MGH INSTITUTE
OF HEALTH PROFESSIONS

School of Nursing

STUDENT HANDBOOK

2017-2018

CONTENT

ABOUT THE SCHOOL OF NURSING

Program Summaries
Terminal Objectives by Program
SON Administrative Structure
Faculty
Advisement
Preceptors

ADMISSIONS

DIRECT ENTRY MASTER'S STUDENTS
Admission Requirements
Admission Process

BACCALAUREATE STUDENTS
Admission Requirements and Process for Baccalaureate Students

REGISTERED NURSE STUDENTS
Admission Requirements and Process for RN Students with a Baccalaureate Degree
Admission Requirements and Process for RN Students without a Baccalaureate Degree

CERTIFICATE OF ADVANCED STUDIES (CAS)
Admissions Requirements and Process for CAS Course of Study

DOCTOR OF NURSING PRACTICE STUDENTS
Admission Requirements and Process for Doctoral Course of Study

REGISTRATION

Technical Standards
Students Unable to Meet the Requirements/Skills

HEALTH AND SAFETY REQUIREMENTS

CLINICAL EDUCATION REQUIREMENTS
Annual Required Training
HIPPAA/OSHA (Infection Control) Requirements
Expenses
Travel
Contacting Clinical Facilities

Licensure as a Registered Nurse
Criminal Background Check Requirement

Advanced Placement for Students Entering the MS Program as Registered Nurses

Course Placement Policies
Registered Nurses with a Baccalaureate Degree in Nursing

Post-Master's DNP Students

Needle Stick Procedure

PROFESSIONALISM

Professional Attire
Code of Professional Behavior for Students
Harassment
Violence and/or Threats of Violence
Intimidation
Integrity
Social and Professional Etiquette
Behavior on Social Networking Sites
Duty to Report

PROGRESSION

Pre-registration
Continuous Enrollment
Leave of Absence
Course Progression
Part-time Status for Direct-Entry Master's and Baccalaureate Students
NCLEX-RN
Grading
Grading Scale
Pass/Fail option
Incomplete work
Resolution of student faculty conflicts regarding grading
Feedback in Clinical Courses

Academic Standing
Definitions
Progressions Standards
Automatic Review Process
Appeal Procedure Requests for Review

Alternative Methods to Complete Degree Requirements
Transfer Credits
Credit by Examination
Course Exemptions
Independent Study
Adding and Dropping Courses
Withdrawal Policy
Attendance Requirements

Auditing Courses
Changing Specialization

GRADUATION
Time for Completing Program
Course Requirements
Participation in Graduation Ceremony

CURRICULUM

Course Requirements and Options
Curriculum Plans
Scholarly Project for MS Program
Independent Study
Format for Written Work

Course Credit / Contact Hour Ratio
Theory Credit Ratio
Clinical Credit Ratio
Lab Credit Ratio
Practice Credit Ratio

Privacy Rights Clause

SCHOOL OF NURSING GOVERNANCE

Curriculum Committee
Policy Committee
Evaluation Committee
Judicial Board

EVALUATION
Course and Faculty Evaluation

APPENDICES

A. Notification of Change of Academic Advisor
B. Consent Form for Physical Examination
C. Consent Form for Participation in Learning Activities
D. School of Nursing Honor Code
E. Incident Report

School of Nursing Administrative Structure

Dr. Inez Tuck serves as the Dean of the School of Nursing. She is responsible for the overall direction and management of the School. Working with the faculty, Dr. Tuck is responsible for the content, scope, and quality of the curriculum, academic standards, and the degree requirements of the programs, including both clinical and academic components. She hires, evaluates, and supports the development of faculty in teaching, scholarship/research and service. As a member of the Institute's senior administrative team, she works closely with the Provost and Vice-President of Academic Affairs on the development and administration of the academic programs in the School of Nursing and in coordination with the other academic programs of the Institute. Additionally, she provides leadership in professional and academic areas through active involvement in external educational and professional organizations, representing the Institute in these endeavors.

Dr. Leslie Neal-Boylan serves as the Associate Dean for Academic Affairs and Program Innovation. She has broad responsibility for providing leadership in curriculum development, evaluation, and revision for all programs; for providing leadership in evaluation of all aspects of the SON; and in mentoring faculty in teaching, scholarship, and research.

Dr. Lussier-Duynstee serves as the Assistant Dean for Student Support and Clinical Facilitation. She has leadership and administrative responsibilities for: student recruitment, admissions, and retention, through purposeful student engagement, advocacy and advisement; oversight of academic support services and interface with faculty on student academic issues.

The Graduate Programs are led by Dr. Margaret Sipe, Director of the Doctor of Nursing Practice Program and Dr. Patricia Reidy, Director of the Advanced Practice Level of the Master's of Science in Nursing Program. Dr. Suellen Breakey is the Director of the Pre-licensure Programs at the Accelerated Bachelor of Science in Nursing and Generalist Level of the Direct-Entry Master's of Science in Nursing Program. The Directors report to the Dean of the School of Nursing and are members of the Executive Leadership Council in the School of Nursing.

The Assistant Dean and Directors are responsible to the Dean for faculty team development, oversight for curriculum at their level of study, student and faculty liaison, faculty orientation and development, development and revision of nursing program policies and implementation of curricula, and resource projection and management for their respective programs.

The Clinical Education Department, consisting of Ms. Katherine Socha, Ms. Claire Sonnenberg, and Ms. Linda Henry develops contacts with a wide variety of clinical venues that serve as sites for student learning at both prelicensure and advanced practice levels to appropriately match students and clinical sites.

Specialization Coordinators are faculty with expertise and certification in a specific advanced practice specialty. These faculty monitor certification requirements for the specialization and provide guidance on curriculum and content issues appropriate to the specialization. The Specialization Coordinators are: Dr. Joshua Dion (Adult Gerontology Acute Care NP); Dr. Amy Bruno, Antonia Makosky, and Kathryn Hall (Adult Gerontology Primary Care NP); Dr. Clara Gona and Mr. Jason Lucey (Family Specialty NP); Dr. Mary Thompson (Pediatric Specialty NP); Dr. Susan Stevens (Psychiatric/Mental Health-Lifespan NP); Ms. Katherine Simmonds (Women's Health NP and Dual Adult Gerontology/Women's Health NP).

School of Nursing

Full-time Faculty

Nancy Baker, PhD, RN ANP-BC
Assistant Professor

Suellen Breakey, PhD, RN
Assistant Professor
Director, Pre-Licensure/Generalist Programs

Amy Bruno, PhD, RN, ANP-BC
Assistant Professor

Inge Coreless, PhD, RN, FAAN
Professor

Mary Beth Coughlin, RN, CPNP
Instructor

Amy Fuller, DNP, RN, WHNP-BC
Instructor

Clara Gona, PhD, RN, FNP-BC
Assistant Professor

Janice Goodman, PhD, RN, PMHCNS-BC
Professor

Kristina Green, DNP, RN, FNP-BC
Assistant Professor

Patricia Grobecker, DNP, RN-BC
Instructor

Rebecca Hill, DNP, RN, FNP-C
Assistant Professor

Abraham Ndiwane, EdD, RN, CHES
Associate Professor

Leslie Neal-Boylan, PhD, RN, CRRN, APRN, FAAN
Professor
Associate Dean of Academic Affairs and Program Innovation

Patrice Kenneally Nicholas, DNSc, MPH, RN, ANP-C, FAAN
Professor

Rita Olans, DNP, RN, CPNP, SNP-BC
Assistant Professor

Andrew Phillips, PhD, RN
Assistant Professor

Mechelle Plasse, PhD, RN, PMHNP-BC
Assistant Professor

Eleonor Pusey-Reid, DNP, Med, RN, CCRN
Assistant Professor

Lisa Quinn, PhD, RN, OCN
Assistant Professor

Patricia Reidy, DNP, RN, FNP-BC
Associate Professor
Director, Advanced Practice Programs

Raquel Reynolds, PhD, RN, MSN, PHCNS-BC
Assistant Professor

Kaveri Roy, DNP, RN
Assistant Professor

J. Alexander Hoyt, PhD, RN
Assistant Professor

Susan Jussaume, MS, RN, FNP-BC, AHN-BC
Instructor

Debra Kelly, MS, RN
Assistant Professor

Elissa Ladd, PhD, RN, FNP-BC
Associate Professor

Ruth Palan Lopez, PhD, RN, GNP-BC, FAAN
Professor

Jason Lucey, MSN, RN, FNP-BC
Assistant Professor

Patricia Lussier-Duynstee, PhD, RN
Assistant Professor
Assistant Dean, Student Support and Clinical Facilitation

Carine Luxama, RN, MSN, ANP-BC, PMHNP-BC
Instructor

Antonia Makosky, DNP, MPH, RN, ANP-BC
Assistant Professor

Talli McCormick, MSN, RN, GNP, APRN-BC
Assistant Professor

Kristine Ruggiero, PhD, RN, PNP-BC
Assistant Professor

Meredith Scannell, PhD(c), MSN, MPH, CNM, SANE
Instructor

Katherine Simmonds, MS, MPH, RN, WHNP-BC
Assistant Professor

Margaret Sipe, DNP, RN
Assistant Professor
Director, DNP Program

Susan P. Stevens, DNP, MEd, RN, PMHNP-BC
Instructor

Casey Sweeney, PhD, RN, FNP-BC
Assistant Professor

Nancy Terres, PhD, RN
Associate Professor

Mary Thompson, PhD, RN, PNP-BC
Assistant Professor

Inez Tuck, PhD, RN, MBA, MDiv
Professor
Dean

Lisa Wood, PhD, RN, FAAN
Professor
Peabody Chair in Nursing Research

Part-time Faculty

Kathryn Atkin DNP, ANP-BC, WHNP-BC
Assistant Professor

Jean Bernhardt, PhD, RN, NHA, NEA-BC, FNP-BC
Assistant Professor

Kathryn Sabo, MS, RN-BC
Instructor

Emily Karwacki Sheff, MS, CMSRN, FNP-BC
Instructor

Joshua Dion, DNP, RN, ACNP-BC
Clinical Assistant Professor

Kathryn Hall, MS, RNCS, ANP-BC
Assistant Professor

Maureen J. Marre, MSN, RN, FNP-BC
Instructor

Mertie Potter, DNP, RN, PMHNP-BC
Instructor

Sara Smoller, MS, RN. ANP-BC, CCD
Instructor

Sheila Swales, MS, RN, PMHNP-BC
Instructor

John Wong, PhD
Instructor

Trisha A. Zeytoonjian, MS, RN
Instructor

Faculty Emeriti

Linda Andrist, PhD, RNC, WHNP-BC
Professor Emerita

Arlene Lowenstein, PhD, RN
Professor Emerita

Diane Mahoney, PhD, ANP-BC, FGSA, FAAN
Professor Emerita

Yvonne L. Munn, MS, RN
Professor Emerita

Alexandra Paul-Simon, PhD, RN
Professor Emerita

Jean E. Steel, PhD, RN, FAAN
Professor Emerita

Barbara K. Wilson, PhD, RN, CS
Assistant Professor Emerita

Margery Chisholm, EdD, RN, CS, ABPP
Professor and Dean Emerita

ADVISEMENT

Each student is assigned an academic advisor prior to initial orientation to the program.

At matriculation, each student meets with the assigned faculty advisor and reviews the course of study, which is available to both student and advisor in IONLINE. This program of study serves as a guide to academic progress.

A. Role of Academic Advisor
   1. Maintains a schedule of office hours for a minimum of two (2) hours a week each semester
   2. Contacts each advisee the first week of the student's program
   3. Meets with each advisee when applicable, at a minimum of once a year and/or during advisement period
      - To review current academic status
      - To review course of study and advise for registration
      - To clear student in IONLINE in order to register
   4. Reviews advisee's progress each semester
   5. Reviews advisee's program of study for completion of all credits/requirements for graduation
   6. Completes course add/drop form
   7. Advises when an academic warning has been issued
   8. Plans for graduation
   9. Counsels students if considering change in status.
   10. Communicates change in student status to the Director of their program.
   11. Meets with student as requested.

B. Role of the Student
   1. Responds to advisor's communications
   2. Initiates an appointment with advisor as needed
   3. Meets with the advisor prior to registration
   4. Communicates with advisor prior to changes in program of study, track, or status.

C. Change of Advisor
   A change of academic advisor may be made upon request of either the faculty or student. Granting the request may be dependent upon faculty availability. The student is required to complete a Notification of Change of Academic Advisor Form. (Appendix A)

   [Policy reviewed Sept. 2017]

D. Faculty Schedules
   All faculty will have schedules on file in the Dean's office each semester and are expected to offer office hours for a minimum of two (2) hours a week each semester.

REGISTRATION

The following requirements pertain to all nursing students prior to course registration. The requirements include skills and abilities, compliance with immunization requirements and proof of CPR certification.

A. Technical Standards

Nursing education requires the completion of a professional program that is both intellectually and physically challenging. Students must be able to take part fully in the academic and clinical life of the program to benefit from the educational activities, and to succeed in fulfilling requirements for a degree or certificate.

In accordance with the provisions and philosophy of the Americans with Disabilities Act (ADA), faculty are committed to providing appropriate learning experiences that maximize every student's potential, and working with students with disabilities to determine if there are ways to assist them in performing essential requirements and skills to meet educational standards. All students will be held to the same standards and must be able to meet the essential requirements and perform essential skills of their positions with or without reasonable accommodations.

Technical standards refer to those physical, cognitive and behavioral abilities required for satisfactory completion of all aspects of the curriculum as a student in the nursing program.

The qualified student must possess the mental, physical, and emotional capacities essential to attaining the competencies required to function as a nurse. These abilities enable the student to perform tasks required to meet professional requirements and work demands of the practicing nurse.

Candidates who possess any disability that would potentially interfere with the attainment of such competencies are encouraged to contact the Manager of Student and Disability Services, or the Dean of the Nursing program, to discuss and identify possible accommodations.

Observation: Candidates must have sufficient sensory capacity to observe in team-based learning and lecture settings, the laboratory, and the health care or community setting. Sensory abilities must be adequate to perform appropriate examination and assessments including functional vision and tactile sensation to observe, diagnose, and treat a patient's condition.

Communication: Candidates must possess sufficient ability to communicate one-on-one and in small and large group settings. As a student, one must demonstrate effective and professional verbal and non-verbal communication in academic, community, educational, and health care settings, and be able to demonstrate proficiency in written and spoken English.

Motor: Candidates must have the ability to participate in diagnostic and therapeutic maneuvers and procedures. They must be able to negotiate patient care environments, and be able to move between settings such as the classroom, health care facility, educational, or community setting. Physical stamina sufficient to complete a rigorous course of didactic and clinical study is required. Long periods of sitting, standing or moving are required in a variety of learning sites. Candidates must be able to coordinate both gross and fine muscular movements, maintain equilibrium, and possess functional use of the senses of touch and vision.

Intellectual: Candidates must be able to measure, calculate reason, analyze, and integrate information as well as be able to comprehend temporal and spatial relationships.

Social: Candidates must exercise good judgment and be able to function effectively in the face of stress, taxing workloads, and the uncertainties inherent in clinical practice. They must be able to maintain mature, sensitive and effective professional relationships with faculty, staff, students, patients, family members, and other members of the health care and/or educational team. Compassion,

integrity, concern for others, interpersonal skills, interest, and motivation are all qualities that will be assessed during the admissions process and throughout the student's nursing education.

The following requirements are considered necessary for full participation:

- Students must be able to read, write, speak and understand English at a level consistent with successful course completion and development of positive patient-nurse relationships
- Students may attend classes 30 hours or more each week, including combinations of lecture, discussion, laboratory and clinical activities
- Preparation for class typically requires an additional 20-30 hours per week. The curriculum may also require scheduled classes or laboratory experiences at local facilities in the early morning, evening or weekends
- Students will participate in intellectual activities requiring critical thinking, judgment, analysis, arithmetic competency, and conceptualization of spatial relationships, problem solving and planning within reasonable time frames within a complex environment
- Students will be required to participate in clinical and laboratory experiences that involve exposure to and palpation of patients' and simulated patients' body parts by faculty and students
- Students must have verbal and non-verbal interpersonal and communication skills that are consistent with productive classroom participation, respectful interactions with faculty, students, staff, patients, and development of appropriate therapeutic relationships

Students must possess the emotional health required for full use of their intellectual abilities, adaptation to unexpected change, exercise of good judgment, and safe completion of all responsibilities.

Students Unable to Meet the Requirements / Skills

Upon request of persons unable to meet the above requirements, the MGH Institute of Health Professions will provide reasonable accommodations that allow the individual to fulfill the essential requirements and skills within the program. However, the School of Nursing is unable to make accommodations that impose an undue burden, present a threat to the health or safety of the individual or others, or fundamentally alters the nature of the curriculum including didactic component, laboratory sessions and clinical experiences.

[Policy updated Sept. 2017]

HEALTH AND SAFETY REQUIREMENTS

Students must meet all health and safety requirements of the clinical education facility and of the Institute, prior to beginning any clinical education experience. Students must remain in compliance with all Immunization, CPR and Centralized Clinical Placement (CCP) requirements at all times. Failure to do so may result in a delay in clinical placement.

Students are advised to also maintain their own copies of all immunization records, certifications, and documentation of physical exams and to make their available if asked by their preceptors and clinical agencies.

CLINICAL EDUCATION REQUIREMENTS

PRECEPTORS

A preceptor is an expert clinician with designated responsibility for clinical supervision of students in a particular clinical area.

Criteria for Selection

The ideal preceptor is a master's prepared advanced practice nurse, a physician, or other primary care practitioner, who meets the following criteria:

1. Supports the philosophy and objectives of the Institute and the School of Nursing
2. Demonstrates clinical competence and teaching ability, thereby serving as a student role model
3. Demonstrates the ability to assess, plan, implement, and evaluate clinical care for a specific patient population in a content area
4. Establishes and maintains effective working relationships with colleagues and students
5. Is willing to fulfill the responsibilities of a preceptor by

    a. reviewing the student's learning contract
    b. facilitating the student's meeting the level objectives and goals in the learning contract
    c. sequencing learning experiences so that the student assumes increasing responsibility
    d. supervising/consulting with the student in the delivery of care
    e. functioning as a liaison to other colleagues to facilitate other experiences available at the clinical site
    f. meeting periodically with student and faculty advisor to discuss and evaluate the student's clinical experience

Annual Required Training

All SON students across programs must complete the Massachusetts Centralized Clinical Placement Online Orientation between August 1st and August 31st annually regardless of whether they are in a clinical placement. Successful completion of this orientation will satisfy annual OSHA Compliance and HIPAA training requirements (See HIPAA/OSHA (Infection Control) Requirements)

Training can be found at http://www.mass.edu/mcncps/orientation/welcome.asp

Please note that in some instances a student may be required to provide proof of completion and content mastery to designated representatives of agencies at which they are assigned for clinical practica and/or participate in additional trainings at an individual clinical site.

[Updated 5/27/2011; Reviewed Sept. 2017]

HIPAA/OSHA (Infection Control) Requirements

The Institute requires that all new degree/certificate students verify that they have completed HIPAA, and OSHA (Infection Control) training by the first day of class.

The Health Insurance Portability and Accountability Act (HIPAA) is federal legislation that mandates the standards and requirements for the electronic transmission of certain health information. This act seeks to insure all patients, clients and research subjects' health information is protected.

Occupational Safety and Health Administration (OSHA) training is essential in health care and educational environments. This training instructs students about general infection control principles and their management.

Students will view the HIPAA and OSHA Training in HealthStream which is a learning management system (LMS) used for online training. Approximately two weeks prior to your start of classes, the Institute's Office of Information Technology will provide information about how to access HealthStream**.**

As mentioned above the School of Nursing also requires all its students to complete annually the Centralized Clinical Placement Online Orientation in addition to the HealthStream training in order to satisfy SON's additional HIPAA and OSHA training requirements.

Needle Stick Procedure

In the event of a needle stick injury to a student, the student is responsible for notifying the clinical instructor or the preceptor of the incident. Costs associated with health care services associated with a needle stick are the responsibility of the student.

The clinical instructor/preceptor advocates for the student as follows:

a. assures that the student receives timely services and complies with the procedures in place at the organization where the needle stick occurred;
b. assures that testing and counseling are offered to the student;
c. reports the incident to the faculty of record;
d. reviews the incident with the student prior to the next clinical day to assure that undue risk is avoided in the future.

The faculty of record completes an incident report for the SON. This report must include: the student name, date, time, place, organizational process, whether testing and counseling occurred. [Appendix F]

[Updated 5/27/2011; Reviewed Sept. 2017]

EXPENSES

Students are responsible for all expenses associated with clinical education. The cost associated may include but are not limited to, transportation, parking, meals, and any additional expenses assigned by the facility (for example out of state RN licensure/reciprocity). Students are advised to plan ahead for such expenses, as students may be assigned to clinical facilities requiring travel outside of the Boston area or outside the public transportation system.

TRAVEL

Students are responsible for all travel to and from clinical education experiences. Every student should anticipate needing access to a car for some portion of the clinical education component of the curriculum. Students assigned to the same facility for a clinical experience are encouraged to share travel resources when possible.

CONTACTING CLINICAL FACILITIES

Any student wishing to contribute to the process of identifying potential clinical education facilities, including a potential preceptor, is invited to communicate this information to the SON clinical education office and the specialty track coordinator at least six weeks in advance of the planned clinical experience. The clinical education office and track coordinators will contact the potential facility and preceptor and are responsible for ensuring the appropriateness of a preceptor and agency relative to the student's educational program and objectives and for establishing a contractual relationship with the clinical agency. No student, family member of a student, or friend/acquaintance of a student is permitted to arrange a clinical placement directly.

[Policy under review February 2018]

LICENSURE AS A REGISTERED NURSE

Students who enter a program as a licensed registered nurse must present their nursing licenses to the Program Coordinator of the School of Nursing, or their designee, prior to their first clinical practica. When relevant, it is the student's responsibility to provide evidence of license renewal at the time of its expiration. Direct Entry students must present their licenses as soon as they are issued by the Board of Registration in Nursing. All RN licenses must be unrestricted. Students may be required to apply for reciprocity in states to satisfy other clinical agency requirements. A student must pass NCLEX before they can enter their first advanced clinical placement.

CRIMINAL BACKGROUND CHECK REQUIREMENT

All Degree/Certificate Students at the MGH Institute of Health Professions are required to complete a Criminal Background check before the first day of your matriculation. The MGH Institute uses HireRight, the Partners HealthCare provider of extensive background checks, to complete this process. The HireRight Criminal Background check will include the following:

- Criminal Felony & Misdemeanor (7 years, unlimited counties as revealed by SSN trace)
- Social Security Number Trace
- Social Security Number Validation
- Widescreen Plus National Criminal Search
- National Sex Offender Search

Newly admitted students will also be required to complete a Massachusetts CORI check as well.

A CORI (Criminal Offender Record Information) is a person's criminal history. You will have a Massachusetts CORI if you have ever been charged with a crime in a state or federal court in Massachusetts, whether your case ended with a conviction, a finding of not guilty, charges were dismissed, or another outcome.

Should either of the two background check procedures yield information that shows a student has engaged in conduct that could subject the student to being disqualified from engaging in certain activities, the Institute reserves the right to initiate disciplinary action against the student, up to and including dismissal.

Students may find that they are unable to begin a precepted clinical placement until an additional background and/or CORI check is completed by the facility to which a student is assigned. Background checks may be performed each time an individual has an affiliation with a different facility. Students are individually responsible for the cost of these additional background checks if required by the clinical site.

[Policy reviewed Sept. 2017]

PROFESSIONALISM

Professional Attire

Purpose: To ensure that nursing students of MGH Institute of Health Professions Graduate Program in Nursing maintain a professional image through appropriate attire, grooming and personal hygiene.

Policy: Students are expected to maintain a professional image both in clinical and academic settings. Appropriate professional attire includes, but is not limited to, the following:

Clinical Areas and MGHIHP Simulation Lab Activities:

Students must wear their MGHIHP identification badges which must be visible at all times.

Teal scrub uniforms and/or white lab coats must be clean with the MGHIHP logo displayed.

Jewelry should be minimally worn in the clinical settings and Simulation Lab.

Body piercings should be discreet. Nose and tongue studs should be removed before clinical, or if in place should be flesh colored and minimally noticeable.

Perfume and perfumed products are allergens and should not be worn.

Only small amounts of makeup should be worn.

Nails should be short and neatly trimmed. Only clear or light neutral nail polish may be worn. Follow the CDC policy on "Hand Hygiene in Healthcare Settings.".

Hair must be worn away from the face and off the shoulders. Facial hair must be neat and trimmed.

For cultural or religious purposes, hair may be covered with a solid color scarf.

Footwear should be closed toe and low heel only.

Community Settings:

Professional attire is expected, i.e. business or conservative business casual.

Students must wear their MGHIHP identification badges which must be visible at all times.

Jeans, exercise outfits, T-shirts, sweatshirts, revealing or provocative clothing should not be worn at any time. Please be sure shirts are of an appropriate length that can withstand bending over and lifting.

Midriffs should not be exposed, clothing, buttons/pins or accessory items displaying graphic or written material that may be construed as harassment or offensive is not allowed.

Tattoos should be discreet and covered if offensive/inappropriate language or design is displayed. This may be further restricted by clinical placement.

Classroom:

Students must wear their MGHIHP identification badges which must be visible at all times.

Students are expected to dress conservatively. Jeans are permitted; shorts and shirts should cover upper thigh and midriff respectively. No provocative dress is allowed.

Any clothing, buttons/pins or accessory items displaying graphic or written material that may be construed as harassment or offensive is not allowed.

Noncompliance with the policy for professional attire may result in dismissal from the classroom, clinical or lab experience and count as an unexcused absence. This policy will be at the discretion of the course faculty.

[Revised October, 2016, Reviewed Sept. 2017]

CODE OF PROFESSIONAL BEHAVIOR FOR STUDENTS

The MGH Institute of Health Professions (IHP) School of Nursing abides by the American Nurses Association *Code of Ethics* and expects students also to abide by the Student Nurses Association code of ethics. The School of Nursing (SON) community is a microcosm of the professional arena. In addition to the requirements for conduct articulated in the HIPAA privacy rules, and the IHP Catalog: Safety and Security section, this SON *Code of Professional Behavior (hereafter known as the "Code")* is aimed at assuring an environment that is conducive to optimal student learning and professional development, thereby protecting patient, student, faculty, and staff safety. In addition, the Code assures that graduates of the IHP uphold the highest standards of personal and professional integrity. Toward that goal, the SON must evaluate students' professional conduct in the same way it does scholarship and clinical proficiency. Evaluation is focused on the student's obligations toward the IHP community of faculty, students and staff across learning and professional environments. Professional environments include, but are not limited to, the classroom (in person or online), the laboratories, and inpatient, outpatient, and community clinical sites. The clinical environment also includes any volunteer efforts where students are representing the IHP.

It is the goal of Partners HealthCare System Inc. (PHS) and its affiliate, the IHP, to provide a safe, comfortable, productive, professional and educational environment that is free from disrespectful, harassing, and offensive behavior, both in person, or via information communication technologies such as social networking sites and other electronic and digital media. This means that all students must treat one another and all other members of the IHP and PHS communities with dignity and respect, and, as a health care professional, adhere strictly to all requirements directed at protecting patient health information, safety, and confidentiality. Furthermore, students are expected to adhere to professional boundaries. As

per the National Council of State Board of Nursing (NCSBN) standards in their document on professional boundaries:

"As a health care professional, a nurse strives to inspire the confidence of clients, treat all clients and other health care providers professionally, and promote the clients' independence. Clients can expect a nurse to act in their best interests and to respect their dignity. This means that a nurse abstains from obtaining personal gain at the client's expense and refrains from inappropriate involvement in the client's personal relationships." (2007).

HARASSMENT

No form of harassment will be tolerated, including, but not limited to, disrespectful and/or abusive conduct and associated retaliatory behavior or harassment based on an individual's status (race or ethnicity, color, religion, creed, age, national origin, gender, sexual orientation, disability, veteran status, marital/relational status, genetic background, health condition or physical attributes). All allegations of such behavior are taken seriously, investigated, and where it is determined that such behavior has occurred, the SON will take all steps it deems necessary, including but not limited to acting promptly to ensure the conduct ceases and continuing effects are eliminated.

Definitions

Harassment or physical conduct that:

1. Has the purpose or effect of creating an intimidating, hostile, or offensive educational or professional environment;
2. Has the purpose or effect of unreasonably interfering with an individual's work performance; or
3. Otherwise adversely affects an individual's educational opportunities.

Examples of harassing conduct include but are not limited to:

1. Epithets, slurs, negative stereotyping or threatening, intimidating or hostile acts that relate to race or ethnicity, color, religion, creed, age, national origin, gender, sexual orientation, disability, veteran status, marital/relational status, genetic background, health condition or physical attributes.
2. Written, electronic or graphic material that denigrates or shows hostility or aversion toward an individual or group because of race or ethnicity, color, religion, creed, age, national origin, gender, sexual orientation, disability, veteran status, marital/relational status, genetic background, health condition or physical attributes. Electronic media includes, but is not limited to social networking sites such as *Facebook* and *Twitter*. "Cyber bullying refers to any harassment that occurs via the internet, cell phones or other devices. Communication technology is used to intentionally harm others through hostile behavior such as sending text messages and posting ugly comments on the internet". Retrieved from https://definitions.uslegal.com/c/cyber-bullying
3. Threatening or intimidating behavior or words (electronic, written or oral) directed at another person.
4. Taunting, jeering, mocking or humiliating another person through words/texts or actions.
5. Insulting someone, in any form, especially in the presence of others.
6. Screaming or yelling at or around others.
7. Endangering the safety of an individual or individuals.

8. Delivering feedback to fellow students, faculty and professional colleagues that is demeaning or offensive, and not designed to ameliorate or address a problematic incident or behavior.
9. Behaviors described in the 2015-2016 Catalog on Sexual Harassment and Sexual Assault policies.

REASONABLE VICTIM STANDARD - To determine if the alleged conduct constitutes harassment, the IHP will follow the Reasonable Victim Standard. This standard asks whether a reasonable person, in the same or similar circumstances, would find the alleged conduct intimidating, hostile or abusive, e.g. would other health care professionals of the claimant's race or ethnicity, color, religion, creed, age, national origin, gender, sexual orientation, disability, veteran status, marital/relational status, genetic background, health condition or physical attributes feel harassed or offended if the alleged conduct were directed toward them.

Students at the IHP will also refrain from all acts of:

VIOLENCE AND/OR THREATS OF VIOLENCE, defined as behavior that:
Creates an educational or professional environment that a reasonable person would find physically intimidating or threatening, violent or abusive; regardless of whether the behavior may affect a person's psychological or physical well-being.

INTIMIDATION
Creates an educational or professional environment that a reasonable person would find psychologically intimidating or threatening, or abusive; regardless of whether the behavior may affect a person's psychological or physical well-being.

Examples include but are not limited to:

1. An act of physical aggression, such as an assault or attempted assault on another student, faculty member, staff, patient or visitor.
2. Threats – Words/texts or actions that either create a perception there may be intent to harm a person or property or that result in harm or similar consequences.

Other prohibited activity:

1. Use or possession of explosives, firearms or other weapons on IHP property or property connected to IHP educational or professional experiences.
2. Deliberate destruction or theft of SON or IHP property, or the property of others.
3. Stalking - Willfully, maliciously and repeatedly following or harassing another student, faculty member, staff, patient or visitor, whether on or off IHP premises.

Students are always to conduct themselves with:

INTEGRITY, which refers to representing oneself with honesty and sound ethical principles, and includes, but is not limited to

1. Disclosing your status as a student both verbally and in documentation in clinical settings.
2. Documenting all information accurately on patient records.
3. Following the IHP policies on integrity found under the Conditions of Enrollment in the IHP Catalog.

SOCIAL AND PROFESSIONAL ETIQUETTE

Students are expected to:

1. Come to class on time and enter the room with minimal disruption.
2. Avoid leaving the classroom except during designated breaks.
3. Treat speakers with dignity and respect.
4. Silence cell phones and other electronic devices during class.
5. Determine from each faculty member the acceptable boundaries of behavior or the class, Examples to inquire about include, but are not limited to:
    - Eating in class;
    - Bringing visitors to class; and
    - Rules for group process in discussion.
5. When in clinical sites students are always to remember they are guests of the site and are to behave with politeness and respect for the site's employees and staff, and show respect for the site environment as well as possessions belonging to the site's employees and staff.
6. Demonstrate the ability to give and receive constructive feedback.

BEHAVIOR ON SOCIAL NETWORKING SITES

The Board of Registration in Nursing (BORN) has alerted Schools of Nursing to caution students about their use of social networking sites. Such sites (including, but not limited to *Facebook, My Space, Twitter)* are not considered private. The BORN reminds us that employers, as well as admissions committees in graduate programs, can and do use the sites to screen candidates, make employment or admissions decisions, or as the basis to rescind offers of employment or admission to candidates whose social networking images reflect poorly on them as professionals or potential professionals. Students or faculty cannot use personal cell phones or tablets for any type of client recording (audio or image). IHP/Partners approved devices will be available if visual images or audio recordings are components of a client's treatment plan. If a client or client's family requests video, audio or still pictures that include students and/or faculty appropriate written authorization must be obtained from the institution or practice facility. No images or recordings of clients or family members should be requested or be posted on social media. For further clarification on protecting patient confidentiality, please refer to HIPAA guidelines.

*This *Code of Professional Behavior* is drawn directly from the corporate policies of the Partners HealthCare System Inc. (PHS) and its affiliates, in concert with the stated policies for professional conduct from the American Nurses Association, and NCSBN on Professional Boundaries.

[Policy reviewed Sept. 2017]

DUTY TO REPORT

In accordance with the Massachusetts Board of Registration in Nursing (BORN) Professional Standard of Conduct governing a Nurse's Duty to Report 224CMR 9.03(26) and the MGH IHP Substance Abuse Policy, students are expected to immediately report to a clinical instructor and/or faculty member any instances where they personally observe abuse of a patient; the practice of nursing while impaired by chemical substances including alcohol or drugs, or both; or diversion of controlled substances. Any concerns students may have about what they observe in the practice setting, particularly as it relates to patient safety, should be brought to the attention of the clinical instructor.

1. Should a student observe a nurse, nursing student, or other health provider engaged in behavior involving abuse of a patient, the student should immediately notify his or her clinical instructor.
2. Should a student observe a nurse, nursing student, or other health provider practicing while impaired by chemical substances including alcohol or drugs, or both, or engaged in diversion of controlled substances, the student should immediately notify his or her clinical instructor.
3. The clinical instructor is responsible for taking action as appropriate including investigating and reporting such student observations and concerns within the clinical setting.
4. In addition to reporting their observations to the clinical instructor, students who are licensed as Registered Nurses are expected to comply with the Nurse's Duty to Report such observations to the BORN in accordance with 224CMR 9.03(26).
5. In addition to notifying the clinical instructor, students are encouraged to discuss any clinical situation they find troubling with their course faculty, academic advisor, or Assistant Dean.

Abuse of a patient is defined by the BORN as "...contact or communication with a patient or resident, which in any way harms or intimidates, or is likely to harm or intimidate, a patient or resident. Abuse may be verbal or non-verbal, and may cause physical, sexual, mental, or emotional harm" (EOHHS, 2000, para. 5).
Practicing while impaired "means the inability to practice nursing with reasonable judgment, skill, and safety by reason of alcohol or drug abuse, use of other substances, a physical or mental illness or condition, or by any combination of the foregoing. The duty to report does not apply to impairment resulting only from a physical or mental illness or condition" (EOHHS, 2000, para. 7).
Controlled substance means "any drug or medication requiring a prescription in Massachusetts" (EOHHS, 2000, para. 10).
Diversion means "the unauthorized removal of a controlled substance from a patient or resident supply or care setting" (EOHHS, 2000, para. 9).
Massachusetts Executive Office of Health and Human Services. (2000). Guideline for compliance with the standard of conduct at 244CMR 9.03(26) – Governing a nurse's duty to report to the Board of Registration in Nursing. Retrieved from http://www.mass.gov/eohhs/gov/departments/dph/programs/hcq/dhpl/nursing/nursing-regs/policies/standard-of-conduct/public-health-regulations-nursing-duty-conduct.html

[Policy adopted May 2013, Reviewed Sept. 2017]

PROGRESSION

A. Pre-Registration

All current students are expected to pre-register within the period specified by the Office of Enrollment Services (OES). Students intending to enroll in a ***clinical*** course requiring a precepted clinical placement ***must pre-register***. A clinical placement cannot be guaranteed if the student fails to pre-register by the deadline set by the OES.

B. Continuous Enrollment

Continuous enrollment is defined as enrollment in two **consecutive** academic terms per year. If a student does not plan to register for any course in a semester, a leave of absence must be approved by the School of Nursing. See Leave of Absence Policy below.

C. Leave of Absence

In the event that a student cannot maintain continuous enrollment, the student may submit a request for a Leave of Absence (LOA) using the online Withdrawal/Leave of Absence Form http://www.mghihp.edu/current-students/osa/registrar/important-forms/withdrawal-leave-of-absence-form.aspx.

1. LOA request

   Leaves of absence are granted for reasons of health, academic reasons, or extenuating circumstances.

   a. Health: A leave of absence for health reasons requires validation of the health problem by a health practitioner. To return to the program, evidence must be furnished that the health problem is sufficiently resolved for the student to resume study.
   b. Academic Reasons: A leave of absence for academic reasons requires that the Program Director formulate conditions of the leave.
   c. Extenuating Circumstances: A leave of absence for other reasons will be individually evaluated by the Program Director.

2. Approval Procedure

   d. Students are required to discuss the proposed LOA with their academic advisor and Program Director. Together they will document the reasons for the LOA, date and conditions for return. This agreement will be signed by all three parties and sent to the Dean for her signature. A copy will be kept in the student's permanent file. The student can then submit the online form. Once the request has been officially granted or denied, the student will be informed by OES of the decision.

3. Return from LOA

   The student is responsible for contacting his/her academic advisor and the Program Director when returning from the LOA. All conditions outlined in the leave of absence agreement must be met and approved by the Program Director. A leave of absence does not extend the time to complete the program. Students should understand that failure to return on the agreed upon date could result in administrative withdrawal from the program. Students would need to request reinstatement in writing. Clinical placements are not guaranteed.

4. Length of LOA

   Refer to the 2016 - 2017 Catalog for policy governing length of LOA.
   http://mghihp.smartcatalogiq.com/en/2017-2018/Catalog/Academic-Policies/Leave-of-Absence-Policy

[Reviewed and revised Sept. 2017]

Course Progression

Students must successfully complete all courses as prescribed in their course of study program curriculum. Course prerequisites must be completed and/or co-requisites must be registered for before students may enroll in the respective course.

D. Part-time Status For Direct Entry Master's and Baccalaureate Students

Because of the lock-step nature of these curricula, part-time status is not encouraged; therefore, a special written request is required. The request must include a course of study plan depicting the proposed part-time curriculum plan for the student. Students must obtain permission from their

advisor and the Program Director for the program. No more than 10% of students in any class will be permitted to register on a part-time basis.

Part time progression in the program requires that all course pre- or co-requisites be met per the prescribed curriculum plan. If part-time status is granted, the Office of Enrollment Services will be notified, and the course of study plan will be maintained in the program and advisor's files.

E. NCLEX-RN

Proof of unrestricted RN licensure is required for progression to the clinical courses beginning in the second semester in the Advanced Practice Level Direct Entry Master's program of the IHP. Refer to the sections on licensure requirements for RNs entering the program, and requirements for advanced practice clinical placements for more specifications.

F. Grading

1. Grading Scale for the School of Nursing

(Refer to the IHP Catalog/Academic Policies/Grading Policy)
http://mghihp.smartcatalogiq.com/en/2016-2017/Catalog/Academic-Policies/Grading-Policy

2. Pass/Fail Option

Students may take a maximum of 20% of the total credits required to graduate or complete the program on a Pass/Fail basis, subject to the following:

a. The Pass/Fail option is available only for selected required courses. See below.
b. Any course taken as an elective may be taken as Pass/Fail, subject to approval of the faculty and to the 20% of total credit limit
c. Scholarly Project or Thesis and will be graded Pass/Fail and is exempt from the 20% limit.
d. DNP 800 courses that are designated as pass/fail only are exempt from the 20% limit.

(Refer to the IHP Catalog: Academic Policies/Grading Policy / Pass/Fail Option.
http://mghihp.smartcatalogiq.com/en/2016-2017/Catalog/Academic-Policies/Grading-Policy/PassFail-Option*)*

The Change of Grade scale form may be obtained from the Registrar's website/Important Forms http://www.mghihp.edu/current-students/osa/registrar/important-forms/change-of-grade-scale-form.aspx)

Courses approved for pass/fail option:

Master of Science in Nursing
NS 601 History of Nursing Ideas (3 credits)
NH 602 Health Care Policies & Politics (3 credits)
NH 720 Research for Clinical Practice (3 credits)
NP 839 Professional Issues (2 credits)

Accelerated Baccalaureate in Nursing
NS 512 History of Nursing Ideas (3 credits)
NH 531 Health Care Policy & Politics (3 credits)
HP 529 Ethics (2 credits)

Doctor of Nursing Practice
NP 745 Leadership for Advanced Nursing Practice (3 credits)
NH 740 Health Care Economics and Financing (3 credits)
NH 730 Outcomes Measurement (3 credits)
DNH 720 Population Health (3 credits)

[APPROVED 5-27-11; UPDATED SEPT. 2017]

G. Academic Standing

1. Definitions

a. A Clinical Course is defined as any course that entails a laboratory or clinical component and all associated theory and practicum courses.
b. Minimum Passing Grade is defined for courses in each of the following categories:
   i. C+ (C plus): for any ABSN Course
   ii. C+ (C plus): for any Generalist level DEN Course
   iii. B- (B minus): for any advanced practice (NP designated) DEN course
   iv. B- (B minus): for any Doctoral level course
   v. C- (C minus): for all other courses
   Any student not achieving the Minimum Passing Grade for a course (See Section H.1.b. above) will be required to repeat that course before taking any course for which that course is a prerequisite.

2. Progression Standards

Any student who fails to meet the academic and clinical standards set forth below will be subject to academic or disciplinary action up to and including dismissal from the program following the completion Automatic Review Process described in Section 3.

(Refer also to IHP Catalogue: Academic and Disciplinary Actions
http://www.smartcatalogiq.com/en/Catalogs/MGH-Institute-of-Health-Professions/2016-2017/Student-Handbook/Section-II-Institute-Policies-ABC/Student-Rights-and-Responsibilities ;
http://www.smartcatalogiq.com/Catalogs/MGH-Institute-of-Health-Professions/2016-2017/Student-Handbook/Section-II-Institute-Policies-ABC/Student-Rights-and-Responsibilities/Academic-and-Disciplinary-Actions

a. Academic

   i. A second failure to achieve the Minimum Passing Grade in a course.
   A course may only be repeated once. If a student repeats a course, both grades will stand on the transcript, but only the second grade will be considered in determining GPA.

ii. Failure to achieve the Minimum Passing Grade in two courses in the same semester.
iii. Failure to achieve the Minimum Passing Grade in three separate courses.
iv. Failure to regain a 3.0 GPA by the end of the second consecutive semester.

Students are required to maintain a minimum cumulative grade point average of 3.0 each semester. Failure to do so will result in an academic warning. The student must regain a 3.0 GPA by the end of the following semester.

v. Violation of the Institute's Academic Integrity Policy or the Code of Professional Behavior for Students.
vi. Failure to meet the IHP/SON immunization, OSHA, HIPAA, CPR, and any other clinical placement requirements**.**

b. Clinical

Students who demonstrate unsafe clinical practice will be suspended from the program immediately. "Unsafe clinical practice is behavior that places the client or staff in either physical or emotional jeopardy. Physical jeopardy is the risk of causing physical harm. Emotional jeopardy means that the student creates an environment of anxiety or distress which puts the client or family at risk for emotional or psychological harm. Unsafe clinical practice is an occurrence or pattern of behavior involving unacceptable risk."

Scanlan, J., Care, WD, & Gessler, S. (2001). Dealing with the unsafe student in clinical practice. *Nurse Educator*, *26*(1), 33-38.

3. Incomplete Work

(Refer to the IHP Catalog: Academic Policies/Grading Policy http://mghihp.smartcatalogiq.com/en/2016-2017/Catalog/Academic-Policies/Grading-Policy/Incompletes

a. An "I" (incomplete grade) in a course must be completed within the first two weeks of the succeeding term unless negotiated otherwise with the faculty of record for the course.
b. If the course in which the student has an Incomplete is a pre-requisite for a subsequent course, the student may not progress to the next course until the earlier course is satisfactorily completed.
c. Faculty submit a grade of Incomplete for the student on Ionline, noting the completion date agreed to by the student and the faculty. If the grade has not been changed by faculty prior to the agreed upon date, the grade automatically converts to an F.
d. If by the end of the grading period, the student is failing the course, an incomplete grade is not an acceptable remedy.

5. Resolution of Student-Faculty Conflicts Regarding Grading

It is highly recommended that a student who wishes to dispute a final course grade first meet with course instructor/faculty member to try to resolve the dispute.

If the student and faculty member cannot come to mutually satisfactory agreement and the student wishes to further dispute the final course grade, the following procedural steps may be followed:

- The student may bring written notification of his/her concerns to the course instructor/faculty member and the Assistant Dean for Student Support and Clinical Facilitation. This written notification must be submitted within ten business days from receipt of the course grade and must include a description of how the student's performance satisfied course requirements as outlined in the published course syllabi.
- The Assistant Dean for Student Support and Clinical Facilitation will send a copy of the written notification of concerns to the Program Director, the faculty advisor, the Dean, and the Associate Dean.
- The Assistant Dean for Student Support and Clinical Facilitation sets up a meeting with the student, the faculty member, and the Assistant Dean for Student Support and Clinical Facilitation. The purpose of the meeting is to attempt to resolve the matter. This meeting will be scheduled within 10 business days of receipt of the written notification.
- If the dispute is not resolved in the meeting with student, faculty, and Assistant Dean for Student Support and Clinical Facilitation, the student may request an Appeals Committee hearing following the Appeal Procedure found in the SON Handbook.

[Reviewed and updated Sept. 2017]

6. Feedback in Clinical Courses

Students in clinical settings should receive feedback from their clinical instructors and/or preceptors on an ongoing basis.

[Updated 5/27/2011; Reviewed Sept. 2017]

Automatic Review Process

The Automatic Review Process will be conducted by a committee convened by the SON Assistant Dean for Student Support and Clinical Facilitation, and consisting of the involved faculty and the student's faculty advisor. A review committee will be convened in the case of:

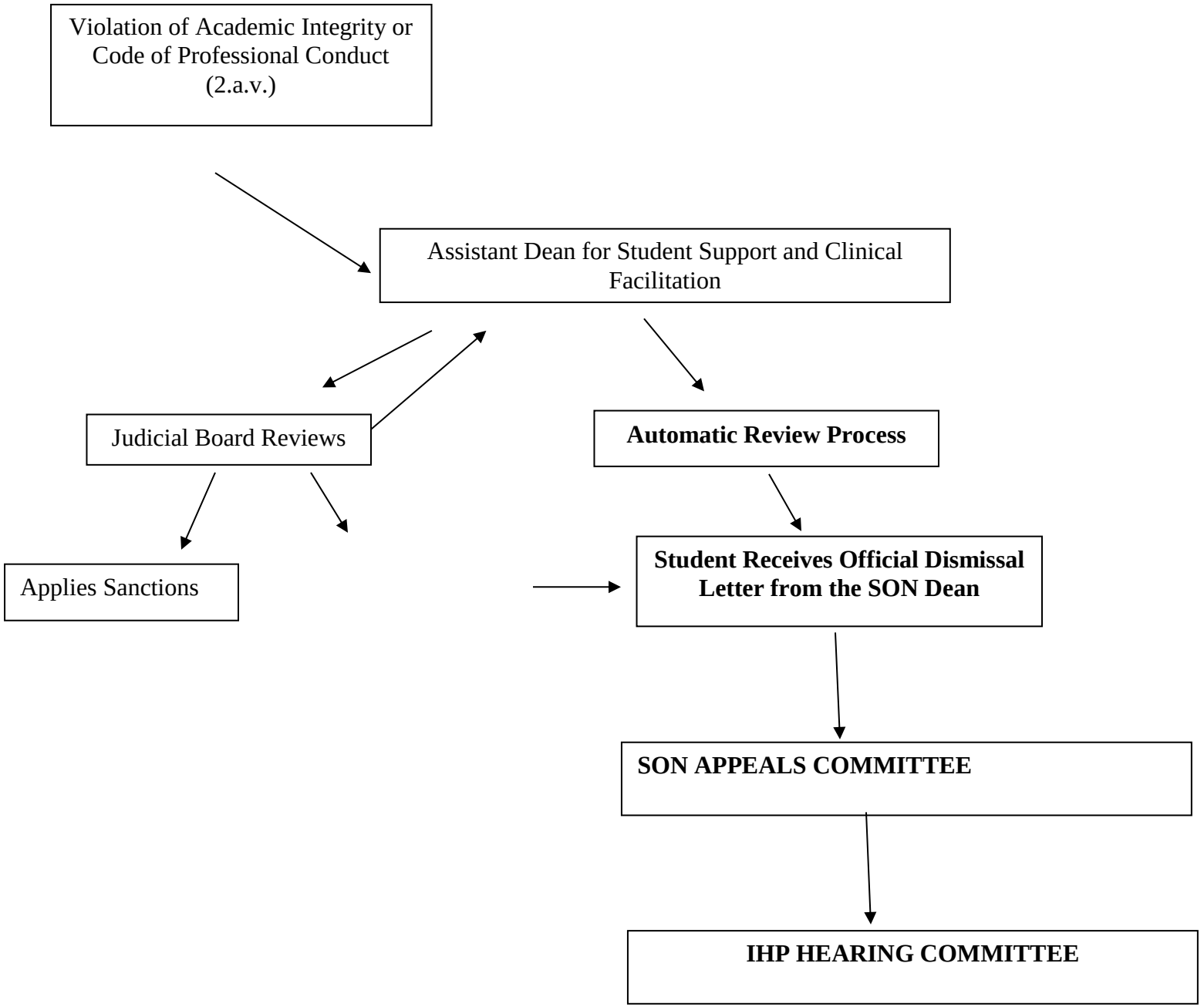
a. Violation of the Institute's Academic Integrity Policy or the Code of Professional Behavior for Students.
b. Failure to meet the IHP/SON immunization, OSHA, HIPAA, CPR, and any other clinical placement requirement**s.**
c. Student request for review for exception to current policy.

A student will receive three days' notice prior to the date of the committee meeting and will have the right to submit documents to and appear before the committee. Any committee recommendation for dismissal of a student shall be made to the Dean of the SON.

A student may appeal a decision to dismiss or a Review Committee decision with which the student does not agree to the SON Appeal Committee (See Procedure below).

[Policy updated June, 2013, Reviewed Sept., 2017]

Process for Violation of Academic Integrity

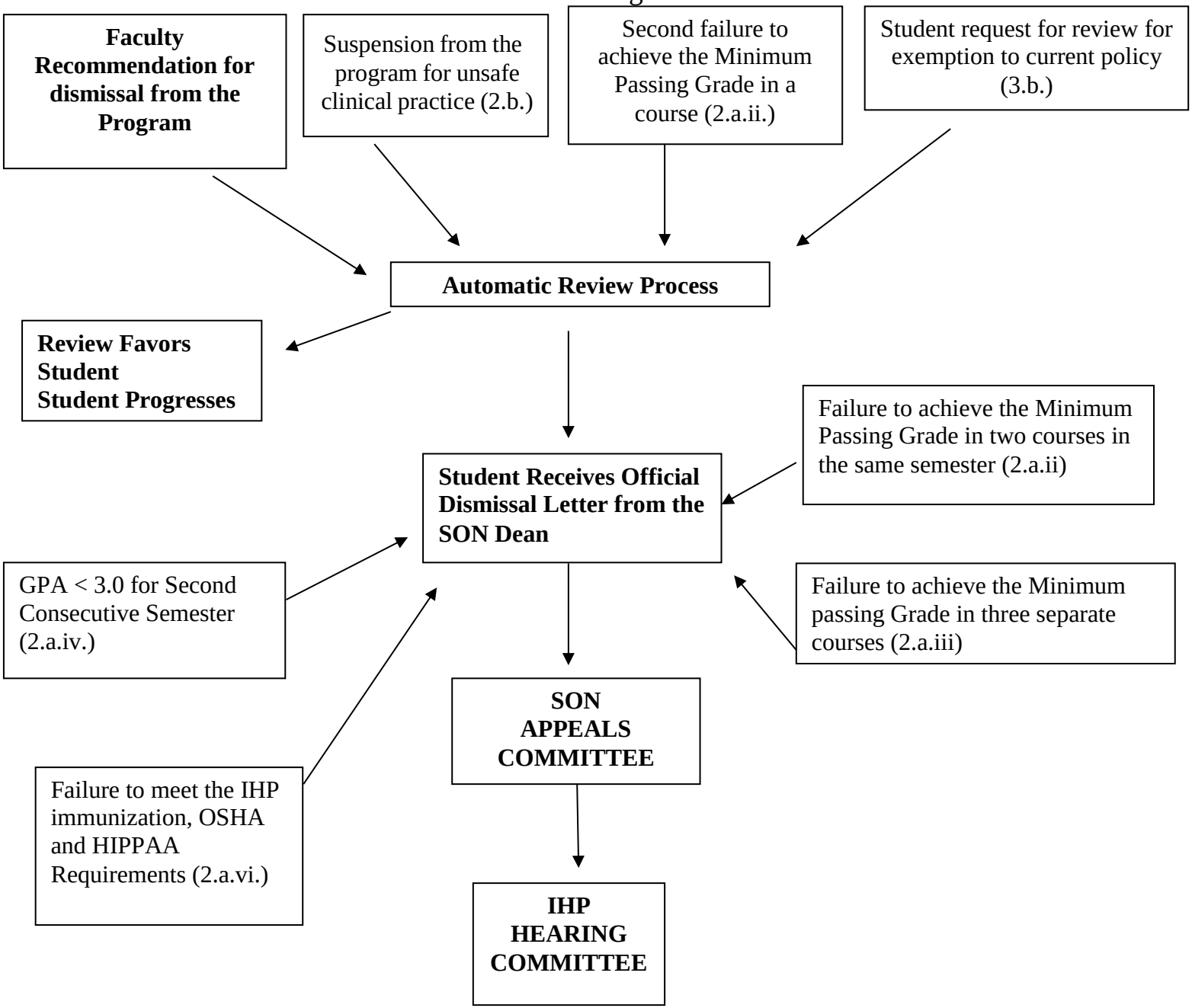


Appeal Procedure

1. The student sends a written request to the Dean of the SON to initiate an appeal and copies the Assistant Dean for Student Support and Clinical Facilitation.
2. The Assistant Dean for Student Support and Clinical Facilitation notifies the Appeals Committee Chair to request a hearing and assures that proper procedures are followed.
3. The Appeals Committee Chair:
    a. Identifies three faculty members to comprise the Hearing Panel, and appoints a Chair of the Hearing Panel
    b. Sets a date and time for a hearing within 10 business days of student request, during the academic calendar.
    c. Invites the student and the involved faculty/administrators to submit documentation to the Administrative Assistant to the Appeals Committee. Documentation must be received at least three days prior to appeal meeting date.
    d. Ensures that all documentation is distributed by the Administrative Assistant to the student, the hearing panel members, appropriate Program Director, the Assistant Dean for Student Support and Clinical Facilitation, the Dean, and involved faculty/administrators. Documentation must be distributed at least three days prior to appeal meeting date.
    e. After the hearing, ensures that the Chair of the Hearing Panel reminds all parties involved to delete all electronic documentation, and collects all hard copy documentation and destroys it.
4. Procedure for the Hearing Panel meeting:
    a. Hearing Panel meets privately and reviews charge and process.
    b. Student and involved faculty/administrators join the meeting.
    c. Both student and involved faculty/administrators may bring one support person (i.e. advisor, family member, peer, or significant other) but such person cannot be a legal representative or lawyer and may not speak for the student prior to or during the proceedings.
    d. Faculty/administrators may present only objective data. Personal opinions or recommendations are prohibited.
    e. Involved faculty/administrator has the opportunity to present her/his case: maximum 20 minutes.
    f. Student has the opportunity to present her/his case: maximum 20 minutes.
    g. The Hearing Panel members have the opportunity to ask questions of the student and faculty/administrators.
    h. When the Hearing Panel is fully informed, student and all non-panel persons are excused.
    i. Panel deliberations are confidential. Recommendations are made by simple majority vote of the 3 members of the Hearing Panel.
5. The Hearing Panel Chair communicates the recommendation of the panel to the Appeals Committee Chair who then must communicate the recommendation in writing to the Dean within three business days.
6. The Dean must communicate the decision in writing to the student within ten business days of the hearing, with copies to the notify the student, advisor, Program Director, Assistant Dean, Dean of Students and Registrar.

7. The only method to reverse the appeals committee decision is via the IHP Hearing Committee, as outlined in the IHP catalog.
8. Involved faculty have no further responsibility.
9. All original written documents reside in the student's folder in the Office of Student Affairs.

Process for Automatic Review and Dismissal from Program



Requests for Review

Students have the right to request a review of a program policy on an individual basis due to extenuating circumstances. The relevant program policy must affect the student's current or future semester. This request must be in writing and submitted to the Assistant Dean for Student Support and Clinical Facilitation. The Assistant Dean will convene a committee of involved faculty to include at a minimum, the Director of the program, faculty of record and the faculty advisor. The committee will make every reasonable effort to deliver a timely decision.

Alternative Methods to Complete Degree Requirements

Refer to the Institute website for Institute policies and deadlines governing alternative methods to complete degree requirements. *(Listed under "Academic Policies/Transfer Credit Policy; Independent Study Policy; and/or Course Exemption, Credit for Life Experience, and Credit by Exam Policies")*

Alternative methods of completing Nursing degree requirements through transfer credit, credit by examination, course exemption, or independent study apply only to non-clinical classes.

1. Transfer Credits

   A maximum of nine (9) credit hours may be transferred from another school for credit toward the degree. For Direct Entry and RN Master's degree students, these must be graduate credits not utilized from a previously completed degree. No transfer credit will be allowed from institutions or programs that lack appropriate accreditation or for courses for which the student received a grade of less than a B. For transfer credits to be allowed, they must have been acquired within 7 years prior to matriculating at the Institute.

   During study at the Institute, students may take approved courses at other colleges and universities, using the following procedure: The student provides a petition and course syllabus to his/her academic advisor for review. The academic advisor, in consultation with the Assistant Dean for the program determines if the course meets requirements for transfer credit. The advisor returns the signed petition to the OSA spell out.

2. Credit by Examination: see 2017-2018 Catalog http://mghihp.smartcatalogiq.com/en/2017-2018/Catalog/Academic-Policies/Course-Replacement-Policies/Credit-by-Examination
   A student may obtain a maximum of six (6) credit hours by examination toward the degree. Students with life/work experience related to specific courses may wish to receive credit for courses by taking a special examination.

   a. The student must be matriculated in the programs in the School of Nursing.
   b. The Credit by Exam option will be offered for selected courses, a listing of which is available from the Program Office.
   c. The student submits a petition form for Credit by Examination http://www.mghihp.edu/current-students/osa/registrar/important-forms/petition-form.aspx
      no later than two weeks after the course begins.
   d. A non-refundable examination fee of 10% of the course tuition is charged.
   e. The student arranges exam administration with course faculty.
   f. The course faculty returns the signed petition to the OSA. Written notification of the grade is sent to student and advisor within one week of exam administration.

g. If the exam is not passed, the student must register for the course.
h. An exam may be taken only once.

3. Course Exemptions.

Students who have extensive previous study or experience may request course exemption from **non-clinical courses** for a maximum of six (6) credit hours.

a. The student must be matriculated in the School of Nursing.
b. The student meets with the academic advisor to discuss intent to exempt a course and with the course faculty to receive direction regarding the materials required to support the course exemption. http://www.mghihp.edu/current-students/osa/registrar/important-forms/petition-form.aspx
c. The course faculty, in consultation with the Program Director for the program, determines if the course exemption will be awarded.
d. If an exemption is granted, credit will be awarded based on School of Nursing petition review and approval and no fee will be charged for the exempted course(s).
e. If the student enrolls in a course and then decides to exempt the course, a request to do so must be made to the student's faculty advisor and the course instructor no later than two weeks into the semester.
f. Requests for exemption from clinical courses will not be considered.
g. If an exemption is granted, course credit may be given at the discretion of the SON;
i. The student then is not required to take another course to earn equivalent credit counted toward graduation.

[Policy under review Jan. 2018]

Independent Study

*Refer to the **Institute 2017-2018Catalog** on the Web site for policies regarding Independent Study*
http://mghihp.smartcatalogiq.com/en/2017-2018/Catalog/Academic-Policies/Independent-Study-Policy
Go to the Registrar's section on the Web site for forms:
http://www.mghihp.edu/current-students/osa/registrar/important-forms/independent-study-agreement-form.aspx

4. Adding and Dropping Courses
Refer to the Institute website for policies regarding Drop/Add Policies
http://mghihp.smartcatalogiq.com/en/2017-2018/Catalog/Academic-Policies/AddDrop-Policy

5. Withdrawal Policy
Refer to the Institute website for policies regarding Withdrawal
http://mghihp.smartcatalogiq.com/en/2017-2018/Catalog/Academic-Policies/Withdrawal-Policy

6. Attendance Requirements
Refer to the Institute website for policies regarding Attendance.
http://mghihp.smartcatalogiq.com/en/2017-2018/Catalog/Academic-Policies/Attendance-Policy

a. Absence from Clinical Experience

Students are expected to be present for all clinical experiences. Students who miss clinical experience will be expected to make up that clinical experience to the satisfaction of the faculty. The faculty and student will arrange appropriate times for meeting the clinical experience requirements. The student must complete the clinical experience within the first week of the succeeding term, and may be liable for additional payment to cover the cost of any extra faculty time required. For more information, see the attendance policy in the IHP Catalog under Academic Policies. http://mghihp.smartcatalogiq.com/en/2017-2018/Catalog/Academic-Policies/Attendance-Policy

7. Auditing Courses
Refer to the Institute website for policies regarding Auditing
http://mghihp.smartcatalogiq.com/en/2017-2018/Catalog/Academic-Policies/Audit-Policy

8. Changing Specialization

A student who wishes to change his/her specialization after admission to the program must be in good academic standing.

a. The student is encouraged to discuss the proposed change with his/her advisor.
b. First year students are notified of the process to request a change in track specialty.
c. Decisions are made by faculty in a timely manner and are subject to available space within each specialty program.
d. This process does not guarantee a change of specialty.

[Policy reviewed Sept. 2017]

GRADUATION

A. Time for Completing Program

1. Full time students in all programs must complete all course work within five (5) years after matriculation.

2. Part-time post-master's Doctor of Nursing Practice students must complete all course work within five (5) years and all other part-time students within eight (8) years after matriculation.

3. Students enrolled in the Certificate of Advanced Studies program must complete all course work within three (3) years.

4. Students who do not complete the program within these time limits will be dismissed from the program. Under extreme extenuating circumstance, students may submit a written petition to the Dean to extend the time for completion of the program.

B. Course Requirements

1. Students must complete all required course work as described in the respective plan of study. Students wishing to take course work beyond requirements may do so with permission of advisor and course faculty. Enrollment is dependent upon availability of resources.

2. Direct Entry students admitted without advanced standing or course exemptions must complete their program of study to graduate. Specific curricular requirements for their specialization must be met.

3. MS students must complete a minimum of 24 credits at the MGH Institute of Health Professions.

C. Participation in Graduation Ceremony

Refer to the Institute 2017-2018 Catalog on the Web site for policies/ requirements for Graduation.
http://mghihp.smartcatalogiq.com/en/2017-2018/Catalog/Academic-Policies/Graduation-Requirements
The Institute holds one commencement ceremony in May of each year for all students graduating in January, May, or September of that year.

Degrees are recorded and made official per the following guidelines:

- Fall finish (December) – degree will be conferred on the first business Friday in January.
- Spring finish (April) – degree will be conferred on the date of the May Commencement Ceremony.
- Summer finish (September) – degree will be conferred on the first Friday in September.

All students who plan on graduating must complete an application for graduation by the beginning of December prior to your graduation year. See also "Application for Graduation."
http://mghihp.smartcatalogiq.com/en/2017-2018/Catalog/Academic-Policies/Graduation-Requirements/Application-for-graduation

[Policy updated June 2014, reviewed Sept. 2017]

CURRICULUM

A. Course Requirements and Options

1) Curriculum Plans
Students must complete the curriculum plan for their program of study as outlined. Students wishing to take coursework beyond their required credit allotment may do so with the permission of their advisor, and course faculty, dependent on the availability of resources.

2) Scholarly Project
The scholarly project is a requirement for Masters level students to graduate and is completed within the term of registration. Students who extend beyond one term must submit a request for a grade of incomplete.

[Policy updated Sept. 2017]

3) Independent Study
An independent study elective is available to students with special needs and interests. Credit and hours are to be arranged with the appropriate faculty member and approved by the student's faculty advisor. Students must complete an online Independent Study Agreement Form . A descriptive title, reflecting the content of the course, must be given and will be listed as such on the transcript. Independent study for clinical credit must be approved by appropriate nursing administrative channels.

[Policy updated Sept. 2017]

4). Format for Written Work

All formal papers must be written per the format specified in the Publication Manual of the American Psychological Association (Sixth Edition).

[Policy updated Sept. 2017]

4. Course Credit/Contact Hour Ratio

a. Theory Credit Ratio
The didactic credit to contact hour ratio is 1:1. Courses taught in less than a semester block are adjusted accordingly.

b. Clinical Credit Ratio
ABSN and Generalist Level of the DEN Program: The clinical credit to contact hour ratio in all clinical courses is 1:3. Courses taught in less than a semester block are adjusted accordingly. Advanced Practice Level, DEN, RN-Master's and BSN-DNP: 3 clinical credits = 130 clinical hours

c. Lab Credit Ratio
The lab credit to contact hour ratio is 1:2. Courses taught in less than a semester block are adjusted accordingly.

d. Practice Credit Ratio

[Policy updated Sept. 2017]

APPENDICES

APPENDIX A

MGH INSTITUTE OF HEALTH PROFESSIONS
School of Nursing

Notification of Change of Academic Advisor

Please fill out the information below and obtain the appropriate signatures.

Student: _____

Program Level: _____Generalist/Pre-RN _____Advanced Practice/RN

Specialty track: _____

Former Advisor: _____

New Advisor: _____

Effective Date: _____

Signature of New Advisor: _____

Date: _____

Signature of Former Advisor: _____

Date: _____

Please return completed form to Nursing Program Office

Received in Nursing School Office: Date: _____ by _____

cc to: Student
Former Advisor
New Advisor

Rev11

APPENDIX B

MGH Institute of Health Professions
School of Nursing

CONSENT FORM FOR PHYSICAL EXAMINATION

I volunteer to have a _____ examination performed on me by a graduate _____student of the MGH Institute of Health Professions for the purpose of STUDENT LEARNING ONLY, as more fully described in Attachment A.

I understand that the MGH Institute of Health Professions is a post-baccalaureate school dedicated to preparing skilled health care professionals, and that the student performing the examination on me is a student and not a fully trained specialist. In agreeing to volunteer, I have been informed on the following:

1. The tests that will be performed during the examination will not be for diagnostic purposes.

2. I may experience some minor discomfort during the examination.

3. I may ask the student to stop the examination at any time.

4. Any side effects either during or after the examination are described in Attachment A.

I agree that I will not hold the MGH Institute of Health Professions, faculty or student responsible for any problems I may encounter after this examination.

Signed: _____

Date: _____

Description of Examination:

Description of Possible Side Effects:

Additional Comments:

This form was prepared by: _____ , _____
Name of Faculty of Record Date

APPENDIX C

MGH Institute of Health Professions
School of Nursing

CONSENT FORM FOR PARTICIPATION IN LEARNING ACTIVITIES

I, _____, volunteer to participate as a subject in classroom laboratory
Subjects Name

activities for _____ _____.
Course # Course Title

I understand that the MGH Institute of Health Professions is a graduate school dedicated to preparing skilled health care professionals, and the class activities are part of their professional preparation. The purpose of my participation is for student learning only, and will not serve diagnostic or treatment purposes.

In agreeing to volunteer, I have been informed of the following:

Who will be interacting with me and how:

Description of activities:

Potential side effects or risks and precautions:

Additional Comments:

I have read the descriptions provided above. All questions have been answered to my satisfaction. I understand that I may discontinue my participation in these activities at any time. I agree that I will not hold MGH Institute of Health Professions, faculty or students responsible for any problems I may encounter as a result of my participation.

Signed: _____ Date: _____

This form was prepared by: _____ , _____
Name of Faculty of Record Date

APPENDIX D

MGH Institute of Health Professions
School of Nursing
Honor Code

As a student health care professional,
I will act with honesty, integrity, and respect
in my academic pursuits and beyond.

Suggested placement in syllabus: in Grading Section.
Suggested use on exams: I agree to adhere to the honor code in taking this exam:

As a student health care professional, I will act with honesty, integrity, and respect in my academic pursuits and beyond.

[ ] Yes, I agree

Approved SON Faculty Apr. 15, 2015

APPENDIX E

STUDENT INCIDENT REPORTING FORM
(Submit to Program Director)

Student Name: Date of Report:

E-mail address: Preferred Phone Contact: Email

Program Enrolled: Date of Incident:

Location of Incident:
_____
_____
_____
_____

Parties involved:

Description of Incident:

Witness(es):

Who Reported to: Date:

Student Signature Date:

Attached additional pages if needed.

TO BE COMPLETED BY PROGRAM DIRECTOR:

Description of Follow-up:
_____
_____
_____
_____
_____
_____

Action taken: _____
_____
_____
_____
_____
_____

Resolution:
_____
_____
_____
_____
_____

Date(s) reported back to student: _____
_____
_____

(Attach Copy of email communications sent to student)

Inquiry ongoing? ____yes ____no

Date inquiry closed with final resolution:
_____
_____
_____

Program Director Signature: _____ Date: _____

Reported to:

_____ SON Dean's Office _____ Dean of Student Services and Alumni Services

_____ Operations/Security _____ Other _____

Attached additional pages if needed.