and evaluate the program of self-government by the student body in accordance with the philosophy, goals, and objectives of the school.
2. Plan, promote, and evaluate opportunities for the professional growth of students.
3. Plan, promote, and evaluate opportunities for student involvement in community health service activities.
4. Provide information to students regarding area nursing education programs, job market, legislation, and other health-care related matters.
5. Give recognition to deserving students.
6. Plan, promote, and evaluate recreational activities for students.

ARTICLE V. – GENERAL RULES AND REGULATIONS
1. The Student Senate shall meet twice a month. (One meeting may be held in August and December).
2. A special meeting of the Senate may be called by the Director of the school, the advisor, the President of the Senate, or on a written request of a majority of members.
3. The term of office shall be one year. The incoming juniors and seniors shall hold elections for Senate annually in March from class nominations, with offices being taken in April.
4. An elected member may hold only one office.

5. A quorum of the Senate shall consist of a majority of the voting members.

6. These Student Senate and class rules and regulations may be amended by two-thirds vote of the students provided the proposed amendment is accepted by faculty organization.

7. Deliberation of all meetings of this organization shall be governed by Robert’s Rules of Order, revised.

**ARTICLE VI. – MEMBERSHIP/OFFICERS**

Section 1. The Student Senate shall consist of the entire student body.

Section 2. Officers elected by the student body:

A. President ----------Senior  
B. Vice-President ---Senior  
C. Secretary ----------Junior  
D. Treasurer ---------Junior

Section 3. Committee members selected by individual class:

A. President of each class/Executive Committee  
B. Professional Issues Representatives  
C. Recreation Representatives  
D. Commendation Representatives  
E. Student Welfare Representatives  
F. Community Projects Representatives  
G. Senior Recognition Banquet Representatives  
H. Non-Academic Grievance Representatives

Section 4. Student Senate selects:

A. Library Committee Representative - One student and one alternate selected by Student Senate (May)  
B. Technology Committee Representative – One student and one alternate selected by Student Senate (in May)  
C. Faculty Organization Representatives – One student and one alternate from each class level  
D. Curriculum Committee Representatives – One student and one alternate from each class level  
E. Infection Control Representatives – Minimum of one freshman student and one freshman alternate

Section 5. The Senate Faculty Advisor, appointed by the director, acts as a non-voting member.
ARTICLE VII. – DUTIES

Section 1. Officers

A. The President shall:
   1. preside at all regular and special meetings of the Student Senate.
   2. act as the chairperson and voting member of the Executive Committee.
   3. act as ex-officio member of the committees of the Senate.
   4. post/email tentative agenda of all Senate meetings on the bulletin board 2-3 days prior to meeting.
   5. vote only in the occasion of a tie during full Senate meetings and standing committee meetings.

B. The Vice-President shall:
   1. perform the duties of the president during his/her absence.
   2. act as representative to National Student Nurse Association
   3. act as chairperson of Professional Issues/Concerns Committee.

C. The Secretary shall:
   1. keep minutes of each Student Senate and Executive Committee meeting.
   2. submit a draft of the minutes to the Senate advisor for approval before distribution.
   3. submit a copy of the minutes to the Senate President and advisor after each meeting, at least one week prior to the next meeting.
   4. submit the original minutes to the nursing school office for permanent filing.
   5. post minutes of each Senate meeting on bulletin board for student body.
   6. attend to all correspondence of the Student Senate.
   7. perform the treasurer’s duties in the absence of the treasurer.
   8. keep an accurate record of attendance at all meetings and file with the original minutes in the school office.

D. The Treasurer shall:
   1. collect, receive and keep a record of all funds of the organization with the assistance of the advisor.
   2. pay all bills by check requiring two authorized signatures, with the approval of a majority of the members of Student Senate and the authorization of the advisor.
   3. report to the Senate the financial status at each Student Senate meeting.
   4. attend and act as consultant to the Senate Recreation Committee.
   5. prepare a spreadsheet of all expenses and correlate it with the budget.

Section 2. Student Senate Standing Committee Representatives

A. The Chair shall:
   1. report status of standing committee at Senate meetings.
   2. relate discussion of Senate proceedings to standing committee members.
   3. preside over all respective committee meetings.
   4. act as a voting member of the respective committee.
B. Class Representatives shall:
   1. act as voting members of the respective committee
   2. relate discussion of committee meeting proceedings at class meetings.

Section 3. Faculty Standing Committee Representatives

A. Faculty Standing Committee representatives shall:
   1. act as voting members of the respective committee.
   2. relate discussion of committee meeting proceedings at class/Senate meetings.

Section 4. Hospital Standing Committee Representatives

A. Hospital Standing Committee Representatives shall:
   1. attend meetings of the respective committee
   2. report discussion of committee meeting proceedings at Class/Senate meetings

ARTICLE VIII. – STANDING COMMITTEES

Section 1. The Standing Committees shall be:

A. Executive
B. Professional Issues
C. Recreation
D. Commendation
E. Student Welfare
F. Community Projects
G. Senior Recognition Banquet
H. Non-Academic Grievance

The Representatives shall be:
A. Library
B. Technology
C. Faculty Organization
D. Curriculum
E. Hospital Infection Control

Section 2. Executive Committee

A. Purpose – direct the self-governing activities of the Student Senate.
B. Membership
   1. Co-chair Student Senate Advisor
   2. Co-chair Student Senate President
   3. Vice President
   4. Treasurer
   5. Secretary
   6. Freshman Class President
   7. Junior Class President
   8. Senior Class President
   9. Professional Issues & Non-Academic Grievance Chairperson
  10. Recreation Chairperson
  11. Commendation Chairperson
  12. Community Projects & Student Welfare Chairperson
  13. Senior Recognition Banquet Chairperson
  14. Library Committee Representative
  15. Technology Committee Representative Chairperson
  16. Faculty Organization Representative Chairperson
  17. Curriculum Committee Representative Chairperson
  18. Infection Control Committee Representative Chairperson

C. Functions
   1. Develop an annual budget for Senate approval
   2. Promote participation in Senate activities
   3. Survey the students annually to assess interests/needs and to evaluate Senate activities.
   4. Review Student Senate Bylaws annually and submit recommendations for revisions to
      the Student Senate and Faculty Organization for approval.
   5. Hold meetings twice a year and as necessary to complete the functions of the committee.

Section 3. Professional Issues Committee

A. Purpose – to promote the professional and personal growth of students.

B. Membership
   1. A minimum of one student and one alternate from each level selected by each class.
   2. Others may volunteer.
   3. The Chairperson will be Vice-President of Student Senate (and maintain a membership
      with the National Student Nurse Association paid with Student Senate funds).
   4. A faculty member appointed by the Director will act as Committee Advisor.
C. Functions
1. Inform students of area programs/speakers related to nursing via bulletin board and announcements.
2. Inform students of S.N.A. activities via bulletin board and announcements.
3. Inform students of current job market trends, legislation and other health related matters via bulletin board and announcements.
4. Determine the eligibility for educational grants for students to attend to conference or workshop.
5. Plan, implement, and evaluate the fall Freshmen Welcome picnic and an annual program to support student professional development.
6. Hold monthly meetings.

Section 4. Recreation Committee

A. Purpose – to provide social and recreational activities for students.

B. Membership
1. Chairperson selected by committee
2. Treasurer of Senate as non-voting consultant
3. A minimum of one student and one alternate from each level selected by each class.
4. Others may volunteer.
5. A faculty member appointed by the Director will act as Committee Advisor.

C. Functions
1. Plan social and recreational activities for students within the recreational budget approved by the Senate annually.
2. Hold monthly meetings.

Section 5. Commendation Committee

A. Purpose – give commendation to deserving students

B. Membership
1. Student co-chairperson selected by committee.
2. A faculty member appointed by the Director will act as Committee Advisor.
3. A minimum of one student and one alternate from each level selected by each class.
4. Others may volunteer
5. Alternate for faculty chosen by the faculty committee member

C. Functions
1. Select one Student of the Month, from the entire student body September-April, according to guidelines for SOM eligibility.
2. Plan for a system of recognition of Students of the Month.
3. Hold monthly meetings.
4. The Faculty Co-chairpersons shall present the Student of the Month finalists to the Faculty Organization Committee for selection of the Student of the Year.
Section 6. Student Welfare Committee

A. Purpose – to provide student representation in the development, implementation, and evaluation of policies related to student services.

B. Membership
1. Members of the Community Projects Committee.
2. Others may volunteer.
3. Student chairperson selected by the committee.
4. A faculty member appointed by the Director will act as Committee Advisor.
5. If one of the students selected is not a dorm student, one will be appointed to the committee by the Advisor.

C. Functions
1. Develop, review, and recommend revisions to policies related to student services.
2. Review and recommend revisions to dormitory regulations.
3. Assist the Coordinator of Admission, Recruitment, and Financial Aid in evaluating and reviewing the results of the annual Student Satisfaction Survey.
4. Complete activities stipulated for this committee in the school’s plan for systematic evaluation.
5. Submit all recommendations to the Student Senate and to the Faculty Organization for final approval.
6. Meetings shall be held four times during the academic year and as deemed necessary to fulfill the functions of the committee.

Section 7. Community Projects Committee

A. Purpose – To organize Student Senate support of community activities and services.

B. Membership
1. A minimum of one student and one alternate from each level selected by each class. Others may volunteer.
2. The Chairperson will be selected by the committee from the two senior committee members.
3. The second senior will preside in the absence of the chairperson.
4. A faculty member appointed by the Director will act as Committee Advisor.

C. Functions
1. Increase awareness of school in the community by participation and with contributions or donations.
2. Request for and monitor volunteers to complete duties as needed.
3. Keep students informed of potential community projects.
4. Meet as needed to confirm completion of duties.
Section 8. Senior Recognition Banquet Committee

A. Purpose – To organize a celebration for the graduating seniors.

B. Membership
   1. A minimum of three students will be selected from both the freshman and junior class.
   2. Volunteers welcome.
   3. A chairperson will be selected by the committee to preside over the committee.
   4. A chairperson will be selected for each category by the committee:
      a. Theme
      b. Entertainment
      c. Food/Location
      d. Decorations
      e. Gifts
      f. Invitations
   5. A faculty member appointed by the Director will act as Committee Advisor.

C. Function
   1. Plan a celebration recognizing the graduating seniors’ achievements
   2. Include all members of school
      a. all juniors will help decorate the day of the banquet
      b. all freshmen will clean up right after the banquet
   3. Hold monthly meetings

Section 9: Non-Academic Grievance Committee

A. Purpose: To provide a process for resolution of student non-academic grievances.

B. Membership
   1. Members of the Professional Issues Committee

C. Function
   1. Review and resolve student non-academic grievances according to the established policy.

Section 10: Library Committee Representative

A. Purpose – The purpose of the Library Committee is to provide for the effective operation of a library that meets the needs of the students and faculty.

B. Membership
   1. One student and one alternate selected by the Student Senate

C. Function
   1. To attend Library Committee Meetings
   2. To take student concerns/issues/requests to the committee
   3. To report back at Student Senate meetings
Section 11: Technology Committee Representative

A. Purpose – The purpose of the SON Technology Committee is to promote the appropriate integration of technology into areas of instruction, support services, and school administration.

B. Membership
   1. One student and one alternate selected by the Student Senate

C. Function
   1. To attend Technology Committee Meetings
   2. To take Student/School concerns to the committee
   3. To report back at Student Senate meetings

Section 12: Faculty Organization Representative:

A. Purpose – The purpose of the Faculty Organization is to plan, promote, implement, and evaluate the total program of Graham Hospital School of Nursing.

B. Membership
   1. One student and one alternate student from each class level

C. Function
   1. To attend monthly Faculty Organization meetings
   2. To be a voting member at Faculty Organization meetings
   3. To report class activities at Faculty Organization meetings
   4. To report back at Student Senate meetings

Section 13: Curriculum Committee Representative

A. Purpose – The purpose of the Curriculum Committee is to develop, implement, and evaluate the total curriculum in accordance with the philosophy and goals of the school.

B. Membership
   1. One student and one alternate student from each class level

C. Function
   1. To attend monthly Curriculum Committee Meetings
   2. To report back at Student Senate meetings

Section 14: Infection Control Committee Representative

A. Purpose: Keep the School of Nursing student body and faculty updated on Infection Control issues.
B. Membership
   1. A minimum of one freshman student
   2. A minimum of one freshman alternate

C. Function
   1. To attend the bi-monthly Infection Control meetings
   2. To report back at Student Senate meetings
   3. To report back to freshmen, faculty, and students

Revised: 8/91, 5/92, 5/95, 4/29/96, 4/16/99, 3/16/00, 4/24/00, 4/4/01, 4/29/02, 5/22/03, 1/26/04,
5/27/04, 8/30/04, 1/31/05, 9/25/06, 3/08, 5/27/10, 5/24/12, 9/29/14, 5/26/15, 3/28/16, 5/24/16, 7/1/16,
9/26/16, 5/29/18, 8/27/18, 5/28/19, 9/30/19
Reviewed: 5/25/17
GRAHAM HOSPITAL
SCHOOL OF NURSING
STUDENT OF THE MONTH/YEAR GUIDELINES

CRITERIA FOR ELIGIBILITY

1. The following will be taken into consideration:
   - Honesty
   - Loyalty to the school
   - Personal appearance
   - Respect and Consideration of others
   - School involvement – officer, committee member, volunteers, participates in events and community parade
   - Community involvement- participates in community projects, organization, fund-raising
   - Class absences are not excessive
   - Clinical absences within guidelines
   - Adheres to GHSON Civility Policy
   - Follows the ANA Code for Nurses

2. One representative for S.O.M. is selected from the three levels.
3. The Student of the Year must be in good academic standing within the School of Nursing.
4. Class and clinical absences will be verified by the Coordinator of Admissions, Recruitment, and Financial Aid.

STUDENT OF THE MONTH AWARDS AND SCHEDULE

1. Forms are available on the bulletin board by the student mailboxes and in each classroom.
2. Announcement and presentation of SOM awards will be done at the Student Senate meeting.
3. Student of the Year will be announced at the school’s graduation.
4. Nomination forms must be completely filled out (all sections) and submitted prior to the scheduled meeting of the Commendation Committee for consideration and selection. Blank or partially blank forms will be rejected and will not be eligible for consideration for SOM.
5. Each student of the month will receive the following:
   A. A commendation certificate
   B. (5) $1 coupons for the Graham Hospital cafeteria
   C. A month’s use of a designated parking place in the south parking lot.
6. The Student of the Year, who is selected by the Faculty Organization from the group of Students of the Month, will receive a plaque with her/his name, S.O.Y. and the year engraved on it. The S.O.Y. will also receive a $100 award.
7. Each Student of the Month will be recognized by:
   A. A name display on 3rd floor by the SON office
   B. An announcement at Student Senate.

Reviewed: 6/91, 7/20
Revised: 1/88, 5/92, 3/08, 4/27/98, 4/16/99, 9/26/05, 1/23/06, 5/20/08, 7/1/13, 2/28/14, 5/24/16
GRAHAM HOSPITAL SCHOOL OF NURSING

STUDENT OF THE MONTH NOMINATION FORM

Who may be nominated: Any student from any level who meets the criteria listed below.

Student being nominated for Student of the Month: ___________________________
Level: _______________________________________________

Please deposit this form in the designated box located in the School of Nursing Office or classrooms. Student Senate Commendation meetings will be held once each month for selection purposes.

CRITERIA FOR ELIGIBILITY

The following criteria will be taken into consideration when choosing the Student of the Month. Please provide statements of proof how/why you feel this student meets/exceeds the criteria for eligibility for this award. All class and clinical absences will be verified by the Coordinator of Admissions, Recruitment, and Financial Aid. ALL SECTIONS BELOW MUST BE FILLED OUT COMPLETELY. PARTIALLY FILLED OUT FORMS WILL BE REJECTED FROM CONSIDERATION.

Honesty

________________________________________________________

Loyalty to the school

________________________________________________________

Personal appearance

________________________________________________________

Respect and consideration for others

________________________________________________________

School involvement (list committees, officer, activities)

________________________________________________________

Community involvement (list member, activity)

________________________________________________________

Class absences are not excessive and clinical absences are within guidelines

________________________________________________________

Adheres to GHSON and classroom Civility Policies

________________________________________________________

Follows the ANA Code for Nurses

________________________________________________________

Dev. 12/13/82
Revised 9/2/86, 7/17/95, 7/98, 1/18/07, 2/28/14
Reviewed: 7/29/99, 8/1/00, 7/20/01, 7/20
ARTICLE I. PURPOSE

The purpose of each class organization shall be to provide opportunities for self-government, personal and professional growth of students.

ARTICLE II. FUNCTIONS

1. Implement a program of self-government within each class.
2. Plan and implement activities appropriate to each class in cooperation with Student Senate.
3. Fund-raising activities shall be limited to one class per school year. The senior class has the first option to fund-raise. If the senior class declines the option to fund-raise, the option will be given to the junior class, and then to the freshman class. Each class will decide by September 30 of each school year if they will accept the fund-raising option.

ARTICLE III. MEMBERSHIP AND OFFICERS

Section 1. The membership of each class organization shall consist of all students in that class.
Section 2. The faculty advisor, appointed by the Director, acts as a non-voting member.
Section 3. Class officers elected by the class
   A. Freshman class shall elect officers in September effective immediately
   B. Upper classes shall elect officers in April, assuming office in May
   C. President
   D. Vice-president
   E. Secretary-treasurer
Section 4. Student Senate committee representatives selected by the class
   A. Committee representatives shall be selected at the same time as the class officers
   B. Professional issues
   C. Commendation representative and alternate
   D. Recreation
   E. Student Welfare
   F. Special Community Projects
Section 5. Faculty standing committee representatives selected by the class
   A. Representatives shall be selected at the same time as the class officers
   B. Curriculum representative and alternate
   C. Faculty Organization
   D. Non-academic Grievance (same member as Special Community Projects)
Section 6. Student Senate officers nominated by the class
   A. Current Freshman and Junior classes shall nominate two students for each of their respective Senate offices and submit nominations to the Senate advisor in March.
   B. General Senate elections will be held by written ballot in April.
Section 7. All officers and committee representatives serve for one year and may or may not succeed himself/herself. All officers may succeed themselves, but not committee representatives.

ARTICLE IV. DUTIES

Section 1. President
A. Preside at all class meetings, call special meetings when needed, appoint or call for volunteers for committees when needed.
B. Serve as a member of the Senate Executive Committee
C. Report on class actions at Senate meetings.

Section 2. Vice-President
A. Preside at class meetings in the absence of the president
B. Serve as an alternate to Senate in the absence of the president.

Section 3. Secretary
A. Keep an accurate record of class proceedings and meeting attendance
B. Post the minutes of class meetings on the class bulletin board
C. Submit a copy of class minutes to the class advisor and the original to the school office for filing.
D. Attend to all correspondence of the class.

Section 4. Treasurer
A. Collect class dues as agreed upon by a majority of the class.
B. Keep an accurate record and report to the class of all money received and disbursed.
C. Submit expenditures to the class, and upon approval by a majority vote and authorization by the advisor, pay all bills by check requiring two signatures.
D. The class advisor authorizes payment based on class approval by majority vote.

ARTICLE V. MEETINGS

1. Meetings shall be held once a month, with an advisor present, following Senate meetings.
2. Written minutes of all meetings are to be kept and filed in the school office.
3. Additional meetings may be called by the Director of the school, class advisor, class president, or on written request of a majority of the class.
4. A quorum shall consist of a majority of the class.

Revised 4/29/96, 4/16/99, 3/27/02, 5/22/03
Reviewed: 7/1/13, 7/20
Graham Hospital School of Nursing prohibits the consumption of alcohol at exclusive school functions.

Guidelines for hosting student social functions:

1. No alcoholic beverages may be served at any school or Student Senate-sponsored activities.

2. Social events such as the Senior Recognition Banquet may be held at restaurants or dining establishments that have a public bar, but the bar cannot be opened by student request or voluntarily by the establishment to serve alcoholic beverages to students.

3. Alcoholic beverages may not be consumed during any school function.

(Campus Safety Report)

1/27/06
Revised: 5/28/08, 5/27/10, 7/11/13
Reviewed: 5/25/17
Graham Hospital School of Nursing

Student Senate

SNA Convention Guidelines

1. All nursing students will be eligible to attend the convention.

2. There will be no limit as to the number of students who may attend the convention.

3. Students must be in good academic standing (“C” or better) at GHSON (at the time of application) in order to be eligible to attend the convention.

4. If a student would like to attend the convention, the student must apply for permission by completing the SNA Convention Permission form.
   
   A. The student will read and complete the form.
   B. The student will give the form to the GHSON instructor to be completed and signed.
   C. The student will give the completed form to the Student Senate President within the designated time-frame for convention application.

5. Monies allocated by the Student Senate budget for the convention will be shared between all attendees and will pay for convention tuition, hotel, convention meals, and gas. Submit bills for payment to the Senate Treasurer, obtain checks in advance from the Senate Treasurer for convention tuition and hotel deposit/accommodations.

6. Expenses that are not covered by Student Senate funds are the student’s responsibility.

7. Students are encouraged to reserve the hospital van for transportation well in advance. See Sue Livingston, Director of GHSON to reserve the van.

8. A convention reservation is a commitment by the student. If a student is unable to attend the convention due to an emergency, the student should make every effort to find another student to go in his/her place so that tuition and hotel expenses will not be forfeited.

9. Reservations for hotel accommodations:
   a. A credit card is needed for reservations.
   b. Make early reservations for closer and better hotels.
   c. 2-3 female students per room (2 doubles).

10. As representatives of GHSON, students attending the convention are expected to behave in a professional manner at all times.

11. Students attending the convention are required to attend all sessions possible. (Sessions start early in the morning).
12. Students attending the convention will be required to give a brief oral report to the Student Senate about the convention upon their return.

13. The Senate Vice-President (or designee) will coordinate and oversee the convention trip with the students who will be attending:
   a. Reserve van
   b. Make reservations for convention and hotel
   c. Send tuition and hotel checks early
   d. Act as a resource for the students

14. In the case of an emergency, accident, injury, or unusual happening, contact the Director of the school for further instructions.

   GHSON - 309-647-5240, ext. 2626
   Home - 309-647-3042
   Cellular - 309-338-0414

Revised: 11/21/05, 9/19/07, 7/3/19, 7/8/20
To be completed by the student.

I, ________________________________, would like to attend the SNA Convention. I agree to read and abide by all of the SNA Convention Guidelines, and to behave in a professional manner at all times.

____________________________________               _____________________________________
(Date)                                                                  (Student Signature)

To be completed by the Instructor

As of ____________________, this student is/is not currently in good academic standing (“C” or better) in

(NUR) (Date) (Circle one)

 NUR ______ at Graham Hospital School of Nursing.

____________________________________
(Date) (Faculty Signature)

Reviewed: 7/20

Student Senate
SNA Convention Permission

To be completed by the student.

I, ________________________________, would like to attend the SNA Convention. I agree to read and abide by all of the SNA Convention Guidelines, and to behave in a professional manner at all times.

____________________________________               _____________________________________
(Date)                                                                  (Student Signature)

To be completed by the Instructor

As of ____________________, this student is/is not currently in good academic standing (“C” or better) in

(NUR) (Date) (Circle one)

 NUR ______ at Graham Hospital School of Nursing.

____________________________________
(Date) (Faculty Signature)

Reviewed: 7/20

Student Senate
SNA Convention Permission
Student Senate

Request for Convention/Workshop Educational Promotion Funds.

To be completed by the student:

I, _________________________________, would like to request funds in the amount of
$_________________ so I may attend _______________________________________.

Whereas, I will behave in a professional manner at all times while representing my school.

_________________________  _________________
(Date)               (Student Signature)

*Attach a short paragraph stating the reasons for which you desire to go to this conference/workshop
including what you hope to gain from this educational opportunity and support for the Professional Issues
guidelines located in the Student Handbook.

To be completed by the Instructor:

As of ______________________, this student is/ is not currently in good academic

(Date)    (Circle One)

standing of a “C” or better in NUR _______ at Graham Hospital School of Nursing.

_________________________  _________________
(Date)               (Faculty Signature)

1/26/04
Reviewed: 6/1/11, 7/1/12, 7/20
Student Senate Expense Form

This form must be filled out for any expenses that will be billed to Student Senate or for any expenses that need to be reimbursed from the Senate budget.

**A receipt is necessary for every purchase that is made. (If you used the Student Senate debit/credit card, return a receipt with the card)**

*Student, staff, or faculty fills out this portion:*

Name of purchaser/person to be reimbursed: ____________________________________________

Date of purchase: ____________  Amount: ________________________________

Committee or Budget line: ____________________________________________
Purpose of Purchase: ____________________________________________
Place of Purchase: ____________________________________________

**Method of Payment (please check one):**

Student Senate Debit/Credit card ________

Student Senate Check ________  Check # ________

Personal cash/Check/Debit/Charge ________

Other (explain) ____________________________________________

**Please staple the receipt to this form and return to Student Senate.**

*Student Senate Representative fills out this portion:*

Treasurer/Advisor (SS payee to reimburse) ______________________________

Amount ________________  Check # ____________________

Date_________________________

Revised: 5/25/17
STUDENT HANDBOOK

GRAHAM HOSPITAL ASSOCIATION
SCHOOL OF NURSING

STUDENT SENATE SCHOLARSHIP
NOMINATION FORM

Who may be nominated: Any student who meets the criteria listed below. Students should nominate from within their own level.

Criteria for Eligibility

1. The following will be taken into consideration: honesty, loyalty to the school, personal appearance, consideration for others, and community involvement.
2. One student from each level will be selected to receive a scholarship.
3. The student should be actively involved in school activities which benefit both the school and student body.
4. Must have a good attendance record for theory and clinical and other scheduled activities.
5. Each student nominee must be in good academic standing in the School of Nursing.

Name of the student being nominated: ____________________________________

Class level: ____________________________________

State the reason or reasons you feel this student deserves this award.

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

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__________________________________________________________________________

__________________________________________________________________________

Please return this form to the school office manager. Final selection will be made by the Faculty Organization. Thank you.

Student Senate Executive Committee

Reviewed: 7/20
RESIDENCE HALL POLICY

**Purpose**
The School of Nursing facility is to be used for residential and educational purposes.

**Residence Hall Contract Terms & Conditions**

A. **Assignment Policy**

- Assignment is dependent upon space availability
- First priority is extended to current residents
- Incoming students from farther away from the campus have priority over incoming students from the local area.

Assignment of rooms is the responsibility of the Office Manager. Preferences for specific rooms and roommates will be honored to the extent possible. Room assignments are made with consideration for student needs. The school reserves the right to require a student to move from one room to another. Students may request room changes which may be granted provided there is space available. Requests for private rooms are honored only after all housing requests are fulfilled and space is available. It is the policy of the school to consider compatibility of students when assigning rooms but roommates will be assigned without regard to race or creed. Students of the opposite sex will not be assigned to, nor may they reside in, the same room. A resident may be requested by the school to vacate the residence hall on a temporary or permanent basis for any violation of the Residence Hall Rules.

Men and women who meet the qualifications for admission to the program are accepted into housing annually, regardless of race, creed, age, sex or marital status.

Room assignments will be made during the summer after the school has finalized a list of students wishing to live in the residence hall. (Maximum of 10 female students on the 3rd floor and 2 males on the 4th floor.) Students will be given the opportunity to request specific rooms and/or roommates before assignments are made. The school may not be able to grant all requests due to space availability.

The assignment of single rooms will be made by seniority. Upperclassmen that have previously lived in the residence hall will have first choice. If there is a large number of upper classmen in a given year wishing to live in the residence hall, the decision of who has first choice for single rooms will be based on the date their initial written request for residence hall services was received by the school. The request for residence hall services can be made after being admitted to the program.

Room changes at semester break will be made as rooms become available. Again, this will be decided by seniority. Room changes in mid semester will be made only if the change does not displace another resident or if all parties are agreeable to the move.

B. **Check-In/Check-Out Procedures**
The Office Manager/or designee will complete the check-in process with the resident during the first week of residence. This inspection is to determine the general condition of the furniture and room.
Residents will need to make an appointment with the Office Manager/or designee to check out of their room at the end of the year or upon leaving school. Students are expected to leave their rooms in a clean and orderly manner at the end of the year. The room must be inspected by the Office Manager/or designee for cleanliness and damages. A checkout form will be completed and co-signed by the student and the Office Manager/or designee before the student departs for the summer. A refund of the housing deposit will be mailed to the resident if there is no damage and the room is clean. When the Office Manager/or designee checks the room, the resident must have all belongings out of the room. Any items found in the room after the resident moves out will be collected and discarded after two weeks. The school will not be responsible for any items left in vacated rooms at any time.

Carts are available for help in moving. If at all possible, Graham Hospital requests that students plan their moves during off peak hours (weekend or late afternoon and evening) when the front entrance is not busy. Students may move in during orientation and must vacate their room within a week of the end of spring semester.

C. **Common Areas**

A full-size kitchen is available for resident use on each floor. Residents are responsible for keeping the kitchen areas clean (washing of dishes, wiping off the counter area/stove, cleaning the microwave, keeping counter area free of clutter, etc.). Housekeeping staff is responsible for cleaning the floors but we ask that residents clean up spills as they occur.

A washer and dryer are located on each floor for use by residents. A TV lounge is also available on the 3rd floor. Residents on the 4th floor may use the TV in the Rec Room.

D. **Closing for Summer Vacation**

The residence hall is closed during the official summer vacation period. Residents and all belongings must be removed from the residence hall at that time. The option of staying in the residence hall for the summer is available and a monthly rent is charged. Requests to remain in the residence hall during summer vacation should be made in writing to the Office Manager.

E. **Eviction**

If a resident must be told to leave the residence hall, all belongings must be out of the room within one week or as instructed by the Director of the school. If check-out procedures are not completed by the date of eviction, the locks will be changed on the room and belongings removed.

F. **Housing Deposit**

A deposit of $50 will be assessed at the beginning of each year to students living in the residence hall. The deposit will be added to the student’s fall billing. The student will receive a refund of the deposit after moving out if there is no damage to the property and the room is clean upon inspection. Deposit refunds will be withheld and/or prorated to cover the costs of any damage/cleaning of the housing accommodations. Significant damage may result in extra charges for replacement or repair. Damage to the public areas of the residence hall, including costs for replacing missing furniture and other furnishings, which cannot be attributed to specific individuals or groups, will be charged to all residents of the smallest applicable area of the hall, the total being divided equally.

G. **Liability**

The school assumes no responsibility for the personal property of students. This includes damage, loss, fire, water damage, theft, flooding, etc. Residents desiring this kind of protection must make their own arrangements for insurance.
H. **Room Interiors/Furnishings**

Each room is furnished with a bed, chest of drawers, nightstand, desk, chair, small refrigerator and closet. Wireless internet and cable TV service is available throughout the residence hall area. Residents may arrange furniture as they desire although furniture should not be positioned in a way that totally blocks the air/heat units under the windows. Lofting of the beds is prohibited. The School of Nursing is not responsible for physical injuries or property damage incurred if residents move furniture. Charges for loss of and/or damage to residence hall furniture will be made (see dorm deposit section).

Ventilation units on window ledges should be kept clear, the panel under the window to the heating/air conditioning unit and thermostats on side walls should also not be obstructed. Nails, screws, tape or hooks may not be attached to furniture, walls, or doors. Removable hooks (3M hooks and hangers) or removable plastic adhesive should be used to attach decorations to the walls. Ceiling hangings of any description are not permissible as they interfere with the proper function of the fire/smoke detection and prevention devices. Painting of the rooms is prohibited. Christmas tree lights, candles and incense burners are not permitted due to Fire Regulations. Extension cords are not permitted. A power/surge protector strip with extension is allowed. Only one strip per outlet can be used (do not plug one into another to make it longer). The following items are not permitted to be used or stored in student rooms or any other area of the residence halls: any internal combustion engine, any acids, automobile batteries, gasoline, and firearms. Because of Health and Safety considerations, cooking appliances such as hot plates, resistance coils, grills, frying pans, coffee pots, and toasters may not be used in residence hall rooms. They are allowed in the kitchen only. Microwaves and Keurig-type kitchen appliances can be used in individual rooms.

I. **Termination**

Graham Hospital School of Nursing can terminate the residence hall agreement at any time for violation of the terms and conditions per the Residence Hall Agreement signed by the student prior to occupation of the room.

J. **Withdrawal**

Residence hall residents who officially or unofficially withdraw from the program will be expected to check-out within one week. If belongings are not out of the room within this time period, the locks will be changed on the room and belongings removed.

**Residence Hall Rules**

Failure to observe school regulations or Federal, State and local laws subjects the violator to disciplinary action and/or prosecution in the civil courts and/or cancellation of the residence hall contract.

A. **Alcohol/Drugs**

The School of Nursing and the residence hall adheres to the Graham Health System policy on substance abuse in the workplace which states:

“Graham Health System is committed to providing a safe, healthy, and productive work environment. Consistent with this commitment, this policy establishes Graham Health System’s intent to maintain a drug and alcohol-free workplace.

Graham Health Systems expressly prohibits the following activities at any time that employees are either (1) on duty or conducting Graham Health System business (either on or away from Graham Health system’s premises), or (2) on Graham Health System’s premises (whether or not the employee is working):
• The use, abuse, or being under the influence of alcohol, illegal drugs, or other impairing substances.
• The possession, sale, purchase, transfer, or transit of any illegal or unauthorized drug, including prescription medication that is not prescribed to the employee or drug-related paraphernalia.
• The illegal use or abuse of prescription drugs.

While the use of marijuana has been legalized under state law for medicinal and recreational uses, it remains an illegal drug under federal law and its use as it impacts the workplace is prohibited by Graham Health System’s policy. Graham Health System does not discriminate against employees solely on the basis of their off-duty use of medical marijuana in compliance with Illinois’ medical marijuana law. However, employees may not consume or be under the influence of marijuana while on duty or at work, even if the employee has a valid prescription for medical marijuana.”

Therefore, residents of the School of Nursing residence hall are prohibited from the possession, use, and/or sale of marijuana, hallucinogens, and other drugs not prescribed by a physician. No illegal drugs or alcoholic beverages will be allowed on the premises. Students who bring alcohol or illegal drugs onto the hospital premises or who allow their guests to bring such items in will be asked to leave the residence hall and will be reported to the proper authorities. Students violating any laws will not be protected from prosecution by the courts. Also, violation of this policy will be subject to discipline under the school’s substance abuse policy.

B. **Bottles and Cans**

Empty bottle and can collections other than those in designated recycling containers are not permitted. They present a general health and pest hazard. Retaining empty alcohol containers is a violation of the General Conduct policy (pgs. 9-10).

C. **Cafeteria**

Students receive a discount on cafeteria purchases. If you wish to bring food from the cafeteria, please request disposable ware. Do not remove dishes or silverware from the cafeteria.

D. **Cooking and Food Storage**

Residents may not cook in their rooms because of the potential fire hazard. All cooking must be done in the kitchen provided on your floor. Each student who uses a kitchen facility shares in the responsibility of washing dishes, utensils, and keeping the counters, stove, sink and refrigerator clean. Problems of shared cleaning responsibility may result in the temporary closing of the kitchen area. Students may use microwaves and Keurig-type appliances in their rooms.

Any food kept in the residence hall rooms must be stored in appropriate, tightly-closed containers.

E. **Emergency Plans (Campus Safety Report)**

Always take time for the following steps during any emergency situation:

1. Close drapes or blinds
2. Turn ON all ceiling lights, turn OFF electrical equipment
3. Close your door
4. Check on other dorm residents
5. Do not use elevators
6. Assemble as a group in the appropriate area
7. Wait for an “ALL CLEAR” from the over-head paging system before returning to rooms
Fire Plan (Campus Safety Report) – Residents should assemble in the TV lounge on their floor during after-hour fire alarms. When leaving your room, please turn ON the light, shut OFF any major electrical equipment (TV, etc.) and close your door. The resident with the most seniority shall call or dial zero for switchboard operator/ED Pt Access to report the number of students and shall appoint, if needed, one student to check rooms. The overhead paging system will notify you with an “All Clear” announcement when it is safe to return to your room. If evacuation of the building is necessary, the staging area for the School of Nursing is the main parking lot in front of the hospital. You would proceed down the nearest stairwell (Stairwell #4 on the west side of the building) to the parking lot.

Tornado Warning (Code Black) – Dorm residents will be notified by the overhead paging system with a “Code Black” when a tornado warning is issued for the area. For a tornado warning page, residents should assemble in the hallway or bathroom and wait for the all clear. Residents may also choose to take the stairs down to an interior hallway on the main floor until the all clear is given. The paging system will not be used for announcing thunderstorm warnings or tornado watches unless the house supervisor deems it necessary. Residents should monitor local television stations or an online source for severe thunderstorm or tornado watches during severe weather.

Disaster Plan (Code Triage) - “Code Triage” notifies hospital staff that a significant event has occurred and to prepare for emergency conditions. Students may be asked to assist hospital staff (transport patients, runner for departments, etc.) Students should be able to present their student ID at all times. See your Student Handbook – Disaster Plan Code Triage Response for more specific instructions.

F. Internet & Computer Lab
Students utilize the hospital’s guest network available throughout the hospital to access the internet. The library’s computer lab is also available for all students. Students may use their ID badge to enter the computer lab after hours and on weekends.

Problems with the internet service should be reported to the Office Manager or the hospital Help Desk (ext. 5555 or by email to helpdesk@grahamhospital.org.

G. Keys
The Office Manager will provide each resident with a key to his/her room. If it should be lost or stolen, another key may be obtained for five dollars ($5.00). The school will not be held responsible for any loss. Keys will be returned at the time of check-out.

H. Mail Service
Your address while a resident at Graham Hospital School of Nursing should be addressed as follows:

Student Name
GHSON
210 W. Walnut
Canton, IL  61520

Mail for residents is sorted to the school’s department mail slot and picked up by school staff. School staff will deposit student mail into your assigned school mailbox. Packages or envelopes sent by UPS, FedEx, etc. are delivered to the school office by hospital personnel. Residents may pick up their packages in the school office. A slot for outgoing mail is available in the hospital lobby or may be left in the school office outgoing mail. Stamps may be purchased from the hospital cashier (sold per stamp) or from the Human Resources department (books of stamps only).
I. **Missing Student Policy** (SH as a policy, here, CSR, & FH)
   A student will be considered missing if a roommate, classmate, faculty member, friend, or other member of the campus community has not seen the person for a reasonable amount of time. A reasonable amount of time may vary with the time of day and information available regarding the missing person’s daily schedule, habits, punctuality and reliability. Most missing person reports in the college environment are the result of a student changing his/her routine without informing roommate(s), family and/or friends of the change. Individuals will be considered missing immediately if the absence has occurred under circumstances that are suspicious or cause concerns for the student’s safety. If the initial report that a person is missing is made to a Graham Hospital department other than the School of Nursing, the person receiving the report shall ensure that the School of Nursing Director is contacted immediately. In the event another student or employee believes a student who resides on campus is missing, the School of Nursing Director or Office Manager should be contacted as soon as possible. If the student lives off-campus, the local law enforcement agency should be contacted.

   **Procedures** - At the beginning of each academic year, residential students will be asked to voluntarily provide emergency contact information. This emergency information will be maintained by the School of Nursing office and will be updated annually. Confidential contact information will be accessible only to authorized campus officials, and it will not be disclosed, except to law enforcement personnel in furtherance of a missing person investigation. Upon notification from any entity that a student may be missing, school officials may use any of the following procedures or resources to assist in locating the student.

   1. Call the student’s room.
   2. Conduct a safety check of the student’s room.
   3. Talk to the student’s roommate, floor mates, and/or classmates to see if anyone can confirm the missing student’s whereabouts and/or confirm the date, time, and location the student was last seen.
   4. Call and text the student’s cell phone and/or e-mail the student.
   5. Check all possible locations mentioned by parties above.
   6. Check social networking sites.
   7. Ascertain student’s car make and license plate. Graham Hospital Security will check parking lots.
   8. Technology staff may be asked to obtain e-mail logs or access logs to the Graham Hospital computer system.

   The student’s emergency contacts will be notified if the student has not been located after utilizing the above resources.

   Note: Students under the age of 18 are advised that a custodial parent or guardian will also be notified within twenty-four hours of determination that student is missing.

J. **Overnight Guests**
   Guests must observe all regulations of the School of Nursing, and the host/hostess student is responsible for any infraction or damage caused by his or her guest. If infractions continue after a warning has been given, disciplinary action will take place. Overnight guests of the opposite sex are prohibited at all times. Visiting hours are: 11:00 am until 11:00 pm Sunday through Thursday and from 11:00 am to 1:00 am Friday and Saturday.

K. **Parking**
   Parking for all students is available in the upper west lot or south parking lot across from the hospital on Maple Street. Please do not park in the lower lot adjacent to the entrance to the hospital. Students will be asked to move their vehicles ASAP when found parked in the lower lot. The hospital is not responsible for vandalism to vehicles.
L. **Pets**
   Pets of any kind are not allowed on hospital property.

M. **Repair/Maintenance Issues**
   All repairs or maintenance issues (light out, water leak, heating/cooling issues, etc.) should be reported promptly to the Office Manager. During evening and weekend hours, residents may contact the switchboard to request assistance during emergency situations (ex: smoke coming from fan units, large water leaks, etc.). For minor maintenance issues, please wait until normal weekday work hours and report the problem.

N. **Residence Hall Concerns**
   When necessary, meetings will be held with the Office Manager and residents regarding concerns of the residence hall. Issues not resolved at that time will be handled by school administration.

O. **Right of Entry/Inspection or Entering of Rooms**
   Graham Hospital believes your right to privacy is important and will be respected whenever possible. However, the hospital reserves the right for designated authorities to enter student rooms any time without prior notice. The following are several reasons for entry into a resident room:
   - Health, safety, maintenance, or personal welfare checks
   - Clear indication that established standards of conduct are being violated, or to protect hospital property.
   - Semester closing and break periods.

   Designated authorities include the GHSON Director, Office Manager, Coordinator of Admissions, Recruitment, and Financial Aid and/or hospital security and maintenance personnel.

   If it is necessary to enter your room when you are not present, staff will attempt to leave you a note or let you know afterward that your room was entered and the reason.

P. **Security**
   The School of Nursing elevator (Elevator 3) will be locked each night at 8:30 pm and will be unlocked by 7:00 am. The south and west 3rd floor stairwell doors are self-locking and unavailable as an entrance to the 3rd floor. A resident’s ID badge is needed to access the residence hall areas after 5:30 pm and during the weekend. Blocking the security device to the residence hall area or propping open the doors is prohibited.

   All hospital entrances are locked at night. The south side patio doors and the emergency room entrance may be entered with the resident’s ID card.

   Any instances of security problems such as unauthorized persons after hours should be reported to security personnel by calling the switchboard (dial “0” on any hospital extension). These incidents should also be reported to the Director of the school as soon as possible.

Q. **Smoking**
   Smoking or use of tobacco products is not permitted in the building or on hospital property (including parking lots).

R. **Solicitation**
   The school prohibits any sales or solicitation in the residence hall.
S. **Telephones**

Each room has a phone provided with a hospital extension (309-647-5240 plus your room extension). Local calls from student rooms is available free of charge and is accessed by dialing 9. Voice mail service is available on the phones. Directions for the voice mail may be found on the dorm bulletin board. Questions or issues should be directed to the school office staff.

We recommend residents use a cell phone or obtain a pre-paid long-distance card in order to make long distance calls. Phones are also located in common areas such as the kitchen, living room, and bathroom.

T. **Visitor's Hours**

Students may have male and female visitors in the residence hall rooms from 11:00 am to 11:00 pm Sundays through Thursdays and from 11:00 am to 1:00 am Friday and Saturday. Male guests must leave the residence hall at the designated time and may not stay overnight. The same guidelines apply to female guests of male students.

The Hospital reserves the right to make additions, deletions, or amendments to the Residence Hall Policy as they deem necessary in order that the intent and character of the residence hall be maintained. In the event that a student resident is found in violation of the regulations of the residence hall and thereby jeopardizing the reputation and order of the other residents, such resident will be required to leave the residence hall within one week.

7/2010
Revised: 7/8/11, 6/25/12, 3/2013, 7/2/14, 6/29/15, 6/18/18, 7/1/20
Reviewed: 6/16/17
Graham Health System employees who become ill while on duty or calling in absent for a scheduled shift must report any of the following (but not limited to) conditions to their Supervisor or Director, and the Infection Control Nurse.

1. Temperature - 100 degrees or above (must be temp free for 24 hours before returning to work), chills
2. Repeated coughing, sputum production, including pneumonia and bronchitis
3. Vomiting, diarrhea and/or gastroenteritis
4. Rash, poison ivy/oak
5. Lesions, weeping dermatitis, including impetigo and other staphylococcal infection
6. Any multi-drug resistant organism (examples: MRSA, VRE, CRE, ESBL)
7. Draining wounds, sores
8. Back pain
9. Pink eye (conjunctivitis)
10. Head or body lice, bed bugs or scabies (mites)
11. Diagnosed streptococcus (Group A) sore throat
12. Acute upper respiratory infection
13. Clostridium difficile
14. Influenza
15. Employee with an open or draining wound must be seen by Infection Control Nurse
16. Symptoms related to any community and or national outbreak must be reported immediately to your supervisor/director and the Infection Control Nurse. Supervisor and Infection Control Nurse will determine the next course of action.
17. For a more expanded list refer to Employee Portal, Infection Control Policies, Employee Health, Work Restrictions for Health Care Personnel Exposed to Infectious Disease

The Physician Chairman of Infection Control and Infection Control Nurse will collaborate to determine the significance of any employee health condition in relation to job responsibilities and the employee’s restrictions regarding direct patient contact.

REFERENCES

_A printed version of this policy is not considered the most current, please refer to the electronic system for the most current policy._
POLICY

Any Graham Health System employee who suspects having developed or being exposed to a communicable disease must report the incident immediately to the Infection Control Nurse. If the Infection Control Nurse is not available, notify the Nursing Supervisor.

Exposure is considered to have occurred if the employee is susceptible and proper barrier techniques were not used prior to diagnosis. Refer to the Employee Infection Control Policy regarding reporting of communicable disease exposure. If the exposure was occupational, complete an incident report and document the source patient's name, medical record number, attending physician, and a brief explanation of how the exposure occurred. Intervention will be given at the discretion of the physician. Those diseases which are of concern to hospital employees and have specific indications for interventions are listed in the following pages titled work restrictions for HC Personnel exposed to infectious disease.

REFERENCE

CDC Personnel Health Guideline
www.cdc.gov/hicpac/pdf/InfectionControl98.pdf

See table below for specific work restrictions for listed disease/problem.
Work restrictions for the different communicable diseases are as follows:

<table>
<thead>
<tr>
<th>Disease/Problem</th>
<th>Work Restriction</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conjunctivitis</td>
<td>Restrict from patient contact and contact with the patient’s environment</td>
<td>Until discharge ceases</td>
</tr>
<tr>
<td>Cytomegalovirus infections</td>
<td>No restriction</td>
<td></td>
</tr>
<tr>
<td>Diarrheal disease</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acute state (diarrhea with other symptoms)</td>
<td>Restrict from patient contact, contact with the patient’s environment, or food handling</td>
<td>Until symptoms resolve</td>
</tr>
<tr>
<td>Convalescent state, Salmonella spp.</td>
<td>Restrict from care of high-risk patients</td>
<td>Until symptoms resolve, consult with local and state health authorities regarding need for negative stool cultures</td>
</tr>
<tr>
<td>Diphtheria</td>
<td>Exclude from duty</td>
<td>Until antimicrobial therapy completed and 2 cultures obtained ≥ 24 hours apart are negative</td>
</tr>
<tr>
<td>Enteroviral infections</td>
<td>Restrict from care of infants, neonates, and immunocompromised patients and their environments</td>
<td>Until symptoms resolve</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>Restrict from patient contact, contact with patient environment and food handling</td>
<td>Until 7 days after onset of jaundice</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>No restriction; refer to state regulation standard precautions should always be observed</td>
<td></td>
</tr>
<tr>
<td>Personnel with acute or chronic</td>
<td>Do not perform exposure-prone invasive procedures until counsel from an expert review panel has been sought, panel should review and recommend procedures worker can perform, taking into account specific procedure as well as skill and technique of worker; refer to state regulations.</td>
<td>Until Hepatitis B surface antigen is negative</td>
</tr>
<tr>
<td>Hepatitis B surface antigenemia</td>
<td>No restriction; refer to state regulation standard precautions should always be observed</td>
<td></td>
</tr>
<tr>
<td>Personnel with acute or chronic</td>
<td>Restrict from patient contact and contact with the patient’s environment</td>
<td></td>
</tr>
<tr>
<td>Hepatitis C</td>
<td>No recommendation</td>
<td></td>
</tr>
<tr>
<td>Herpes simplex</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Genital</td>
<td>No restriction</td>
<td></td>
</tr>
<tr>
<td>Hands (herpetic whitlow)</td>
<td>Restrict from patient contact and contact with the patient’s environment</td>
<td>Until lesions heal</td>
</tr>
<tr>
<td>Orofacial</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Human Immunodeficiency Virus</td>
<td>Do not perform exposure-prone invasive procedures until counsel from an expert review panel has been sought, panel should review and recommend procedures worker can perform, taking into account specific procedure as well as skill and technique of worker; standard precautions should always be observed; refer to state regulations.</td>
<td></td>
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<td>--------------------------</td>
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<td>---------------------------------------------</td>
</tr>
<tr>
<td><strong>Measles</strong></td>
<td><strong>Respiratory</strong></td>
<td>Exclude from duty</td>
</tr>
<tr>
<td></td>
<td><strong>Active</strong></td>
<td>Exclude from duty</td>
</tr>
<tr>
<td></td>
<td><strong>Post-exposure (susceptible personnel)</strong></td>
<td>Exclude from duty</td>
</tr>
<tr>
<td><strong>Methicillin Resistant Staph aureus (MRSA)</strong></td>
<td><strong>Wound/skin</strong></td>
<td>Exclude from duty</td>
</tr>
<tr>
<td></td>
<td><strong>Respiratory</strong></td>
<td>Exclude from duty</td>
</tr>
<tr>
<td><strong>Meningococcal infections</strong></td>
<td>Exclude from duty</td>
<td>Until 24 hours after start of effective therapy</td>
</tr>
<tr>
<td><strong>Mumps</strong></td>
<td><strong>Active</strong></td>
<td>Exclude from duty</td>
</tr>
<tr>
<td></td>
<td><strong>Post-exposure (Susceptible personnel)</strong></td>
<td>Exclude from duty</td>
</tr>
<tr>
<td><strong>Pediculosis</strong></td>
<td></td>
<td>Restrict from patient contact</td>
</tr>
<tr>
<td><strong>Pertussis Active</strong></td>
<td></td>
<td>Exclude from duty</td>
</tr>
<tr>
<td></td>
<td><strong>Post-exposure (asymptomatic personnel)</strong></td>
<td>No restriction, prophylaxis recommended</td>
</tr>
<tr>
<td></td>
<td><strong>Post-exposure (symptomatic personnel)</strong></td>
<td>Exclude from duty</td>
</tr>
<tr>
<td><strong>Rubella</strong></td>
<td><strong>Active</strong></td>
<td>Exclude from duty</td>
</tr>
<tr>
<td></td>
<td><strong>Post-exposure (susceptible personnel)</strong></td>
<td>Exclude from duty</td>
</tr>
<tr>
<td><strong>Scabies</strong></td>
<td></td>
<td>Restrict from patient contact</td>
</tr>
<tr>
<td>Infection/Condition</td>
<td>Work Restrictions</td>
<td>Duration/Conditions</td>
</tr>
<tr>
<td>-----------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><em>Staphylococcus aureus</em> infection</td>
<td>Active, draining skin lesions</td>
<td>Until lesions have resolved</td>
</tr>
<tr>
<td>Carrier state</td>
<td>No restriction, unless personnel are epidemiologically linked to transmission of the organism</td>
<td>Until lesions have resolved</td>
</tr>
<tr>
<td><em>Streptococcal infection, group A</em></td>
<td>Restrict from patient care, contact with patient’s environment or food handling</td>
<td>Until 24 hours after adequate treatment started</td>
</tr>
<tr>
<td><em>Tuberculosis Active disease</em></td>
<td>Exclude from duty No restriction</td>
<td>Until proved non-infectious</td>
</tr>
<tr>
<td><em>Varicella</em></td>
<td>Exclude from duty</td>
<td>Until all lesions dry and crust</td>
</tr>
<tr>
<td>Active</td>
<td></td>
<td>From 10th day after 1st exposure through 21st day (28th day if VZIG given) after last exposure</td>
</tr>
<tr>
<td>Post-exposure (susceptible personnel)</td>
<td>Exclude from duty</td>
<td>Until all lesions dry and crust</td>
</tr>
<tr>
<td><em>Zoster</em></td>
<td>Cover lesions; restrict from care of high-risk patients</td>
<td>Until all lesions dry and crust</td>
</tr>
<tr>
<td>Localized in health person</td>
<td>Restrict from patient contact</td>
<td>Until all lesions dry and crust</td>
</tr>
<tr>
<td>Generalized or localized immune-suppressed person</td>
<td>Restrict from patient contact</td>
<td>From 10th day after 1st exposure through 21st day (28th day if VZIG given) after last exposure</td>
</tr>
<tr>
<td>Post-exposure (susceptible personnel)</td>
<td>Restrict from patient contact</td>
<td>From 10th day after 1st exposure through 21st day (28th day if VZIG given) after last exposure</td>
</tr>
<tr>
<td><em>Viral respiratory infections, acute febrile</em></td>
<td>Consider excluding from the care of high-risk patients or contact with their environment during community outbreak of RSV and influenza</td>
<td>Until acute symptoms resolve</td>
</tr>
</tbody>
</table>
Pregnant employees will not be given live-virus vaccinations (MMR, Varivax). Hepatitis B Vaccination will be given with the employee's written consent. TB testing and other immunizations will not be delayed unless written request is received from their personal physician.

Listed are those diseases (which may not be inclusive) that appear to be of greatest concern to pregnant employees. All personnel should routinely wash hands before and after patient contact, follow Universal Precautions at all times and follow appropriate Isolation Procedures. Employees should notify their immediate supervisor and/or Human Resources as soon as they are aware the condition of pregnancy exists.

<table>
<thead>
<tr>
<th>Disease</th>
<th>Restriction</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cytomegalovirus (CMV), Ebola</td>
<td>Yes</td>
<td>Use care in handling blood, body fluids and needles, close contact with infected persons, especially young children.</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>No</td>
<td>Use care in handling blood, body fluids and needles. Hepatitis B vaccine is recommended.</td>
</tr>
<tr>
<td>Hepatitis E</td>
<td>Yes</td>
<td>Use care in handling blood, body fluids and needles.</td>
</tr>
<tr>
<td>Herpes Simplex</td>
<td>No</td>
<td>Employee should wear 2 gloves when suctioning and giving mouth care to patients.</td>
</tr>
<tr>
<td>Rubella (German Measles)</td>
<td>Yes, unless immune</td>
<td>Employee must have documentation of immunity proved by titer or vaccination.</td>
</tr>
<tr>
<td>Varicella-Zoster virus (VZV)</td>
<td>Yes, unless immune</td>
<td>Employee must have history of having had chickenpox. If exposed to un-isolated cases, employee with negative or unknown history to VZV should follow policy on Work Restrictions for HCW Exposed to Infectious Disease.</td>
</tr>
</tbody>
</table>

REFERENCE

Title: Employee Tuberculosis Policy

Original Date: 10/1988

Infection Prevention/Employee Health

Review Dates: 9/03, 2/04, 2/08, 5/11, 5/15, 3/17

Revision Dates: 4/02, 1/05, 2/06, 1/07, 6/11, 11/12, 1/13, 3/14, 9/16, 3/18, 3/19, 5/19

APPROVED BY: Physician Chairman of Infection Control
V.P. of Nursing/CNE

Date: May, 2019

1. Pre-employment/Employment evaluation:
   a. All hospital employees must be screened for TB (Tuberculosis) within 7 days of hiring to establish whether the employee has active TB or has been previously exposed and built up antibodies. Pregnancy is not a contraindication for routine testing.
   b. A 2-step PPD skin test (Mantoux) must be initiated within 7 days of employment unless a previously significant reaction can be documented. Those with previous reactions will have a chest x-ray. A history of BCG vaccination does not preclude testing.
   c. Results of testing will be used in determining treatment and follow up.
   d. After the initial test, all GHS employees and volunteers will complete an annual TB survey.

2. Administration of the Tuberculin Test
   a. The Mantoux Test is performed by giving an intradermal injection of 0.1 ml of purified protein derivative (PPD) tuberculin containing 5 tuberculin units (TU) into the dorsal surface of the skin with the needle bevel facing upward. This should produce a discrete pale elevation of the skin (a wheal) 6mm - 10mm in diameter.
   b. The reaction to the Mantoux test should be read by a trained health care worker, Infection Control (Nursing Administration, and Nursing Supervisors) 48-72 hours after the injection.
      i. Employees who fail to show up for scheduled reading:
         1. a positive reaction may be measurable up to 1 week
         2. a negative test will need to be repeated if not read in 48-72 hours.
      ii. Classifying the Tuberculin Reaction
         1. > 5 mm is positive in
            a. Persons known to have or suspected of having HIV infection.
            b. Recent contacts of a person with infectious TB.
            c. Persons who have a chest radiograph suggestive of previous TB.
            d. Persons who inject drugs (if HIV status unknown).
            e. Patients with organ transplants and other immunosuppressed patients. Receiving the equivalent of 15 mg/d of prednisone for one month. Receiving TNF antagonists: e.g., Humira, Enbrel or Remicade.
         2. > 10 mm is positive in
            a. Persons with certain medical conditions, excluding HIV infection. (Silicosis, diabetes mellitus, chronic renal failure, some hematological disorders, gastrectomy, jejunooileal bypass)
            b. Persons who inject drugs (if HIV negative).
            c. Foreign-born persons from areas where TB is common.
            d. Medically underserved, low-income populations, including high-risk racial and ethnic groups.
e. Residents and employees of high-risk congregate settings (prisons, jails, nursing homes, other long-term facilities, hospitals, homeless shelters, other health care facilities).

f. Children younger than 4 years of age.

g. Locally identified high-prevalence groups (e.g., migrant farm workers or homeless persons)

h. Mycobacteriology personnel

i. Infants, children, and adolescents exposed to adults at high risk for developing active TB.

3. > 15 mm is positive in

a. All persons with no known risk factors for TB.

3. Evaluation

a. Employees with positive TB test results will have a chest x-ray and a QFT lab test. If chest x-ray is positive, the employee will be recommended to see his/her personal physician or a pulmonologist for follow-up. A return to work slip will be required along with baseline physical and treatment plan completed by the physician. QFT will be reviewed upon receipt of results. The Fulton County Health Department will also be notified of all positive results.

b. When performing a 2-step Tuberculin Test, employees with negative TB results will be retested 1-3 weeks after receiving the first test.

c. A negative test result is considered not infected with TB and nothing further needs to be done.

4. Post-Exposure Prophylaxis:

a. After exposure (occupational or non-occupational) to an infectious case of TB during which proper precautions were not used, all employees, except those with initial significant reactions, will be screened for TB. Pregnancy is not a contraindication for testing following an exposure.

b. Unless a skin test was given during the 3 months before exposure, a baseline 1-step PPD skin test (Mantoux) will be done through advisement of the Fulton County Health Department.

c. A 1-step PPD skin test (Mantoux) will then be repeated 8-10 weeks after exposure or will be repeated if recommended by Fulton County Health Department.

d. Employees with a previously significant reaction will not have a chest x-ray taken unless they develop symptoms that may be due to TB – productive cough, weight loss or night sweats.

e. Employees whose skin tests convert from negative to positive will receive a chest x-ray and will be recommended to their personal physician or a pulmonologist for follow-up. A return to work slip will be required. Repeat chest x-rays for converters should be done yearly for 2 years.

f. Employees who have LTBI and no proper treatment are encouraged to complete treatment with the recommended regimen, unless a contraindication exists. The employee will work with their primary care physician or public health agency for the proper resources and follow-up.

WORK RESTRICTIONS

1. Employees whose sputum smears show bacilli cannot work until:

a. Treatment has been received for 2 weeks and there is evidence of clinical improvement:

i. Sputum must be free of bacilli on 3 consecutive smears obtained on separate days.

ii. Sputum cultures must show no growth.

b. Employees who discontinue medication for current disease before the course of therapy has been completed cannot work.

c. Employees who cannot take, do not accept, or don't complete preventive treatment when indicated cannot work in high risk areas and must seek evaluation if symptoms develop that may be due to TB.
POLICY

Two vaccinations, one month apart, against measles, mumps and rubella are a requirement of employment, unless one of the following conditions exists:

1. The employee will not receive the MMR vaccine if:
   a. Pregnant
   b. Planning to be pregnant within three months. If either of the above conditions exists, the employee will be scheduled for the vaccine at a later date.
   c. Known allergy

2. The employee will not receive the measles vaccine if:
   a. Born on or prior to 12-31-57.
   b. Documented evidence of physician diagnosed measles.
   c. Documented evidence of Live Virus measles vaccine.
   d. Serologic test results show positive measles antibody titer.

3. The employee will not receive the mumps vaccine if:
   a. Born on or prior to 12-31-57.
   b. Documented evidence of physician diagnosed mumps.
   c. Documented evidence of Live Virus mumps vaccine.

4. The employee will not receive the rubella vaccine if:
   a. Documented evidence of Rubella vaccine.
   b. Serologic test results show positive rubella antibody titer. (Note: most women who have been pregnant within the last ten to fifteen years were given this test).

Documented evidence must be presented within one month of request for new employee immunizations unless the employee is planning to be vaccinated.

Vaccination with MMR of persons who were previously immune to one or more of its components is not associated with significant adverse effects.

REFERENCE

Recommended Adult Immunization Schedule, by Vaccine and Age Group, April 14, 2015

A printed version of this policy is not considered the most current, please refer to the electronic system for the most current policy.
**POLICY**

Two vaccinations, one month apart, against varicella are a requirement of employment, unless one of the following conditions exists:

1. The employee will not receive the Varicella vaccine if:
   a. History of previous varicella infection
   b. Serologic screening determines immunity
   c. Known allergy

2. The employee will not receive the Varicella vaccine if:
   a. Pregnant
   b. Planning to be pregnant within three months. If either of the above conditions exists, the employee will be scheduled for the vaccine at a later date.

3. The employee will not receive the Varicella vaccine if:
   a. Hypersensitivity to any component of the vaccine, gelatin or neomycin.
   b. History of blood dyscrasias, leukemia, lymphoma, or malignant neoplasm
   c. Receiving immunosuppressive therapy
   d. Immunodeficiency due to HIV/AIDS or other disease states

**REFERENCE**

Recommended Adult Immunization Schedule by Vaccine and Age Group, April 14, 2015 Immunization of HCW: Recommendations of ACIP, MMWR, 2011; 60(RR07):1-45, Update April 15, 2014


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A printed version of this policy is not considered the most current, please refer to the electronic system for the most current policy.
### POLICY

1. Any employee who suspects having developed scabies or Pediculosis infestation must report the incident immediately. Refer to Employee Exposure to Communicable Disease Protocol.
2. Asymptomatic employees who have had direct skin to skin contact with scabies infested patients may be treated prophylactically.
3. Asymptomatic employees who have had contact with lice infested patients do not require treatment.
4. Anytime an employee is exposed to head lice or scabies, an Employee Illness/Injury form must be completed.
5. Employees with a diagnosis or probable scabies will be sent home with medication and may return to work 24 hours after treatment is completed. Asymptomatic employees may complete the shift before going home to begin treatment.
6. Medication is for employees only, but will be given to family members on an individual basis if necessary.
7. Contraindications for treatment are:
   - Pregnancy - Consult OB/GYN physician (must have written approval for treatment)
   - Children - Consult pediatrician
8. Outbreak - Involves more than one patient or employee.
   - All involved employees are to be notified.
   - All physicians having patients in an infested area are to be notified.
   - All medication should be applied within the same time period.
   - If control fails - all patient and employees should be treated.
   - If control then fails - all patients, employees and families should be treated.

### REFERENCE

- American Journal of Infection Control (APIC), 26(3): 298-327