

**THE UNIVERSITY OF TENNESSEE AT
CHATTANOOGA SCHOOL OF NURSING**
Graduate Student Handbook

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This handbook was developed for students and faculty to provide a comprehensive document about the master's program in nursing. It is subject to change from time to time without notice. Before using the information herein for major decisions, please contact the School of Nursing.

It is essential that students understand the information presented in this handbook to facilitate progression through the graduate nursing program at UTC. This graduate nursing handbook is designed to be used in conjunction with other UTC publications such as the UTC Graduate Catalog and the UTC Student Handbook & Directory. All information in this handbook is in accordance with policies of the University, the Graduate School and the School of Nursing. All publications can be found on the University website at www.utc.edu.

Our Vision

The School of Nursing (SON) is dedicated to ensuring quality nursing education that is responsive to the needs of our community of interest.

Our Mission

The Mission of the SON is to prepare qualified nursing professionals who can influence the health care environment and enhance the quality of life for individuals, families and society. We are committed to providing leadership in health care.

Our Core Values

As the SON moves forward its mission and vision; it is guided by values that are grounded in a professional nursing practice that embraces clinical and scholarly excellence. The faculty, staff and students will:

1. Uphold and, at all times, act in concert with ethical values and principles.
2. Communicate with integrity, keep promises, and honor commitments.
3. Partner with our community of interest by creating relationships to promote common interest and shared values.
4. Practice stewardship through fair and responsible management of gifts and resources.
5. Espouse life-long learning, inquiry, and critical thinking.
6. Commit to quality and excellence in all we do.
7. Generate commitment and passion for the practice of nursing.
8. Foster creativity.
9. Model leadership.
10. Create an environment of inclusiveness where individual, intellectual and social diversity are valued.

PHILOSOPHY

Introduction

The School of Nursing frames its philosophy and programs within the theoretical structure of Dorothea Orem's Self-Care Deficit Nursing Theory. Orem identifies Self-Care Deficit Nursing as "a general theory of what nursing is and should be in concrete nursing practice situations" (Orem, 2001, p.136).

The School of Nursing's philosophical definitions of person, environment, health, nursing and nursing education are infused with Orem's terminology. Agency refers to an individual's capabilities and is used in the context of both the nurse and patient.

Person

A person has the actual or potential attribute of self-care agency. This agency, or capability, allows the person to deliberately learn and perform actions for survival, health and well-being. Factors affecting learning include age, mental capacity, culture, societal conditions, and a person's developmental or emotional state.

People dynamically move toward maturation and achievement of their full human potentials by integrating physical, psychological, interpersonal and social aspects of their lives. To do this they must reflect upon themselves and their environments and provide input into both self and environment. People use both symbols and words to express their ideas to communicate with others.

People gather in groups or structured relationships. These relationships both define and support self-care.

People have the power to act deliberately to identify their own and others' needs. The way people meet self-care needs is not instinctual, but is a learned behavior. If any person is unable or unwilling to learn, others must learn for and or provide for that person's self-care. Likewise, when a person has therapeutic self-care demands that he or she cannot meet, others with knowledge and skill must provide the means to meet those demands. If neither the person, the family nor a group to which the person belongs is able to supply therapeutic health care requisites, that person needs professional nursing care. (Orem, 2001)

Environment

Environment is the domain in which people exist. The interaction between the environment and people affects health, well-being, growth and development positively or negatively throughout the life cycle. The reciprocal relationship between the person and environment is influenced by both internal and external factors. Internal factors include the biological, psychological and spiritual attributes of the person, while external factors comprise physical, chemical, socio-cultural, economic, political, legal, ethical, and organizational elements.

The environment can be analyzed and understood. In some instances environment can even be regulated and controlled especially through community health efforts (Orem, 2001).

Health

The term health is used to describe living things when they are structurally and functionally whole or sound. The physical, psychological, interpersonal and social aspects of health are inseparable in the individual.

When “health” or “healthy” are used as descriptive terms for an individual, a judgment is being made on the basis of data about that person and his or her ability to maintain self-care. A person’s overall state of health is not necessarily modified by temporary changes in the state of wellness. The individual with an injury, for example would be considered injured and/or disabled, rather than sick or unhealthy, but would, for a short time require assistance with self-care. Ideally, health is the responsibility of both a society and its individual members and not of any one segment of that society.

Nursing

“Nursing is a direct human service provided by a qualified person to help persons to continuously know and meet their own or their dependents’ therapeutic self-care demands and to regulate the exercise or development of their self-care or dependent-care agency whenever their limitations for action are associated with their own health states or that of their dependents” (Orem, 2001, pp. 517-518).

Professional nursing rests upon the characteristics of nurse agency (communication, teaching, cultural competence, leadership, professional behavioral, legal understanding, professional technological skills) and is operationalized in the nursing systems of wholly compensatory, partially compensatory, and supportive-educative care. Nursing care is always tempered by the art and prudence of nursing. Art is the “intellectual quality . . . that allows . . . creative investigations, analysis, and synthesis” (Orem, p. 293). Prudence is selecting “the right reason about things to be done”; “a virtue of the mind and of the character of individuals” (p.293). “Art and prudence serve nurses in their performance of the interrelated operations of nursing practice” (p. 294).

Nursing care is based on professional standards, ethics, competencies and knowledge drawn from the natural, social, medical sciences, and the humanities, as well as nursing’s own body of knowledge. Professional nursing supports research and education to expand nursing knowledge and its use.

Nursing Education

The UTC School of Nursing prepares an educated person who nurses. Nursing education focuses on the development of nursing agency, the development of capabilities needed to provide professional nursing care.

Education encompasses both teaching and learning. Learning is a deliberate and dynamic process characterized by the acquisition of knowledge, self-awareness, breadth and depth in critical thinking, and by cognitive, affective and psychomotor skills all of which change the behavior of the learner. Learning is an individualized process which occurs best when learner's rights are respected and when the learner accepts responsibility for self-direction and for decisions. The outcome of learning is an enriched outlook, a new perspective.

Teaching is a transaction involving both learner and teacher where the teacher acts as a facilitator, a role model and a resource person using multiple modes of instruction. Teachers guide the learner by developing, organizing, and structuring knowledge; by fostering a spirit of inquiry, a sense of discovery and a desire for life-long learning. The outcome of teaching is an enriched outlook, a new perspective.

Undergraduate Nursing Education focuses on developing nursing agency through didactic and clinical experiences that build upon the student's foundation in the liberal arts curriculum.

Graduate Nursing Education is based on a sound baccalaureate program of studies. Graduate studies immerse the student in nursing practice, supported with a theory, research and policy core of graduate-level nursing courses, which precede a concentration in a specialty area.

The Nurse Anesthesia Concentration focuses upon the self-care demands and abilities of patients as they undergo an peri-operative experience.

The Nurse Practitioner Concentration focuses on the self-care demands and abilities of patients and families in the primary health care setting.

The Doctor of Nursing Practice is a clinical leadership degree that encompasses all of the nursing systems. It emphasizes the use of research-based evidence in collaboration with other disciplines to promote individual and population self care agency.

Approved by faculty, 5-1-08

GRADUATE CURRICULUM OUTCOMES

Upon completion of the Master of Science of Nursing program, the graduate:

1. Integrates concepts and theories from nursing and related disciplines into advanced nursing practice.
2. Demonstrates advanced knowledge and skills through safe and effective nursing practice in a specialized area.
3. Participates in scientific inquiry to validate or contribute knowledge relevant to nursing practice.
4. Seeks opportunities for life long learning.

5. Models in leadership and management strategies to influence nursing practice and health care.
6. Embraces ethical standards for nursing practice that reflect human values, respect for diversity and cognizance of social issues.
7. Practices from a personal and professional philosophies of nursing.
- 8 .Possesses the foundation for doctoral study.

Graduate Committee 1/06/06
Faculty Committee approve 9/09/08

ADMISSION TO CANDIDACY

Application for admission to candidacy must be filed after the completion of nine hours of graduate study in the major and before completion of more than 18 hours. To be eligible for admission to candidacy, the student must have a "B" average on all courses taken for graduate credit and have completed prerequisite and designated courses as required by the School of Nursing.

The form for admission to candidacy may be obtained from the Graduate School or online at www.utc.edu/Administration/GraduateSchool/forms/index.php. Students should refer to the UTC Graduate Catalog for additional regulations regarding admission to candidacy.

TIME LIMIT OF CANDIDACY PROGRAM

All credit applied toward a graduate degree must be earned within a six year period beginning with the registration for the earliest course counted. Refer to the UTC Graduate Catalog for further information.

TRANSFER CREDIT

Refer to the UTC Graduate Catalog for further information.

ADA AWARENESS STATEMENT

Nursing is a practice discipline, with cognitive, sensory, affective, and psychomotor performance requirements. The faculty of the School of Nursing has identified the skills and professional behaviors that are essential to pursue a course of study to be eligible to write the national certification exams and practice as an advanced practice professional nurse. In order to progress in the nursing curriculum, a student must possess a functional level of capability to perform the duties required of an advanced practice nurse. The essential eligibility requirements for participation in the nursing program are identified as Core Performance Standards. These standards are adopted from the Southern Council on Collegiate Education for Nursing (SCCEN) and are congruent with the skills presented in the document entitled Essentials of College and University Education for Professional Nursing, a publication of the American Association of Colleges of Nursing. If these standards cannot be achieved by the student, either unassisted or with dependable use of assistive devices, the faculty reserves the right to dis-enroll the student

from clinical courses. Potential students are provided copies of the Core Performance Standards upon request. A copy of the Essentials of College and University Education for Professional Nursing is available for review in the School's Office of the Director.

SCHOOL OF NURSING UNIFORM POLICY

Students are to comply with the policies and procedures of any agency with which the University of Tennessee at Chattanooga School of Nursing has an agreement. In addition, students are to wear the official UTC School of Nursing picture identification badge whenever present in the clinical agencies.

POLICY ON DRUG SCREENING

It is the policy of the College of Health, Education and Professional Studies (CHEPS) to be in compliance with all policies of the clinical facilities with which the College affiliates for student clinical learning experiences. The Chattanooga Area Consortium of Healthcare Education requires that at a minimum, students in a health care related program be required to submit to a drug screen for cause.

The purpose of this policy is to provide a safe working environment for students, patients, visitors, healthcare agency staff and university faculty and staff. In order to participate in the clinical experiences required in the health science programs, the student may be required to undergo drug screening. In addition, all students are subject to subsequent testing on a reasonable suspicion that he/she is under the influence of drugs or alcohol such that it impairs the student's ability to perform competently.

If a student's behavior demonstrates that he/she is impaired (functioning in any impaired manner, exhibiting inappropriate behavior in the classroom or clinical setting, or demonstrating any unprofessional conduct or negligence associated with impairment), the faculty academically responsible for that student will document the specific behaviors of the student. This written communication will include any supportive facts and/or documentation of the occurrence (at a minimum: time, places, circumstances, behaviors, witnesses or other persons who possess knowledge of the student's behavior). A determination of functioning in an unprofessional manner will be established by the professional responsible for the student based standards of the profession.

The student will sign that he/she has read the documentation completed by the faculty regarding his/her behavior. If the behavior is observed in clinical practice, the student will be immediately removed from the agency for the sake of patient safety. If the behavior occurs in the classroom, the student will be removed from the classroom. The student may not return to class or clinical until reviewed by the Dean of CHEPS.

Documentation of behavior will be forwarded to the Dean for review on the day of the incident. The documentation will become part of the student's record. The Dean or Designee(s) will evaluate the documentation presented, and if warranted, request an immediate drug screen. The

Dean may ask to meet the student. The review will be completed by the Dean within five days of the incident.

If a student has a positive drug screen, s/he will not be allowed to participate in the clinical courses at the assigned clinical agency or any other clinical agency. The student will be dismissed from the program. The student will then be required to complete, at the student's cost, chemical dependency evaluation and treatment to be considered for readmission to the program. Readmission into a program in the CHEPS will be considered only upon completion of a treatment program, and the recommendations of the program's student/academic admission committee, the Department Head and the Dean. Any student with a positive drug screen shall be dismissed from the program for a minimum of one calendar year and will be immediately withdrawn from all courses.

If the student desires to reapply to the program, he/she must provide proof of a minimum of one year of treatment in a program and documentation of ongoing treatment if readmitted to the program. If readmitted to a program in the CHEPS, random drug screens will be required and these results must be conveyed to the Department Head. The student will be required to obtain random drug testing until the student withdraws or graduates from the program. All testing is at the student's expense.

Licensed Students

Licensed students, who test positive on a drug screen, will be reported to Tennessee Professional Assistance Program (TNPAP). Readmission into a program in the CHEPS will be considered only upon completion of a TNPAP approved rehabilitation program or the recommendation or TNPAP, and the recommendations of the program's student/academic admission committee, the Department Head and the Dean.

The CHEPS encourages impaired students to seek assistance voluntarily and assume responsibility for their personal and professional conduct.

Approved 2/22/06

PROFESSIONAL AND ACADEMIC STANDARDS

All students who have been admitted to the nursing program are required to meet the following professional and academic standards.

1. Tennessee Board of Nursing Requirements
2. UTC Honor System
3. School of Nursing Confidentiality Policy
4. Clinical Agency Policies
5. Nursing Code of Ethics
6. Individual Course Policies
7. Academic Policies
8. Dismissal Policies

1. Tennessee Board of Nursing Requirements

"...Nurses care for clients and families in a variety of settings where there may be no direct supervision. Individuals to whom care is given are often vulnerable, both physically and emotionally. The nurse has access to personal information about the patient and/or his/her

family, has access to the client's property and provides intimate care to the client. The Board believes that persons who receive nursing care in Tennessee should be able to have confidence that an individual licensed by the Board does not have a history of mistreatment, neglect, violence, cheating, defrauding the public, or otherwise taking advantage of another person.”
 “1000-1-.13 UNPROFESSIONAL CONDUCT AND NEGLIGENCE, HABITS OR OTHER CAUSE.

- (1) Unprofessional conduct, unfitness, or incompetency by reasons of negligence, habits or other causes, as those terms are used in the statute, is defined as, but not limited to, the following:
 - (a) Intentionally or negligently causing physical or emotional injury to a patient;
 - (b) Failure to maintain a record for each patient which accurately reflects the nursing problems and interventions for the patient;
 - (c) Abandoning or neglecting a patient requiring nursing care;
 - (d) Making false or materially incorrect, inconsistent or unintelligible entries in any patient records or in the records of any health care facility, school, institution or other work place location pertaining to the obtaining, possessing or administration of any controlled substance as defined in the Federal Controlled Substances Act;
 - (e) Unauthorized use or removal of narcotics, drugs, supplies, or equipment from any health care facility, school, institution or other work place location;
 - (f) The use of any intoxicating beverage or the illegal use of any narcotic or dangerous drug while on duty in any health care facility, school, institution, or other work place location;
 - (g) Being under the influence of alcoholic beverages, or under the influence of drugs which impair judgment while on duty in any health care facility, school, institution or other work place location;
 - (h) Impersonating another licensed practitioner;
 - (i) Permitting or allowing another person to use his or her license for the purpose of nursing the sick or afflicted for compensation;
 - (j) Revocation, suspension, probation or other discipline of a license to practice nursing by another state or territory of the United States for any act or omission which would constitute grounds for the revocation, suspension, probation or other discipline of a license in this state;
 - (k) Practicing professional nursing in this state on a lapsed (state) license or beyond the period of a valid temporary permit;
 - (l) Assigning unqualified persons to perform functions of licensed persons or delegating nursing care functions and tasks and/or responsibilities to others contrary to the Nurse Practice Act or rules and regulations to the detriment of patient safety;
 - (m) Failing to supervise persons to whom nursing functions are delegated or assigned;
 - (n) Aiding, abetting, assisting or hiring an individual to violate or circumvent any law or duly promulgated rule intended to guide the conduct of a nurse or any other licensed health care provider;
 - (o) Exercising undue influence on the patient including the promotion of sale of services, goods, appliances, or drugs in such a manner as to exploit the patient for financial gain of the nurse or of a third party;
 - (p) Discriminating in the rendering of nursing services as it relates to race, age, sex, religion, national origin, or the condition of the patient;
 - (q) Violating confidentiality of information or knowledge concerning the patient, except when required to do so by a court of law;
 - (r) Failing to take appropriate action in safeguarding the patient from incompetent health care

practices;

(s) Failing to report, through proper channels, facts known to the individual regarding incompetent, unethical or illegal practice of any health care provider;

(t) Performing nursing techniques or procedures without proper education and practice; (u) Engaging in acts of dishonesty which relate to the practice of nursing.

(TBN Rules and Regulations of Registered Nurses, Chapter 1000 –1- 13, p.24-26, June, 2003 [Revised])

2. UTC Honor System

The School of Nursing abides by the Honor System as specified in the UTC Student Handbook under the Academics Section. Students reported for violations of the Honor Code must follow the procedure as outlined in the UTC Student Handbook.

3. School of Nursing Confidentiality Policy

All faculty employed in the School of Nursing and all students enrolled in both the BSN and the MSN programs of the School of Nursing must follow the confidentiality policy. This policy states that faculty and students shall respect the confidentiality of all patient information and records and shall comply with all applicable laws and regulations concerning their maintenance and protection, including the Health Insurance Portability and Accountability Act (HIPPA) and any regulations promulgated under the Act relating to patient information and records.

Confidentiality and protection of client privacy is a priority. Students will not under any circumstance, discuss any patient, hospital, or staff information outside the confines of the classroom, clinical, or post-conference area and/or without the guidance of a faculty member. Any concern about a breach in confidentiality occurring in the clinical area must be discussed with the supervising faculty member and/or a member of the staff responsible for the area where the breach occurred.

4. Clinical Agency Policies

The University of Tennessee at Chattanooga School of Nursing shall direct its students and faculty to comply with the policies and procedures of any agency with which it has an agreement.

REQUIREMENT	FREQUENCY
CPR: Students must maintain current certification throughout the program. A copy of the CPR card should be turned in to the School of Nursing.	Upon admission to the School of Nursing AND evidence of recertification before current one expires every two years
Clinical ID Badge: ID Badges are done at Beeler Impressions during the allotted times (Mondays between 8:30 and 12:30 or Thursdays between 1:30 and 4:30). The ID badge will be sent to the School of Nursing for students to pick up. Students must pay the ID badge fee in the Bursar's office and bring a copy of the receipt to the School of Nursing.	Upon admission to the School of Nursing
Liability Insurance: This must be obtained through the University of Tennessee system. This provides coverage ONLY when providing care as a student. Liability Insurance is purchased in the Bursar's office. Students must bring a copy of their receipt to the School of Nursing.	Must be paid on June 1 st upon admission into the School of Nursing and annually after that
JCAHO Requirements: TCPS must be completed and paid for in the Bursars Office on campus. Receipt of payment should be turned in to the School of Nursing.	Upon admission to School of Nursing AND annually after that

Personal Health Insurance. A copy of a health insurance card must be given to the Administrative Coordinator in the School of Nursing.	Upon admission to School of Nursing AND as changes occur
Confidentiality and release of information waivers as well as the dismissal policy and the criminal background check notification: All forms should be read, signed and returned to the School of Nursing.	Upon admission to School of Nursing (one time only)
Background check: To be completed online.	Upon admission to School of Nursing (one time only)
History and physical examination: The physical exam should be completed at the UTC Student Health Center. Students should schedule an appointment or walk-ins are welcomed (waiting time to see physician or nurse practitioner will vary with walk-ins).	Upon admission to School of Nursing (one time only)
Hepatitis, Varicella, Rubella and Tetanus Vaccines: A series of 3 hepatitis B vaccines must be initiated prior to entry to the program. The second and third vaccine in the series must be completed within the recommended times (one month and six months following the first, or whenever the person administering recommends).	Upon admission to School of Nursing
Tuberculosis testing. This is an annual requirement and will be administered at the UTC Student Health.*	Upon admission to School of Nursing AND annually after that
Influenza Form: This form must be filled out by the physician administering the flu shot. If student refuses a flu shot, they must fill out the appropriate section on the form explaining why they declined the vaccine.	Upon admission to School of Nursing AND annually after that
Drug Screening and N95 Fit Test: Forms must be signed acknowledging the policy and proof of both drug screening and N95 fit test must be turned into the School of Nursing.	Upon admission to School of Nursing
*The Medical History and Physical Examination form to be filled out by the UTC Student Health Center will have proof of Hepatitis vaccination and other immunizations as well as Tuberculosis testing documented on it. The UTC Student Health Center then fills out the Health Documentation form that is to be turned in to the School of Nursing.	

5. Nursing Code of Ethics

All faculty and students abide by the American Nurses Association (ANA) code of ethics.

1. The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes or the nature of health problems.
2. The nurse's primary commitment is to the patient, whether an individual, family, group, or community.
3. The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the patient.
4. The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimum patient care.
5. The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.
6. The nurse participates in establishing, maintaining, and improving healthcare environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.
7. The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.
8. The nurse collaborates with other health professionals and the public in promoting community, national, and international efforts to meet health needs.

(From American Nurses Association. [2001]. Code for nurses. Kansas City, MO: Author. [Online] Available at: <http://www.nursingworld.org/ethics/chcode.htm>)

6. Individual Course Policies

Individual course policies are printed on course syllabi and posted on Blackboard.

7. Academic Policies

A. Grading Scale: The following numerical grading scale will be used in all nursing courses:

93-100	A
85-92	B
78-84	C
70-77	D
<70	F

B. Grading for Thesis: See UTC Graduate Catalogue.

C. Grading for Professional Projects: See UTC Graduate Catalogue. Note that SON Professional Projects are graded, but the grade is not awarded until the project is completed. If a student is making satisfactory progress, a grade of “IP” will be given; upon completion of the project, the “IP” will be converted to a letter grade. If unsatisfactory progress is made, a letter grade of “F” will be given for that semester. There must be 2 credit hours graded for a project.

D. Grade Appeals: Whenever a student feels that his or her rights have been seriously jeopardized by way of unfair, arbitrary, or malicious exercises of faculty grading the University Grade Appeals Procedure Policy shall be followed, available in The UTC Student Handbook & Directory under Academic Standards.

E. Continuation/progression policies

To continue in the graduate nursing program, students are required to:

- a. Conform to the “Continuation Standards” as stated in the UTC Graduate Catalogue. This means maintaining a cumulative grade point average of 3.0 on all courses taken for graduate credit.
- b. Maintain active clinical requirements. Clinical agencies such as hospitals, health departments, etc., have certain criteria with which we must comply. As a School of Nursing, we must certify that the students we take into clinical agencies as part of clinical courses meet these requirements.

F. If in the judgment of the professor there is reason to question the emotion or physical condition of a student or the safety or quality of nursing care provided, the professor has the right and obligation to exclude the student from the clinical area.

8. Dismissal Policies

If a student violates any professional or academic policy as listed above they are subject to dismissal from the nursing program:

A. Students found guilty of unprofessional conduct, negligent habits or other cause as specified in the Tennessee Board of Nursing Rules and Regulations of Registered Nurses will be dismissed from the program.

B. Students who violate the ANA code of ethics policy will be dismissed from the program.

C. For students whose cumulative GPA falls below 3.0, refer to the UTC Graduate Catalog Continuation Standards.

D. A graduate student will be dismissed from the program if they fail (receive a No Credit grade) in a clinical course in more than one grading period. A grading period is defined as either Fall, Spring, Summer I or Summer II.

Notification Of Program Dismissal:

1. Notification of Program Dismissal for Grades

The UTC Graduate School will notify a student whose grade point average falls below a 3.0 or receives a No Credit grade in a clinical course in more than one grading period. Please refer to the UTC Graduate Catalogue for continuation policies. The student will not be allowed to continue in a clinical course if he/she desires to appeal the grade or dismissal from the Graduate School.

2. Notification of program dismissal for reasons other than grades:

When a student violates a policy, other than grades, in a graduate nursing course, the course faculty will notify the School of Nursing Graduate Committee in writing. Upon notification from the course faculty, the Graduate Committee will notify the student within five working days, in writing, of his or her dismissal from the nursing program. The Graduate Committee will also notify the Director of the School of Nursing and the Dean of the UTC Graduate School in writing, at this time.

Appealing Dismissal

1. Appealing dismissal for grade.

Refer to the UTC Graduate Catalog.

2. Appealing dismissal for reasons other than grades.

Following written notification of program dismissal the student has the right to appeal. The student must initiate the appeal process within five working days of the dismissal. A written appeal must be submitted to the Director of the School of Nursing within five working days of the notification of dismissal. The Director will make a decision and submit the decision in writing to the student within five working days. The student may appeal the decision to the Dean of the College of Education and Applied Professional Studies. If the student wishes to appeal to the Dean, the Director will forward all relevant documentation pertinent to the appeal to the Dean. The Dean will make a decision and submit the decision in writing to the student and the Director of the School of Nursing

within five working days. If the student is not satisfied with the decision, he or she may appeal the Dean's decision to the Chancellor of the University. The Dean will forward all relevant documentation pertinent to the appeal to the Chancellor. The Chancellor's decision shall be final.

Readmission to Program

The School of Nursing follows the UTC policy on re-admission as stated in the Graduate Catalog and will be handled on a case by case basis.

9. Complaints/Grievances

The School of Nursing policy related to student complaints and grievances mirrors the University policy. As noted in the Faculty Handbook (Chapter 5: Faculty-Student Relationships <http://www.utc.edu/Departments/fcouncil/FacultyHandbook/Ch5Handbook.pdf>), disputes "will arise occasionally in the faculty-student relationship and should be clarified at the earliest possible time and at the level closest to the locus of the complaint. Students who have such complaints are urged to address them directly to the faculty member in an appropriate setting. It is understood that some issues may need to be addressed to the nearest administrator, generally the department or program unit head. Every effort should be made to resolve such matters informally by conversation. A matter unresolved on the departmental level may be brought to the appropriate dean and, after that, the provost. Specific policies for grade appeals and for allegations of sexual harassment are found elsewhere in this hand book and the *Student Handbook*."

The following steps shall be followed within the School of Nursing:

1. Student meets with faculty to discuss the complaint. The meeting must be initiated within ten (10) business days after the student became aware, or could have reasonably been expected to become aware, of the issue. The Director may meet separately with the student and faculty member, or if both agree, jointly, to discuss the report.
2. If the issue is not resolved in Step 1, the student will meet with the Director within 5 business days after final scheduled discussion in Step 1. The student will submit a written report that describes the issue.
3. The Director will meet with the faculty to discuss the issue with faculty. The faculty will submit a written report to the Director within five (5) business days addressing his/her perception of the issue.
4. The Director shall inform the student and the faculty member in writing of his/her conclusion within five (5) business days of the completion of Step 3 via e-mail.
5. If either student or faculty is not satisfied with the Director's conclusion, the student may file the complaint with the Dean of the CHEPS within the five (5) business days of the receipt of the e-mail.
6. If the faculty member involved in Step 1 is the Director, the student will meet with the Dean to address an unresolved complaint.

STUDENT REPRESENTATION ON COMMITTEES

The Bylaws and Rules of Procedure of the School of Nursing provide for graduate student representation to the following school committees:

1. Student Affairs Committee
2. Nurse Anesthesia Faculty Committee
3. Graduate Committee
4. Family Nurse Practitioner Faculty Committee

Representatives to these committees are elected by the students in the Fall Term of each year for one year appointments.

STUDENT-FACULTY COMMUNICATIONS

Access to E-Mail is required. You are assigned an email account through UTC's OneNet. All communication from the university and SON will be done through the student email address. Assistance with student email is available through the UTC Help Desk at 425-4000.

GRADUATE ASSISTANTSHIPS

Graduate assistantships are available for graduate nursing students. Information and application material can be obtained from the UTC Graduate School.

WRITING REQUIREMENTS

Students enrolled in graduate core courses will have a portion of their grade derived from individual narrative writing. Graduate students must keep a portfolio of all graduate papers. Perusal of these papers may help thesis or project committee members better guide the student.

Assistance with writing can be obtained through the UTC Writing Center at 425-1774.

LEARNING LABORATORY

The School of Nursing learning laboratories consist of the basic skills lab, simulation lab and computer lab.

The basic skills lab has hospital beds, medical equipment, and various audiovisual models for learning beginning nursing skills and physical assessment techniques. Learning stations equipped with VCR's and television sets reinforce actual "hands on" teaching.

The simulation lab has two SimMan and one VitalSim manikin. Students are to use this lab under the direction of faculty.

The computer lab has personal computers available. All computers in this lab are Internet linked and have a variety of nursing software available. A printer is available for student use by accessing via a MOC's ID card.

UTC POLICY FOR COMPUTER USE

Use of UTC's network and computing facilities must be in accordance with the Acceptable Use Policy found at www.utc.edu/trc/aup.

FNP DRESS CODE POLICY

Policy statement: Students represent not only themselves, but the University of Tennessee at Chattanooga School of Nursing and the nursing profession as a whole. This policy is established to require UTC Family Nurse Practitioner Students to present a professional image consistent with community standards for an advanced practice nurse.

Scope: This policy applies to all FNP students during all clinical education experiences. For clinical experiences, students are expected to abide by specific dress code policies of the assigned facility.

Definitions:

1. FNPS: Family Nurse Practitioner students currently enrolled in course work in the UTC SON FNP concentration.

Procedures:

1. The UTC picture ID badge must be worn at all times and be visible.
2. A white lab coat with appropriate identification is to be worn over professional street clothes. However, the student is expected to follow the dress code dictated by the practice in which they are being precepted. For example, if the student is in a pediatric practice that does not require lab coats, the student has the option to follow the practice's dress code. However, the UTC picture ID badge must be worn at all times.
3. Dress shoes are to be worn but no open toe, beach or exercise type sandals are to be worn in clinical areas. If appropriate for the practice, clean athletic shoes may be worn.

4. Undergarments must be worn and not be visible through clothing.
5. Personal hygiene is basic and essential. No perfume, cologne should be worn and the smell of smoke from tobacco should be avoided.
6. Tattoos must be covered at all times.
7. Jewelry may only be worn conservatively. No more than 4 earrings of a conservative style are permitted, maximum of 2 earrings per ear. Other than small earrings, no visible body piercings are allowed, including tongue piercing. No pendant necklaces, bangle bracelets, large dangling earrings or fashion rings may be worn.
8. Hair must be clean and neat. Unconventional hairstyles should be avoided. Hair should be secured and kept from falling onto the patients or equipment.
9. Beards and mustaches must be kept clean and trimmed.
10. Extremes in style or clothing, which may be offensive or immodest, are not appropriate. Inappropriate clothing includes: sweat suits of any type, sports apparel, halter tops, exposed cleavage, bare midriffs, crop tops, tank tops, clothing containing profanity or other inappropriate language, leggings, and facial/tongue rings and studs.
11. Failure to follow the Dress Code Policy as stated shall result in disciplinary action.

POLICY ON INFECTION CONTROL FOR STUDENTS, FACULTY AND STAFF

College of Health, Education and Applied Professional Studies
School of Nursing
Student Health Center

I. INTRODUCTION

The School of Nursing and UTC Student Health Center will provide an environment for the safe conduct of its mission in education, research, community service, and patient care. This policy is intended to provide reasonable protection for students, faculty and staff against the transmission of infectious diseases within the environment of an educational institution that houses professional programs. The health of the students, faculty and staff at University of Tennessee at Chattanooga is managed by the UTC Student Health Center.

The populations in the university setting, particularly students, are vulnerable to communicable diseases such as measles, mumps, rubella, diphtheria, polio, meningitis, varicella, and tuberculosis. These diseases are susceptible to control by appropriate immunizations.

The populations in the university setting who practice in a health care environment, school, or other care facility have special risks other than the general university population.

All statements made herein pertain to all students, faculty and staff in the School of Nursing and the Student Health Center.

Infectious Disease Control Program

The center for Disease Control and the Tennessee Occupational Safety and Health Administration have determined that employees in any occupation where they are directly exposed to body fluids are considered to be at substantial risk of occupational exposure to HIV (human immunodeficiency virus) and/or HBV (hepatitis B virus). The following program establishes UTC's rules to protect the employees from occupational exposure to such bloodborne diseases.

This program applies to all employees who have contact with human blood or body fluids while performing their duties at UTC. Everyone in the following job titles are specifically included:

- Student Health Center Employees
- Faculty and Students in School of Nursing

II. LABORATORY PRACTICE

The safe handling of infectious agents in research and clinical laboratories is managed in accordance with the U.S. Centers for Disease Control (CDC) and National Institutes of Health (NIH) publication, *Biosafety in Microbiological and Biomedical Laboratories*. This publication outlines procedures for the safe handling of biologically hazardous agents/waste to assure protection of laboratory, animal care, housekeeping, and emergency personnel. Chairs and principal investigators are responsible for assuring adherence to these guidelines by employees and students.

At times, students, faculty and staff members may come in contact with bodily fluids. Safe handling practices apply to contact with human blood and other potentially infectious materials including semen, vaginal secretions, cerebrospinal fluid, synovial fluid, amniotic fluid, saliva in dental procedures and any body fluid visibly contaminated with blood. The program does not apply to feces, nasal secretions, sputum, sweat, tears, urine, vomitus or saliva **unless** they contain visible human blood.

All faculty, staff and students are to follow these procedures:

1. Standard Precautions

Standard precautions also known as universal precautions shall be followed at all times. All body fluids are assumed to be infected with hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV), and all personnel and students exposed to direct contact with body fluids must be protected as though such body fluids are known to be infected.

2. Personal Protective Equipment (PPE)

Personal Protective Equipment shall be worn during all contact with body fluids. Bloodborne pathogens can enter the body through a needle stick injury, through contact of non-intact (i.e. chapped or cut) skin with infected blood or through a splash of infected blood to the eye, nose or mouth of the employee. The personal protective equipment listed below must be worn to prevent entry of infectious material into the body.

- a. Gloves
 - Disposable latex or vinyl gloves shall be worn during patient / blood contact. Gloves shall be discarded and hands washed immediately after each patient contact
 - Small, medium, and large gloves should be available. Employees and students shall wear the correct size of gloves.
- b. Gowns
 - Faculty and students and other personnel shall use fluid-resistant disposable gowns when splashes to the clothing with body fluids may occur such as when drawing human blood or when treating a patient with profuse bleeding.
- c. Masks and Eye Protection
 - Masks and eye protection shall be worn when splashes to the face may occur such as when drawing human blood or when treating a patient with profuse bleeding.
- d. Pocket masks shall be used for resuscitation.
- e. Gloves, masks, eye protection, and gowns shall be worn when drawing human blood.

III. IMMUNIZATION AGAINST MEASLES, RUBELLA, MUMPS, DIPHTHERIA, POLIO, TETANUS, VARICELLA, INFLUENZA, MENINGOCOCCUS, AND HEPATITIS B FOR STUDENTS

The UTC School of Nursing requires that all entering students undergo tuberculin skin testing and have documentation of prior immunity or immunization for the following: measles, mumps, rubella, diphtheria, polio, and tetanus by recorded evidence of immunization or appropriate titer results. Documentation of receipt of two doses of measles (Rubeola) vaccine after the first birthday is required unless born prior to 1957. Anyone with an unknown or negative history of varicella must undergo serological testing. If serology and history are negative, the vaccine is required. The UTC Student Health Center will determine whether immunization documentation is adequate. Students who are unable to document immunity to these infections may be enrolled provided required immunization or TB testing is obtained within ten days of enrollment. Students may be excused from this requirement if contraindications are established by a provider in the UTC Student Health Center or the student presents a signed statement from a health care provider or clergy indicating the reason for waiving the requirement. Annual influenza immunizations are recommended for all students. If student does not take the influenza immunization vaccine, reason for refusal must be documented.

New incoming students at any public institution of higher learning in Tennessee who live in on-campus student housing shall sign a waiver for meningococcal vaccine and return the completed waiver to the University Student Health Center. A waiver form shall indicate that the institution has provided detailed information to the student concerning meningococcal disease, the availability and effectiveness of the vaccine, and that the student has received and reviewed the information and has chosen to be vaccinated or not to be vaccinated for meningitis.

According to the guidelines established by the Centers for Disease Control to insure protection of students against transmission of blood borne pathogens, the UTC Student Health Center is required to assure that students in colleges where students are susceptible to Hepatitis B are immunized against Hepatitis B. Students who have had the Hepatitis B series must show proof of a positive Hepatitis B titer of equal or greater to 10 mIU per CDC guidelines. The Hepatitis B series will be repeated one time if the past series has negative results. Students known to be Hepatitis B antigen or antibody-positive (or already immune) or for whom contraindications are established by a healthcare provider or the UTC Student Health Services may be exempted from this immunization.

IV. EARLY DETECTION OF TUBERCULOSIS FOR STUDENTS

All School of Nursing students are required to receive the tuberculin skin test annually. Students without documented testing within previous 12 month period will have a 2-step tuberculin skin test. Students who have been vaccinated with Bacillus Calmette-Guerin (BCG) and do not provide documentation of a past positive tuberculin skin test are required to have an initial tuberculin skin test to determine PPD status. Persons who test positive or have previously tested positive are required to show proof from the Hamilton County Health Department of being free of tuberculosis.

Treatment for tuberculosis will be managed through the local Hamilton County Health Department. Those students who have tested positive and have a chest xray indicating no active disease will only need to have another chest xray if symptoms of active TB develop.

<http://www.cdc.gov/tb/pubs/tbfactsheets/skintesting.htm>

V. HIV INFECTION AND AIDS

Human immunodeficiency virus (HIV) may be transmitted by the transfusion of blood or blood-products, sharing of contaminated needles, or intimate sexual contact. Exposures occur through needlesticks or cuts from other sharp instruments contaminated with an infected patient's blood or through contact of the eye, nose, mouth, or skin with a patient's blood. Based on current scientific evidence, the disease is not spread by casual contact.

The School of Nursing subscribes to the guidelines of the American College Health Association (ACHA), CDC guidelines, and the Occupational Safety and Health Administration's standard on blood borne pathogens.

A. Admission of Students with HIV Infection

The existence of HIV infection is not a factor in decisions regarding admission to UTC so long as the individual's physical condition is such that he or she can participate fully in the required activities of the program to which application is made. It is recognized, however, that this latter proviso might prevent acceptance of certain infected persons, particularly those with clinically evident AIDS. Confidential counseling is available to students who self-identify as HIV positive.

B. Screening for HIV Infection

The University will not undertake programs of routinely screening students for antibody to HIV. It is strongly recommended that all health-care workers know their antibody status. The Student Health Center in conjunction with the Chattanooga Hamilton County Health Department offer free HIV testing one afternoon each month during the hours posted in the Center and on the UTC Student Health Center Website. In addition, free testing is available at the Health Department at any time.

C. Curricular Implications of HIV Infection

The recommendations of the U.S. Public Health Service regarding prevention of HIV transmission must be scrupulously observed by all health science professionals and students.

Because of their special curriculum needs, health professional students may be required to obtain and process blood and other body fluids of patients. Faculty responsible for teaching laboratory techniques will establish guidelines for safe conduct involving blood and body fluids when such experiences are a part of the curriculum. Faculty responsible for educational training activities for students in hospitals, clinics, schools, community, and day care facilities will establish guidelines to assure that students are only required to perform possibly hazardous procedures if appropriate to their level of training and experience.

The School of Nursing subscribes to the safety guidelines proposed by the Public Health Service for protection of personnel in its hospitals, clinics, clinical laboratories, schools, and day care facilities. The appropriate infection control committees or other responsible groups in university-operated health care facilities establish guidelines and procedures (Exposure Control Plan) for the protection of students and employees against the possible transmission of HIV.

D. Exposure to HIV

The policy of the School of Nursing is to provide aggressive follow-up on student exposure to blood borne pathogens. Any student who is possibly exposed to HIV infection while performing clinical-related duties will be referred to the UTC Student Health Center or the hospital in which the exposure occurred for medical evaluation and counseling. In accordance with current CDC guidelines, treatment should be instituted as soon as possible, preferably within two hours of exposure. Personal medical information is considered confidential, and the student's right to privacy will be protected to the extent allowed by law. Medical information, including test results, will not be released without the written consent of the student or as required by law.

After initial treatment and evaluation at the hospital, the student should come to the UTC Student Health Center for follow-up.

VI. HEPATITIS B AND HEPATITIS C

The Hepatitis B and Hepatitis C viruses (HBV or HCV) may be present at high concentrations in blood and serous fluid of carriers and active cases and, to a lesser extent, in other body fluids such as saliva and semen. Transmission occurs when virus-containing materials are introduced by transfusion of blood or blood products, by contaminated needles, or by sexual contact. Infection also can occur by contact of infectious materials with skin lesions or mucosal surfaces. The groups at greatest risk for HBV and/or HCV are those at risk for HIV, including intravenous drug abusers, sexually active persons, patients in hemodialysis units, and health care workers who experience frequent contact with blood.

In the health care environment, students working in clinical areas who have contact with blood or body fluids are also at risk of infection with HBV and/or HCV. Precautions for the transmission of HBV and/or HCV are similar to those designed to prevent transmission of HIV. Barrier methods, including the use of masks, gloves, and protective eyewear, can minimize infection risk. Nevertheless, the only dependable way to prevent Hepatitis B is active immunization. Such immunization is safe and highly effective for health care workers whose activities are likely to involve contact with blood or blood products. However, for Hepatitis C there is currently no vaccine available for its prevention.

Students with an exposure to Hepatitis B and/or Hepatitis C will be treated in accordance with current CDC guidelines and may be referred to a specialist for specialized treatment. Persons known to have active Hepatitis B and/or Hepatitis C must be counseled by a UTC Student Health Center provider regarding the transmission of this virus and the means to minimize risk of such transmission.

Hepatitis B Vaccination

All faculty and staff in the School of Nursing and Student Health Center who have positions which put them at risk for contact with blood or body fluids shall be offered hepatitis B vaccinations.

Vaccinations shall be given at no cost to the employee at UTC Student Health Center.

Vaccinations are optional but are encouraged as the best means of protection against hepatitis B.

Records of both vaccination and the declination of vaccination for hepatitis B will be maintained in the Student Health Center.

Policy on Needle/Sharps Sticks

Goals

- A. To control employee and student needle stick/sharps injuries.
- B. To comply with OSHA, state regulations, requirements for a sharps safety program.
- C. To monitor sharps injury data and establish trend information.
- D. To establish an evaluation and implementation program for needle safety devices.

The following is to be implemented for injuries with needles/sharps for students:

1. The student shall immediately notify the instructor of the injury.
2. The instructor will notify the appropriate supervisor in the facility and have the student follow the facilities protocol.
3. A copy of the incident report will be placed in the student's permanent file.
4. The original copy of the instructions given to the student regarding follow up and the student's responsibility will be placed in the student's permanent file with a copy going to the student. This will be signed and dated by both the instructor and the student.
5. For Hepatitis follow-up, if no policy is in place in the facility, the student should contact his/her health care provider. If this is not feasible, the student will report to the UTC Student Health Center for follow-up.
6. For HIV follow-up, the procedure noted in step 5 should be followed. Present recommendations are to be tested on the date of injury, at 6 weeks, 3 months, 6 months and at one year.

The following will be documented for injuries with needles/sharps for faculty, staff and employees of School of Nursing and Student Health Center:

1. Documentation of the following:
 - a. Date, time and location of injury
 - b. Route of exposure
 - c. The identity of the source patient
 - d. The circumstances of the exposure
 - e. Type/ brand and purpose of device
 - f. Use of PPE when injury occurred
 - g. Notation of signs of visible blood on device
 - h. Specific circumstances associated with injury
 - i. Identification of source (if known) and source status related to bloodborne diseases
2. Collection and testing of the source patient's blood for HIV and HBV if possible
3. Collection and testing of the affected person's blood for HIV and HBV immediately
4. Medical evaluation of the employee by a physician at the University's current workers compensation medical provider
5. If the initial HIV test is negative, further testing for HIV will be at six weeks, 12 weeks, and six months and 1 year post exposure.
6. If the worker has not been vaccinated against HBV or the antibody response is not adequate, post exposure prophylaxis including treatment with immune globulins and the hepatitis B vaccine shall be provided under the direction of a physician.
7. Records of exposure including route of exposure, identity of human blood source, and circumstances of exposure shall be maintained in the office of the Department of Safety & Risk Management. Additionally, records of all follow-up procedures will be kept in the

office of the Department of Safety & Risk Management. All exposure records will be maintained for 30 years.

Students with Infectious Diseases

Any student is expected to notify his/her instructor that he or she has been diagnosed as having an infectious disease. He/she will be put on a medical leave of absence pending a health care provider's statement regarding: 1) the vulnerability of the student to a secondary infection from being in the institution, and 2) the potential for infection of others by the student in his/her present medical state. The course instructor, working with the Student Health Center Physician will review the documentation and make a determination regarding returning to class and/or clinical site. Further consultation related to this matter will be obtained as appropriate.

If it is determined that the student is able to continue, but has an infectious disease, one or more of the following actions will be indicated:

1. The student will not be allowed to continue course work in a client contact area if the student or client can not be protected.
2. Within the academic year, the student shall continue on a medical leave of absence until cleared by the health care provider.
3. If the student is currently assigned to a non-client contact area and has been released by his/her health care provider, he/she will be allowed to return to class or the clinical site.
4. If it is determined that no reasonable accommodation is feasible for the student with an infectious disease, the student will continue medical leave of absence for a period of time defined by his/her health care provider and the Director/Dean. Upon termination of the medical leave of absence, the student will be evaluated for readmission according to department guidelines.

Faculty with Infectious Disease

Faculty are expected to notify the Director of the School of Nursing that he or she has been diagnosed as having an infectious disease. The Director will make the decision regarding the faculty's workload and clinical assignment depending on 1) the vulnerability to a secondary infection and 2) the potential for infection of others by the faculty's present medical state. A statement from the faculty's health care provider is required.

Assignment of Students to Infectious Disease Clients

Known clients with infectious diseases will not be assigned to student who have not completed a basic introduction of infection control. Students do not have the right to refuse to provide care to clients with infectious diseases. Prior to the first clinical event, the faculty member will ascertain that each student has the knowledge necessary to practice infection control management as required for assignment related to general or specific client care. The faculty member will also orient each student to the policy of the agency to be followed in the event of an injury to the student. If there is no care available to the student within the agency or setting, the faculty

member will direct the student to his/her primary care provider or the UTC Student Health Center for appropriate follow up care.

Individual exemptions from above include students with active infections, immuno-suppressed students and pregnant students. In these circumstances, the clinical instructor will determine how the course/clinical objectives will be accomplished.

Documentation will be kept to record exposure to caring for a client with an infectious disease.

Assignment of Students To Clients with AIDS

Consistent with the School of Nursing's Values that all persons have dignity and worth, the faculty will include individuals who have AIDS, ARC (AIDS Related Complex) or are HIV Antibody Positive in their consideration of clients for learning assignments which are consistent with specific course objectives.

Students will accept learning assignment with clients who have AIDS, ARC or are HIV+ unless such assignments would not be compatible with the student's health condition (i.e. pregnancy, immunosuppression).

In their roles in the University , faculty and staff members and students will not discriminate against persons who are know to have or are suspected of having AIDS or ARC or to be HIV +.

Implementation of CDC Guidelines

Students and faculty will comply with current CDC guidelines for infectious diseases.

CDC guidelines protecting individuals from exposure to HIV will be followed.

Current guidelines will be available to students and faculty at all times. A copy of current CDC Guidelines will be kept in a notebook in the Administrative Office and are available to all on the Internet.

Students must pass the Standard Precautions Examination with identified pass rate before entering the clinical area.

VII. EDUCATION

One of the strongest and most effective defenses against infectious diseases is an understanding of their cause and modes of transmission that will lead to behavioral changes, minimizing the spread of infection. It is incumbent upon the leadership of School of Nursing to provide information on the cause and spread of infectious diseases within the environment of its programs.

It shall be the responsibility of the faculty to provide students with information on the cause and spread of infectious diseases as a part of the required education program. Strategies for such

educational programs are contained in the American College Health Association (ACHA) and Centers for Disease Control will serve as guidelines for these programs.

Within the UTC School of Nursing, the Infection Control Coordinator will serve as an information resource for these educational activities. Faculty will identify the mechanism for educational activities.

All faculty and staff in School of Nursing shall receive training, which includes the following:

- A. A copy of the current regulations from TOSHA
- B. A general explanation of the epidemiology and symptoms of HIV, HCV and HBV
- C. An explanation of the modes of transmission of HIV, HCV and HBV.
- D. An explanation of the infection control program at UTC.
- E. An explanation of how to determine if a task will fall under this program.
- F. An explanation of the importance of universal precautions and other work practices to reduce worker exposure.
- G. An explanation of the availability, proper use, and disposal of personal protective equipment including the specific circumstances under which PPE is to be worn.
- H. An explanation of the follow-up procedure to follow if actual contact with human blood or body fluids occurs.
- I. An explanation of the labels and signs used.
- J. An explanation of the proper clean up of human blood spills.
- K. An explanation of proper disposal of contaminated items
- L. An explanation of the sterilization procedures for reusable equipments.
- M. An explanation of the risks and benefits of vaccination for HBV, and how to obtain same.

The training will be the responsibility of the department in which the students, staff and employees work. The Department of Safety and Risk Management is available to assist with this training by supplying training assistance and training aids.

Training records shall be kept in the departments. Training records shall include summary of program contents names and qualifications of persons conducting the training the names and job titles of persons attending the sessions.

VIII. REVIEW OF GUIDELINES AND PROCEDURES

The School of Nursing will review all pertinent guidelines related to specific programs to insure that these are in keeping with the available evidence on the transmission of infectious diseases and blood borne pathogens and meet the requirements of this policy. The School of Nursing establishes a Policy on Infection Control for students based on the best available scientific evidence.

IX. REFERENCES

The following references provide guidelines for meeting CHEPS responsibility in protecting students and employees from acquisition of blood borne diseases.

Centers for Disease Control - www.cdc.gov

American College Health Association – www.acha.org

National Guideline Clearinghouse – www.ngc.org

Occupational Safety and Health Administration. Occupational Exposure to Blood borne Pathogens: Final Rule. Federal Register, 1910.1030.

CDC. Immunization of health-care workers: recommendations of the Advisory Committee on Immunization Practices (ACIP) and the Hospital Infection Control Practices Advisory Committee (HICPAC). MMWR 1997; 46(No. RR-18).

Adapted from The University of Tennessee Health Science Center Memphis “POLICY ON INFECTION CONTROL FOR STUDENTS”.

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CS, AR, KL