



**COLLEGE OF
HEALTH PROFESSIONS
& WELLNESS**

Policy and Procedure Manual

2024 - 2025

JACKSONVILLE STATE UNIVERSITY COLLEGE OF HEALTH PROFESSIONS AND WELLNESS
CHPW MANUAL

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Mission

The College of Health Professions and Wellness is a learning-centered community that provides distinctive professional undergraduate and graduate programs to prepare students to engage within the global health profession, wellness, and sport environments as ethical professionals and involved, culturally sensitive, responsible citizens.

Key Strategic Initiatives:

- Excellence & Innovation
- Integrity & Respect
- Collaboration & Communication
- Community & Outreach

Discover

As professionals and educators, we do not provide answers. We provide experiences, environments, and expectations that allow learners to discover the answers.

1. Experiences

Goal: Provide learning experiences that connect learners with real-world knowledge, skills, and opportunities.

CHPW Objectives:

Deliver innovative, relevant, and complex academic programs to diverse students.

Use high impact practices in all programs to apply knowledge gained in the classroom

Foster ethical student and faculty involvement in scholarship, service, and professional activities.

2. Environments

Goal: Create and provide new learning environments characterized by modern facilities, technological enhancements, active learning, and engaging instruction

CHPW Objective:

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Support and develop new learning environments to support active learning and student engagement

3. Expectations

Goal: Promote and assess critical thinking, essential employability skills, diversity and inclusion, and successful degree completion in all learning experiences and environments

CHPW Objectives:

Engage external stakeholders to be involved with CHPW programs to promote and evaluate employability skills.

Implement active learning pedagogy in CHPW programs to promote and assess critical thinking.

Include cultural competencies in CHPW programs.

Engage

Within the College of Health Professions and Wellness we engage the campus, community, and region through mutual relationships and transformative experiences.

1. Mutual Relationships

Goal: Strengthen partnerships to improve quality of life through collective impact.

CHPW objective

Develop collaborative partnerships and inter-professional relationships designed to meet the needs of internal and external stakeholders.

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Reach

As a thriving learning community, CHPW depends on a strong financial foundation based on diverse student enrollment and a culture of accountability.

1. Inclusive Environment

Goal: Attract, enroll, and support undergraduate and graduate students with unique experiences from across the region, state, and globe.

CHPW objective:

Recruit, develop, and retain diverse students and faculty who possess knowledge, skills, and attitudes reflective of the profession.

2. A Spirit of Generosity

Goal: Strengthen partnerships to improve quality of life through collective impact.

CHPW Objective

Cultivate healthy and active lifestyles within the community of interest.

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Document No.: I:01.00

Last Reviewed: July 2023

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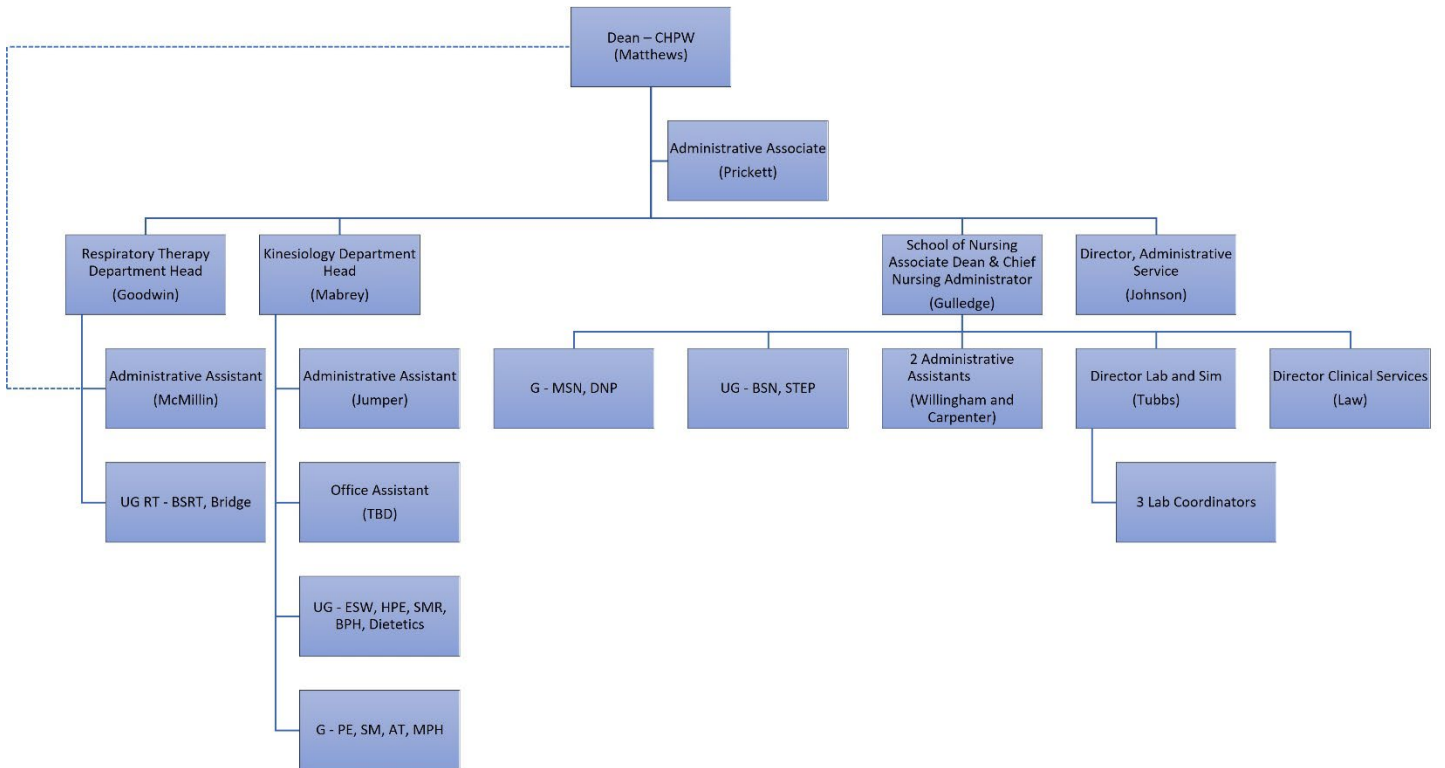
Subject: CHPW Organizational Structure

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

[College of Health Professions & Wellness \(CHPW\) Organizational Structure](#)

Nursing, Respiratory Therapy, & Kinesiology



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Document No.: I:02.00

Last Reviewed: June 2023

Adoption Date: April 4, 1980

Last Revised: June 2023

Subject: CHPW Organization Bylaws

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Faculty Organization Bylaws

Purpose:

The purpose of the organization of the College of Health Professions and Wellness (CHPW) shall be to provide a means for the employees to fulfill its mission of delivering evidence-based teaching and learning within professional undergraduate and graduate programs.

Meetings of the Faculty Organization:

The CHPW shall meet at least once a semester and more often as deemed necessary by the Dean and faculty. Departmental meetings for nursing, respiratory therapy, and kinesiology will occur more often at the discretion of the department heads and/or program directors.

Administration:

The administration of the CHPW emanates from the control delegated by the Board of Trustees and President of the University to the Dean and faculty through the Provost and Senior Vice President for Academic Affairs.

1. The Dean serves as the chief administrative officer of the College and is responsible to the Provost and Senior Vice President for Academic Affairs, serving as an agent for observation and execution of the rules and regulations of the University.
2. The Associate Dean serves in the absence of the Dean and coordinates the day-to-day operations of the CHPW.
3. The CHPW Leadership Team consists of those individuals in positions which report directly to the dean. The functions of the Executive Leadership Team are detailed in Policy I:04.00.
4. The CHPW Faculty Affairs Committee membership consists of faculty representing all programs within the CHPW. The functions of the CHPW Faculty Affairs Committee are detailed in Policy I:05.00.

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Program Administration for Kinesiology:

1. Kinesiology faculty serve on general program committees at the discretion of the department head. Additionally, Kinesiology faculty hold regular meetings to discuss department and programmatic needs.
2. The Dean, Associate Dean, and/or Department Head have the authority to establish sub-committees or ad-hoc committees as needed to address programmatic needs.

Program Administration for Respiratory Therapy:

1. Respiratory therapy faculty serve on general program committees at the discretion of the department head. Additionally, Respiratory Therapy faculty hold regular meetings to discuss programmatic needs.
2. The Dean, Associate Dean, and/or Department Head, have the authority to establish sub-committees or ad-hoc committees as needed to address programmatic needs.

Program Administration for Nursing:

1. Standing committee structures are in place to provide shared faculty governance within JSU Nursing. Standing committees include the following:
 - a. Curriculum Committee for the traditional, undergraduate BSN programs
 - b. Admission & Progression Committee for BSN programs
 - c. Simulation Committee-The Simulation Committee serves the entirety of the CHPW and consists of membership from all departments within the CHPW.
 - d. Program Evaluation Committee
 - e. Student-Alumni Committee
2. Two councils are in place to serve the specific needs of the RN-BSN program and all graduate nursing programs.
 - a. The SON STEP Council shall have decision-making authority over matters of policy and procedures specific to the STEP program. All substantive decisions require final approval by the dean. The STEP council shall meet at least once per semester. Functions of the STEP Council are detailed in Undergraduate Nursing Manual.
 - b. The SON Graduate Council shall have decision-making authority over matters of policy and procedure specific to the graduate nursing programs and curriculum. All substantive decisions require final approval by the dean. The Graduate Council shall meet at least once per semester. Functions of the Graduate Council are detailed in the Graduate Nursing Manual.

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Last Revised: November 2020

Subject: CHPW Preparing, Maintaining and Reviewing Policies and/or Templates for the Policy & Procedures Manual

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Preparing, Maintaining and Reviewing Policies and/or Templates for the Policy &
Procedures Manual

Purpose:

The purpose of this policy is to establish the structure for the development, formatting, approval and evaluation process for all CHPW policies.

Development and procedure of new policies/templates:

Proposed policies, once drafted, will be presented to the Dean/Associate Dean for a policy number and distributed amongst faculty for feedback, review, and approval.

New policy development or revisions to existing policies will originate within the appropriate committee.

Revising existing policy/template procedure:

The appropriate committee shall submit proposed changes to faculty for review and feedback. Minor editorial changes may be made by the committee and submitted without faculty review and feedback as long as change is only editorial. Depending on type of editorial change, faculty may need to be informed of the change. The Dean/Associate Dean and Committee Chair may make this determination. All substantive changes must be discussed with faculty before voting can occur.

Approval process:

A new policy/template or policy/template with major revisions will be submitted to the faculty for feedback and approval. Approval can be made in the form of an in person or virtual voting process.

Once approval is obtained, policy/template will be added to The Policy & Procedures Manual for the CHPW and will be housed in a central repository for faculty and staff access.

Review Process:

All policies will be reviewed biennially by the appropriate committee and the recommendations forwarded to the Dean's Administrative Associate.

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Review - review of policy terminology and currency to ensure it reflects current terminology; review completed by committee.

Revised - changes made to an existing policy.

Editorial changes - changes made to better clarify the policy or correct the process without changing the meaning of the policy.

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Last Reviewed: June 2023

Adoption Date: March 2015

Last Revised: November 2020

Subject: CHPW Leadership Team

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Leadership Team

The (LT) serves as an executive group providing input to the Dean and Associate Dean.

The CHPW LT shall have the following functions:

1. To serve as a leadership voice for the CHPW.
2. To identify innovative opportunities for professional development for CHPW faculty and staff.
3. To review overall marketing and recruitment plans for the CHPW.
4. To identify leadership development opportunities and promote succession planning within the CHPW.
5. To make recommendations and suggestions for continuous quality improvement of all programs and departments.
6. To provide a seamless leadership approach across the CHPW.

The membership of the Leadership Team shall consist of those administrators in positions who directly report to the Dean. Additionally, members may be appointed temporarily as needed by the Dean/Associate Dean.

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Adoption Date: June 1, 1992

Last Revised: June 2018

Subject: CHPW Faculty Affairs Committee

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Faculty Affairs Committee

The CHPW Faculty Affairs Committee is designed to facilitate faculty governance and support of professional development and role expectations.

The Faculty Affairs Committee shall have the following functions:

1. To identify best practices for faculty governance.
2. To promote ongoing scholarly activities in the CHPW and University.
3. To recommend mechanisms for effective evaluation of faculty members.
4. To make recommendations related to role expectations in teaching, service, faculty practice, and scholarship.
5. To maintain and revise position descriptions within the CHPW.
6. To promote faculty nominations for the CHPW (SVL, Faculty Fellow, etc.), university (Emeriti, etc.), and external (ALN Lamplighter, etc.) awards.
7. To formulate new policies or revise existing policies that ensure relevancy of the educational and professional practices associated with faculty role expectations within the College of Health Professions and Wellness.
8. To report aggregated outcomes from scholarly activities, i.e., presentations, awards, etc., and make recommendations relative to teaching, service, scholarship, and practice.

The membership of the Faculty Affairs Committee shall consist of the following:

1. Faculty members from all departments will be represented on the Faculty Affairs Committee.
2. Participation of two students at the discretion of the Faculty Affairs Committee chair.
3. Ex-officio: Dean, Associate Dean, Directors/Program Directors and Coordinators of various programs as designated by the Deans.

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Adoption Date: January 2021

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Subject: CHPW Curriculum Committee

Committee: CHPW Leadership team

Approved: Dean Tracey Matthews

CHPW Curriculum Committee

The CHPW Curriculum Committee is designed to facilitate the development, refinement, renovation, and outcomes management of a multiple curriculum across the CHPW that is responsive to the needs of a student- centered learning environment, the consumer, and the healthcare system.

The CHPW Curriculum Committee shall have the following functions:

1. To develop curricula that is reflective of established knowledge, skills, and attitudes necessary to provide high quality education throughout all domains of the CHPW.
2. To refine and renovate curricula in response to national initiatives and goals, established professional competencies, external stakeholders, and regulatory agencies.
3. To critically reflect and problem solve regarding the curriculum and provide evidence-based suggestions to promote excellence in the teaching/learning environment.
4. To ensure congruency among program, level, course, and unit outcomes across the curricula.
5. To offer evidence-based decisions related to resources utilized to facilitate teaching and learning.
6. To provide oversight of course curriculum maps and make recommendations for specific course refinement/renovation.
7. To evaluate and approve appropriate teaching/learning strategies utilized in the classroom. practical and clinical setting.
8. To propose recommendations related to methods of evaluation of student learning to ensure appropriate rigor, critical thinking, and clinical reasoning.
9. To develop new policies or revise existing policies reflective of best practices in teaching and learning.
10. To generate aggregated outcome data, draw conclusions, and make recommendations in an annual report relative to specified benchmarks.

The membership of the Committee on CHPW Curriculum shall consist of the following:

1. A committee chair with three to five years of educator experience in higher education
2. A minimum of six expert faculty
3. A term is two years with members serving no more than two consecutive terms unless approved by the Dean/Associate Dean.
4. Ex officios: Dean, Associate Dean, Directors/Program Directors and Coordinators of various programs as designated by the Deans

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Last Revised: November 2020

Subject: CHPW Ad-Hoc Committees

Committee: CHWP Leadership Team

Approved: Dean Tracey Matthews

CHPW Ad-Hoc Committees

CHPW Ad-Hoc Committees shall be established by the faculty organization, Leadership team, Associate Dean or Dean as the need arises to resolve problems, issues, or events of a non-recurring nature. The existence of these committees shall cease after the objectives have been accomplished.

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Last Reviewed: June 2023

Last Revised: September 2021

Subject: Nursing Simulation Committee

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

Adoption Date: June 2018

Simulation Committee

The Simulation Committee is designed to provide oversight, recommendations, and evaluation of simulation experiences in various programs in the College of Health Professions and Wellness.

The Simulation Committee should have the following functions:

1. Identify and promote best practices for utilizing simulation in healthcare programs.
2. Recommend policies and procedures for ensuring adequate simulation experiences.
3. Maintain and revise all policies specific to simulation.
4. Generate aggregate data specific to simulation experiences from Evaluation KIT surveys and complete an annual report relative to recommendations for improvement in simulation experiences.

The membership of the Simulation Committee shall consist of the following:

1. The Simulation Coordinator.
2. The Nursing Arts Lab Coordinator and Clinical Lab Assistants.
3. At least one faculty representative from each level of the Undergraduate Nursing Program.
4. At least one faculty representative from the Graduate Nursing Programs.
5. At least one faculty representative from Respiratory Therapy Program.
6. At least one faculty representative from the Kinesiology Department.
7. Ex-officio members: Dean, Associate Dean, Directors/Program Directors and Coordinators of various programs as designated by the Deans

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Last Revised: June 2023

Subject: Position Description for the Coordinator of the Center for Best Practices in Teaching and Learning (CBPTL)

Committee: Leadership Team

Approved: Dean Tracey Matthews

Position Description for the Coordinator of the Center for Best Practices in Teaching and Learning (CBPTL)

POSITION SUMMARY:

The Coordinator of the Center for Best Practices in Teaching and Learning is a highly motivated, enthusiastic individual with the ability to effectively train and support novice and experienced educators in best practices related to teaching and learning. The coordinator focuses on enhancement of best practices in teaching and learning and the incorporation of educational technology in the traditional and online learning environment. The coordinator works collaboratively with the administrative team to plan, coordinate, develop and implement professional development opportunities for faculty members in the CHPW. The coordinator also works collaboratively with the administrative team to facilitate a student-centered learning environment.

The coordinator will possess:

1. A terminal or advanced degree with a clearly articulated program of research and experience in the field of educational research and innovation.
2. Experience teaching in higher education and experience in the scholarship of teaching and learning.
3. Strong understanding of contemporary student learning processes and familiarity with national trends and issues in higher education.
4. Excellent verbal and written communication, leadership, and interpersonal relationship skills
5. Successful experience in developing and conducting live, blended and online professional development workshops.
6. Expertise in integrating technology and effective andragogical techniques into a wide variety of instructional situations.
7. Strong computer and educational technology skills and experience working with on-line course management systems, such as Learning Management System (LMS).

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8. Demonstrated ability to plan, promote and deliver instructional workshops to persons at various levels of understanding and use of effective instructional methodologies and educational technology.

ESSENTIAL FUNCTIONS:

Arranges schedules and facilitates professional development workshops/seminars for faculty in the CHPW. Topics should be related to improving teaching and learning, including but not limited to content such as learning styles, collaborative learning, critical thinking, problem solving based learning, innovations in technology related to teaching strategies, and outcomes assessment.

1. Conducts live workshops
 - a. Manage onsite workshops and presentations for CBPTL
2. Utilizes diverse strategies to create innovative learning opportunities such as webinars, online courses, interactive workshops, distance education updates, etc.
3. Works collaboratively with internal and external stakeholders to develop learner centered objectives and summaries for awarding contact hours through the Alabama Board of Nursing (ABN) or other professional organizations.
 - a. Provides pertinent materials for professional development (electronic license verification of attendance, sign-in sheets, and evaluations
 - b. Ensures that all policies and procedures relating to conference sessions are followed
 - c. Serves as course reviewer for CEU's through the ABN or other professional organizations
 - d. Sends emails to professional development participants providing them with necessary information about each session
4. Provides professional development information to Associate Dean to schedule professional development opportunities on the CHPW.
5. Provides leadership oversight for the planning, development, and implementation of appropriate methods of evaluation for CHPW programs.
6. Facilitates the development and implementation of diverse programs geared toward student success.
7. Completes an annual report

PHYSICAL REQUIREMENTS:

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1. Communicates effectively verbally and in writing, in a variety of settings, with a wide range of audiences.
2. Reads documents written in English.
3. Uses multiple technological devices extensively.
4. Moves from building to building on campus and travels off-campus as needed in the performance of his/her duties.

REQUIRED KNOWLEDGE, ABILITIES, AND SKILLS:

1. Knowledge of CHPW-related professional organization standards and standards for the Southern Association of Colleges and Schools Commission on Schools (SACS-COC).
2. Knowledge of CHPW and university policies and procedures.
3. Knowledge of current national initiatives related to Teaching/Learning.
4. Expert problem solving, interpersonal relationship and leadership skills
5. Ability to communicate effectively, orally and in writing.
6. Proficiency in computer skills and utilization of software (Word, Excel), teaching platforms (Learning Management System (LMS)), and electronic communication systems (e-mail, electronic calendars).

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Document No.: I:10.00

Last Revised: June 2018

Adoption Date: September 2014

Last Reviewed: June 2023

Subject: CHPW CBPTL Mission Vision and Goals

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Center for Best Practices in Teaching and Learning (CBPTL)
Mission Vision and Goals

Mission Statement

The Center for Best Practices in Teaching and Learning (CBPTL) fully embrace and encourage implementation of andragogical teaching/learning principles. These theories are reflected in the implementation of an innovative orientation program for novice educators and the development of lifelong learning opportunities for experienced faculty members. Creative teaching/learning strategies are explored and incorporated in the traditional, hybrid and online learning environment to facilitate knowledge, skills and abilities.

Vision and Goals Statement

The overarching goal of the CBPTL is to foster a learner centered community. Best practices in teaching, learning, and evaluation are considered to be a vital component of the mission of the CBPTL and act as the underpinning for program improvement and success. Specific strategies to achieve this goal include:

1. Facilitation of a student-centered learning environment.
2. Employment of best practices in teaching, learning and evaluation.
3. Implementation of innovative approaches to teaching and learning.
4. Development of exemplary courses in instructional design.
5. Cultivation of creative learning opportunities for faculty and students.
6. Fostering professional behaviors that model caring among faculty and students.

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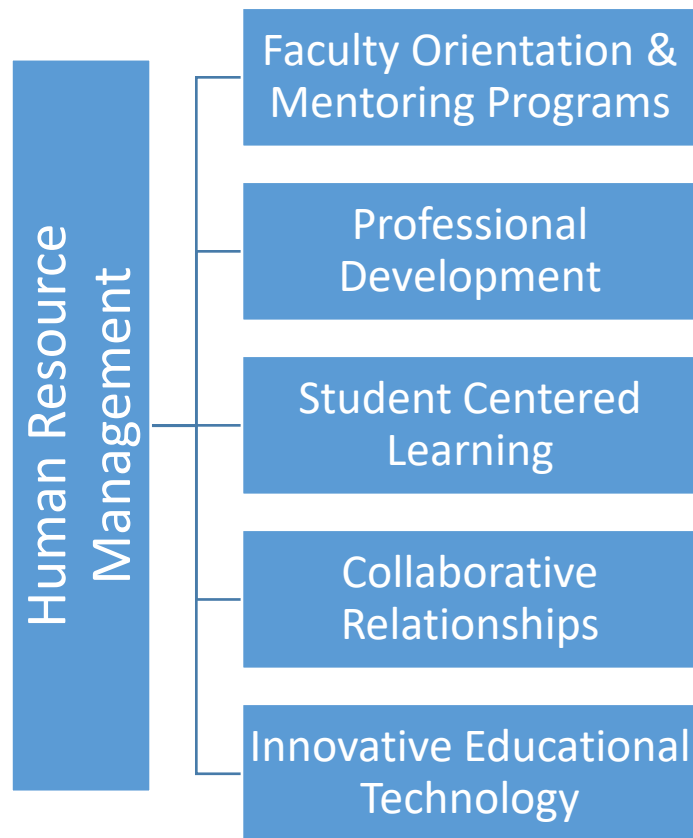
Last Reviewed: June 2023

Subject: CHPW Center for Best Practices in Teaching and Learning (CBPTL) Organizational Framework

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Center for Best Practices in Teaching and Learning (CBPTL) Organizational Framework



Definitions of Framework Components

1. Faculty Orientation and Mentoring Programs- The Orientation for New Educators (ONE) Program provides a structured, staggered orientation to newly hired novice educators. Specific goals of ONE include:

- Expand structured delivery of orientation to novice and newly hired educators.
- Stagger the ONE program over a period of 1 academic year.
- Promote an organized mentoring program.
- Identify and incorporate effective communication strategies with new faculty.
- Expand faculty resources within the CBPTL.
- Provide formal orientation for adjunct and full-time faculty members.

Mentoring is an ongoing process with an assigned mentor and any informal mentors. The goal of the mentor/mentee relationship is to promote collaboration between the newly hired full-time faculty mentee novice and a more experienced faculty member. The camaraderie established during this structured affiliation is believed to facilitate transition to the role of nurse educator at the institution, improve perceived self-confidence during a time of significant change, foster success in the role of educator, and encourage retention of nurse educators in the academic setting. (NLN, 2006)

2. Professional Development- Professional development within the CHPW is designed to facilitate the development of new educators as they transition to academia. The Highly Effective Teacher (HET) project serves as the underpinning of professional development and encourages lifelong learning of novice and experienced educators. The overarching goal of the HET Project is active participation in a series of professional development workshops during the academic year. The overarching goals of the HET Project include but are not limited to:

- Facilitate the transition from the role of clinical expert to novice educator.
- Promote the professional development of educators.
- Encourage lifelong learning, collaboration and contributorship.
- Increase perceived self-efficacy in the role of a new educator.
- Foster desirable attributes of effective new educators.

3. Student Centered Learning-The student-centered learning component of the CBPTL focuses on academic success and fostering leadership and civic engagement of students. This is achieved through diverse avenues and includes educational programs by Subject Matter Experts (SME's) which focus on testing and successful learning strategies.

4. Collaborative Relationships-Collaboration is encouraged as an integral part of the curriculum to foster student learning experiences. Various relationships are fostered both internally at JSU and with external agencies to facilitate student learning. These relationships provide students with unique learning experiences, the ability to participate in scholarly research and to form long standing relationships with team members.

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- 5. Innovative Educational Technology**-The educational technology component of the CBPTL includes opportunities for course revision and development based upon best practices in online learning and instructional design. Collaboration is encouraged with the JSU Educational Technology and Support at JSU and includes access to a hybrid lending library which houses resources to support teaching and learning.

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Last Revised: February 2024

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Last Reviewed: February 2024

Subject: CHPW Policy and Procedure for Promotion

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Policy and Procedure for Tenure and Promotion

I. Policy and Procedure for Promotion

All policies, procedures, and actions regarding faculty promotion shall be in compliance with the rules and regulations stated in the University Faculty Handbook. The schedule for the promotion process is contained in the planning calendar, available on the Faculty Resource page of the Academic Affairs homepage.

II. Guidelines for Promotion and Tenure

This document guides faculty members as they prepare to meet scholarship in consideration for promotion or tenure in the Jacksonville State University (JSU) College of Health Professions and Wellness (CHPW). The document also serves as a guide for department chairs as they evaluate faculty. The document's basis is to serve as a guideline for current and accepted practices unique to the discipline of health professions and wellness. The expectations for faculty achievement include effectiveness in teaching, scholarly and creative endeavors, service, and collegiality. Not all faculty members will excel in all areas, but each should actively participate and meet the minimum criteria for the appropriate rank. Faculty in the instructor position applying for promotion to distinguished instructor shall demonstrate effectiveness in teaching, service, and collegiality, as their rank does not include scholarship.

There are minimum requirements for faculty members to achieve in each category as outlined in the JSU faculty handbook. These are expectations all faculty must meet as a part of their role. Faculty members who do not meet minimum requirements will not be considered for promotion and/or tenure. The department head/associate dean will determine if a faculty member meets the minimum requirements before the candidate submits their materials.

Evidence must show continued and sustained progress and productivity in each category, and data must not be over five years old. However, the candidate's curriculum vitae should be complete and show consistent productivity over one's professional career. The quantity, quality, and consistency of all professional activities are a part of the evaluation process for those seeking promotion and/or tenure. The individual candidates are responsible for demonstrating effectiveness within their unique responsibilities. The department head, associate dean with approval from the dean can make exceptions to promotion/tenure criteria if they determine that the faculty member's performance in one or more areas is exceptionally outstanding.

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Faculty in Instructor Positions

Faculty members who choose to apply for promotion to distinguished instructor should follow the JSU Faculty Handbook guidelines.

Faculty in Tenure-Track or Tenured Positions

Faculty members must follow the JSU Faculty Handbook guidelines for applying for promotion or tenure, complete and maintain scholarship within their discipline, submit appropriate documentation, and adhere to the prescribed dates. Specific CHPW criteria are below.

To advance in rank for promotion, faculty must achieve scholarship criteria at the appropriate level, which will be determined by the department head, associate dean, and dean.

Teaching

Refer to the faculty handbook for teaching criteria.

Scholarship (Not applicable to instructor positions)

Faculty achievement required for promotion and/or tenure includes evidence of scholarly activities or creative performance within their discipline. These intellectual activities vary from discipline to discipline. Scholarship is any discipline-specific professional activity in which the faculty member strives to advance education and knowledge. Examples may include but are not limited to the following: (Other opportunities may be recognized and approved by department head/associate dean and dean)

- Published article in peer-reviewed journal.
- Evidence of research activities.
- Principal or assistant research investigator.
- Principal or assistant grant recipient.
- Professional surveys (developed, administered, analyzed).
- Published book.
- Published book chapter.
- Published pamphlet or another professional document.
- Published PowerPoint/Case study for professional entity.
- Published policy paper for professional entity.
- Edited professional journal article.
- Edited book.
- Edited textbook/chapter.
- Textbook/chapter review.
- Professional website development/editing.
- Published book review.

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- Professional abstract/poster review.
- Peer reviewer for scholarly journal.
- Earning or renewal of discipline-specific or specialty certification.
- Quality Matters peer reviewer certification.
- CEC/CEU presentation.
- Professional consultation.
- Paper or poster presentation at a discipline-specific professional conference.
- Invited Panel discussion participant at a discipline conference or workshop.
- Expert legal witness.
- Submission or acceptance of an external grant for discipline-specific research.
- Written peer-reviewed documents created while serving in a professional organization.
- Evidence of significant contribution to full or mid-point accreditation self-study.
- Evidence of approved professional practice.
- Provision of client care or other clinical activities (other than in faculty role).
- Supervision of practice-based student projects

Service

Refer to the faculty handbook for service criteria.

Collegiality

Refer to the faculty handbook for collegiality criteria.

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Document No.: I:15.00

Last Revised: February 2024

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Subject: CHPW Role of Faculty Mentor

Committee: Faculty Affairs Committee

Approved: Dean Tracey Matthews

CHPW Role of a Faculty Mentor

A mentor is to be an experienced faculty member assigned by the ONE (Orientation of New Educators) department heads, program directors and/or coordinators whose responsibilities are to facilitate the transition of a new faculty member into the academic role. The faculty mentor may be a person who is not a part of the course/courses in which the new faculty member is involved and who can assure that core faculty requirements/expectations are relayed to the mentee. These core faculty responsibilities/expectations are not to be confused with specific course details. Serving in the mentor role is considered part of a faculty member's service to the College of Health Professions and Wellness (CHPW).

The mentorship should occur over two semesters, or as directed by the ONE coordinator(s). The mentor is expected to meet with the new faculty member **no less than three times per semester** (beginning, midterm, and at the end of each semester) during the prescribed time of mentorship.

It is the responsibility of the faculty mentor to ensure that a new faculty member is adequately acclimated to the environment and policies of the CHPW and to provide oversight for completion of the new faculty's orientation checklist. Mentoring includes development of collegial relationships which are characterized by civility and professionalism and supports activities which introduce the mentee to the academic culture such as what it is like to begin and end a semester, time management as a faculty member, interacting with students, valuing of email communication between faculty members, emphasizing the importance of faculty meetings as means of dissemination of essential information for ongoing curriculum implementation. **(Refer to items on the Mentor Evaluation Attachment A)**

At the end of the designated mentorship, each new faculty will evaluate the effectiveness of the mentoring received. This evaluation will be submitted to the ONE coordinator(s). Data will be analyzed and included in the ONE program annual report submitted to the Center for Best Practices in Teaching and Learning (CBPTL) and the CHPW through Compliance Assist.

See Attachment A for Mentor Evaluation.

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Attachment A

Mentor Evaluation

Name of New Faculty Completing Evaluation: _____

Name of Mentor Faculty: _____

1. My assigned mentor assisted me in becoming acclimated to the JSU environment, policies, and procedures:

Strongly disagree (1) Disagree (2) Neutral (3) Agree (4) Strongly Agree (5)

2. My assigned mentor was available and accessible:

Strongly disagree (1) Disagree (2) Neutral (3) Agree (4) Strongly Agree (5)

If not, why do you feel your mentor was unavailable?

3. My assigned mentor assisted with easing the transition to teaching in the CHPW:

Strongly disagree (1) Disagree (2) Neutral (3) Agree (4) Strongly Agree (5)

If not, why?

4. I would recommend this individual for future mentoring assignments:

Strongly disagree (1) Disagree (2) Neutral (3) Agree (4) Strongly Agree (5)

5. How long were you on the job before your mentor initiated the first meeting with you?

6. Approximately how many times did your mentor meet with you?

7. Please list any other faculty that you like to recognize for serving in a “mentor” capacity.

Comments and Suggestions:

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Last Reviewed: February 2024

Subject: CHPW Faculty Practice Guidelines

Committee: Faculty Affairs Committee

Approved: Dean Tracey Matthews

CHPW Faculty Practice Guidelines

Jacksonville State University (JSU) College of Health Professions and Wellness (CHPW) is committed to the support of faculty practice initiatives that contribute to the progression of the university, college, and department missions of teaching, scholarship, and service. The various disciplines within the CHPW may have expectations for practice specific to the professional accrediting body of each program. In these cases, the Dean/Associate Dean of the CHPW is responsible for ensuring accreditation requirements are met as they relate to practice. Faculty practice hours will be negotiated during yearly evaluations between administration and the faculty member and must be approved by the Dean/Associate Dean. The proposal should be submitted prior to faculty workload assignments to provide necessary time for workload adjustments. Faculty practice is subject to the approval of the Dean/Associate Dean and based on availability and teaching needs in addition to accreditation requirements. Faculty practice should also be included within the faculty member's yearly goals for service with documentation of faculty practice progress as a component of the evaluative process. Faculty practice procedures outlined in Attachment A should be followed.

Nurse Practitioner Faculty Practice Guidelines

JSU supports the recommendation of the Commission on Collegiate Nursing Education (CCNE) for faculty who hold a current license as a nurse practitioner (NP) and teach in clinical courses. Those faculty are required to pursue and maintain national certification specific to their specialty.

Faculty practice may be maintained by clinical practice within the healthcare environment or via alternative routes such as clinical or community partnerships, consultation, etc. (as approved by the Dean/Associate Dean of the CHPW). The Dean/Associate Dean will provide guidance for implementation of faculty practice with final approval by the Dean.

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Attachment A

Faculty Practice Procedure

The following parameters have been developed to augment the expectations for development and implementation of an individual faculty practice plan.

1. The faculty member's primary obligation is to JSU and designated workload responsibilities. Faculty practice should not exceed 10% for non-NP faculty unless negotiated with Dean/Associate Dean. NP faculty should not exceed 20% of faculty workload or as negotiated with Dean/Associate Dean. An individual faculty practice plan (Attachment B) should be structured and completed in advance of the academic year for intended implementation and the plan submitted to the Dean/Associate Dean of the CHPW annually during the faculty member's yearly evaluation.
2. The Dean/Associate Dean will determine final approval of plan.
3. Faculty practice may include the following:
 - a. Consulting activities to clinical agencies, colleges of nursing, and health related public, private, and government agencies on health-related practice or evidence to support practice.
 - b. Clinical practice in various agencies

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Attachment B

Application for Faculty Practice

Please list below the appropriate faculty practice activities intended for the upcoming academic year. All pertinent information and documentation must be attached. **Return this form and the attached documentation to your Dean/Associate Dean's office prior to the date of annual evaluation at end** of each academic year. Refer to faculty practice parameters in Attachment A for examples.

Name: _____

Description of planned activities or proposal:

Projected Schedule: Include travel dates.

Coverage for JSU responsibilities (e.g., if faculty practice activities are occurring during the standard work week, how are JSU responsibilities related to teaching and service covered):

Signature of faculty applicant: _____

Signature of Dean/Associate Dean: _____

Approval Date: _____

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Document No.: I:17.00

Last Revised: February 2024

Adoption Date: July 1986

Last Reviewed: February 2024

Subject: CHPW Faculty Annual Review Policy and Procedure

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Faculty Annual Review Policy and Procedure

Purpose

An annual review is the predominant means for ensuring congruence between the faculty members' goals and performance and the needs of the College of Health Professions and Wellness (CHPW) academic departments, CHPW, and university. In addition, the faculty annual review (FAR) creates a data source for decisions about professional development plans, promotion, and tenure. The evaluative authority, i.e., Department Head, Program Director, Associate Dean, or Dean will evaluate each faculty member on an annual basis and evaluate goals, outcomes and provide constructive feedback to assist faculty in continuous improvement. Any deficiencies will be addressed with a plan for improvement.

Professional staff are evaluated via the Human Resources evaluation process. This includes some faculty with administrative rank (e.g., 12-month track coordinators, etc.). Faculty in these roles should seek direction from the Department Head or Program Director regarding the appropriate process. Administrators on a tenure-track may be required to complete the FAR process and the Human Resources process simultaneously.

Process

Each faculty and professional staff member will participate in the summative evaluation process annually. Formative evaluations will occur as needed throughout the academic year. Student evaluations are collected near the end of each semester via Evaluation Kit. Student evaluations serve as formative data for the faculty throughout the academic year. Summaries of student evaluations are review during the FAR.

The components of the FAR process are as follows: (1) student evaluations via Evaluation Kit (2) completion of critical evaluation of self (3) review of goals (4) update of digital measures and (4) review by the evaluative authority. Those in internally appointed Director or Coordinator roles would also include faculty and staff evaluations as well as the critical evaluation of self-version specific to those in leadership roles. Faculty requesting workload adjustments due to doctoral studies would also need to complete the Memorandum of Agreement for Workload Adjustments (See Attachment C).

Tenure-track Faculty up for the third-year review will also be required to submit a portfolio of performance inclusive of evidence of teaching, scholarship, service, and community engagement for the prior three years (Refer to JSU Faculty Handbook, Promotion and Tenure Guidelines).

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The third-year review will serve to inform faculty of their progress toward meeting tenure and/or promotion goals.

Critical Evaluation of Self

Prior to meeting with their evaluative authority, faculty should complete the Critical Evaluation of Self. This allows faculty to critically appraise their goals and summative outcomes prior to the FAR and set appropriate goals for the upcoming year (See Attachment A). A portion of workload allocation is dedicated to the leadership role. Anyone requesting a workload adjustment for professional development should fill out Attachment C.

Goal Setting

All faculty should set meaningful and measurable goals for the upcoming academic year. These goals should not be reflective of expected job responsibilities but those areas in need of improvement or in which the faculty member designates as priorities for the upcoming academic year (See Attachment B).

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Attachment A

Jacksonville State University
College of Health Professions and Wellness
Faculty Critical Evaluation of Self

Name:

Date:

1. Goals

a. For the past academic year, my goals for teaching, scholarship, and service were:

Met _____

Partially Met _____

Not Met _____

b. Please provide a brief synopsis as to the status of your goals, addressing each component of the tripartite role and providing one example of how a goal was met for that specific area.

- Teaching

- Service:

- Scholarly:

2. Teaching Effectiveness Self-Reflection

Review course and faculty evaluation data for all courses taught for the previous academic year (including last spring, summer, and fall). List courses and course evaluation summary score below. Do scores meet the benchmark of 4/5?

Courses	Spring	Summer	Fall

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3. Scholarship Self-Reflection

What was your most significant area of growth related to scholarship this year? Please list any publications/presentations/grants/projects in which you have participated. Discuss plans for scholarship related to rank.

4. Service Self-Reflection

Reflect on your most significant service activity this year, including Community Engagement. Please list service activities in which you have participated.

5. Professional Behavior and Collegiality Self-Reflection

Include any conflicts/situations between faculty/students.

6. Future Requests and Discussion

- a. **What courses do you prefer to teach?**
- b. **How can administration best support you?**
- c. **Do you have any specific ideas related to improvement of our program?**
- d. **Do you have any concerns to express?**

7. Faculty receiving credit for administrative roles: Please provide a reflection on administrative responsibilities for this year and discuss how goals from the previous year were met.

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Attachment B

Jacksonville State University
College of Health Professions and Wellness
Faculty Goals

Name:

Year:

I. Teaching (%)

II. Service (%)

III. Scholarly (%)

IV. Community Engagement (%)

V. Faculty Practice (%) (if applicable)

VI. Administrative Roles (%) (if applicable)

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Department Head/Associate Dean Summary/Comments:

Faculty's Comments: (Faculty may provide additional comments in response to evaluation by Department Head/Associate Dean).

By signing below, I acknowledge that I have participated in the annual review process and have received a copy of the review.

Department Head/Associate Dean Signature

Date

Faculty's Signature

Date

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Attachment C

Jacksonville State University

College of Health Professions and Wellness

Memorandum of Agreement for Workload Adjustment

Philosophy

The process of continuous improvement includes, among other things, faculty development through doctoral study or completion of the terminal degree. Faculty in doctoral study experience personal and professional growth which should translate to improved teaching, service, and scholarly activities for Jacksonville State University (JSU). Believing that doctoral education is beneficial to the faculty member, students, and the CHPW efforts will be made to support and encourage full time faculty pursuing a terminal degree. Support may be through adjusted teaching assignments and/or workload adjustments.

Foundational Premises

As requests are considered and decisions are made regarding teaching assignments and/or workload adjustments to support doctoral study, principles that must be honored include:

1. The faculty member's priority responsibility is to JSU, not to their terminal degree program. Should the quality of teaching, service, and/or scholarly activities become adversely affected, adjustments will cease and not be granted in the future.
2. The needs and resources of the CHPW determine adjustments in teaching assignments or workload.
3. Workload and/or scheduling adjustments may be made when feasible but are not guaranteed.
4. Adjusting teaching assignments or workload to support doctoral study is an investment made by JSU with the expectation that there will be a return on the investment. If workload is reduced or altered to accommodate doctoral study, the faculty member must agree to remain at JSU an equivalent time as pay back. If a faculty member is given 2 years of reduced/altered workload for doctoral study, it is expected the faculty member will stay at JSU for at least 2 years after degree completion.
5. Faculty wishing consideration of teaching assignment or workload for doctoral study should submit a written request documenting acceptance to doctoral study, the program of study, and expected time of graduation. If teaching or workload adjustments are made, verification of successful completion of doctoral study must be submitted upon the **completion of each term**. Student copies of transcripts suffice for semester-by-semester verification of doctoral work, but an official transcript must be submitted upon completion of the program.
6. Specific accommodations for individual faculty will be attached to this agreement.
7. Upon completion of the doctoral degree, faculty will support a portfolio and request for promotion to a tenure-track. Approval of promotion to a tenure track position may be dependent on vacant and available tenure track positions.

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I have read and agree to the terms of this Memorandum of Agreement.

Faculty Member

Date

Department Head/Associate Dean

Date

Teaching Assignments:

Committee Assignments:

Advisement:

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Document No.: I:18.00

Last Reviewed: June 2023

Adoption Date: April 1983

Last Revised: June 2018

Subject: CHPW Procedure for Loan of Laboratory Equipment

Committee: Department Head/Supervisor

Approved: Dean Tracey Matthews

CHPW Procedure for Loan of Laboratory Equipment

1. Any faculty member who desires to borrow equipment from the CHPW laboratories must negotiate loan of equipment through lab coordinators or designee.
2. The lab coordinators or designee will maintain a lab request form on all equipment borrowed by faculty.
3. The faculty will list all equipment borrowed on a lab request form and sign it.
4. The lab coordinators or designee will remove the lab request form when the equipment is returned.
5. Students are allowed to borrow equipment from the lab with faculty approval.

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Document No.: I:19.00

Last Reviewed: February 2024

Adoption Date: May 2004

Last Revised: February 2024

Subject: CHPW Timeframe for Maintaining Hardcopy Student Materials

Committee: Faculty Affairs Committee

Approved: Dean Tracey Matthews

CHPW Timeframe for Maintaining Hardcopy of Student Materials

Faculty should maintain a hardcopy student material for a minimum of three calendar years or dependent on program accreditation standards.

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Document No.: I:21.00

Last Reviewed: June 2023

Adoption Date: 1979

Last Revised: November 2020

Subject: CHPW Student Grievance Appeal Policy

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Student Grievance Appeal Policy

An appeal challenges a decision that has been made; a grievance is a complaint seeking a resolution to a specific problem. The same procedure is followed for either.

I. Student Initiated Appeals and Grievances

The appeal and grievance procedures are each divided into two phases, an “Informal Phase” and a “Formal Phase”. The Informal Phase is intended to attempt to resolve an issue through meeting and discussion with the faculty member or members involved and the Course Coordinator (if applicable). Should the student be dissatisfied with the results obtained in the Informal Phase, a formal appeal may be made. In such case, the procedures outlined in the “Formal Phase” shall be followed.

Informal Phase.

1. A student wishing to appeal a decision or discuss a grievance or complaint shall, within three (3) working days of the event/issue, provide an account in writing and arrange to speak with the faculty member(s) faculty member or Course Coordinator (if applicable) involved in the issue. If the issue cannot be resolved at this level, the student may initiate an appeal and the resolution procedure then enters the Formal Phase. The faculty member(s) and Course Coordinator (if applicable) shall compile a written report of the issue or issues presented, a summary of the facts, a summary of any attempts to resolve the issue and the ultimate decision made and submit this report to the Program Director/ Program Coordinator and Department Head/Associate Dean.

Formal Phase.

1. Completion of the Informal Phase by a student is mandatory and shall be completed before an appeal can be made. A student wishing to file a formal appeal of a decision or grievance/complaint must contact the Program Director/ Program Coordinator and Department Head/Associate Dean in writing within three (3) working days of the meeting with the faculty/Course Coordinator (if applicable). The Program Director/Coordinator shall ensure the student has access to the Appeal/Grievance Process. ** Note: for Education programs, appeals must be conducted using the College of Education and Professional Studies procedures.
2. The student must submit a written account of the relevant issue or issues involved to the Program Director/ Program Coordinator and Department Head/Associate Dean. Only information presented by the student at this time can be used in any phase of the appeal. The Program Director/ Program Coordinator and Department Head/Associate Dean shall

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thereafter meet with the student, review the appeal or grievance as well as the record of the Informal Phase, and attempt to resolve the issue. If the appeal or grievance is not resolved, the student shall be informed of his/her right to meet with the Dean. A student wishing to have a decision reviewed by the Dean of the CHPW shall provide within three (3) working days of being informed of the decision the following: a written request for review to the Office of the Dean, a summary of the prior proceedings by the Faculty/Course Coordinator, Program Director/ Program Coordinator and Department Head/Associate Dean along with the student's written account. The Dean shall thereafter set a time and place to meet with the student.

3. If the appeal or grievance is pursued, the student will meet with the Dean. The Dean may, but is not required to, include members of the faculty and staff and the University Attorney. Information from the student, faculty, Course Coordinator (if applicable), Program Director/Chief Nursing Administrator and/or Department Head will be reviewed. Only information provided in the student's written account and information from the review by the Faculty/Course Coordinator, Program Director Associate Dean, Department Head will be allowed. The decision of the Dean shall be final.

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Document No.: I:22.00

Last Reviewed: June 2023

Adoption Date: January 1984

Last Revised: November 2020

Subject: CHPW Illness, Injury, Pregnancy or Other Health Condition

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Illness, Injury, Pregnancy, or Other Health Condition

If as a result of injury, illness, pregnancy, or other health conditions, should a student be unable to perform the essential functions or complete the requirements of a course, the affected student should immediately request a conference with their instructor or clinical supervisor and advisor. The availability of any reasonable accommodation will be explored and to the extent feasible implemented. The University reserves the right in such situations to request a physician or other healthcare professional to certify any necessary restrictions.

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Document No.: I:23.00

Last Reviewed: June 2023

Adoption Date: October 2000

Last Revised: June 2018

Subject: CHPW: Guidelines for Professional Use of Technological Devices in Healthcare

Committee: Leadership Team

Approved: Dean Tracey Matthews

CHPW: Guidelines for Professional Use of Technological Devices in Healthcare

Technological devices are increasingly an important tool in education and healthcare as a means of accessing information and calculating equations commonly used in healthcare. However, these devices can be inappropriate and unprofessional when utilized in improper forums. The College of Health Professions and Wellness maintains the right to regulate the use of these devices in class, laboratory, and clinical settings as outlined in this policy. For the purpose of this policy, technological devices are defined as any technological device used for communication, retrieval, or storage of information, accessing the internet, or creating photographs/videos. Examples of such devices are, but not limited to cellular phones, or tablet/laptop computers. No cellular phones are to be used in the classroom or lab settings unless approved by the course instructor for educational purposes. Cellular phones or approved technological devices may be used in clinical settings for clinical resource purposes per instructor and agency guidelines and may be accessed in non-patient care areas only. Students are strictly prohibited from using cell phones for personal communication (calls or text messages) in a clinical setting unless explicitly approved by the instructor. Cellular phones or any electronic device shall not be used for taking photographs/videos/recordings of any kind in a clinical setting. The storage of data on any technological device that compromises patient privacy or confidentiality is strictly prohibited. Cellular phones brought into class, lab, or clinical must remain in a non-audible, vibration mode or the OFF position.

All unapproved electronic devices are strictly forbidden in testing or test review settings.

Information about recordings/videos of lectures, presentations, and laboratory demonstration can be found in I:25.00 Audio Video Recording Policy.

Violations of the above policy may result in, but not limited to, additional assignments, zero credit for a test or assignment, course/clinical failure, or dismissal from their academic program.

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Document No.: I:24.00

Last Reviewed: June 2023

Adoption Date: 1994

Last Revised: June 2018

Subject: CHPW of Understanding Student Handbook

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Letter of Understanding Student Handbook

During orientation, students in the specific programs, are required to review the program specific handbook and acknowledge understanding by signing a form that is referenced in their student handbook.

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Document No.: I:25.00

Last Reviewed: June 2023

Adoption Date: May 14, 1999

Last Revised: June 2018

Subject: CHPW Audio and Video Recording Policy

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Audio and Video Recording Policy

The purpose of this policy is to establish the procedures and limitations related to audio/video recording of classroom lectures, presentations, and laboratory demonstrations.

It is the policy of the CHPW that students can participate in audio or visual recording of lectures, presentations, or laboratory demonstrations within strict guidelines. Recording of lectures, presentations, or laboratory presentations is exclusively authorized for the purposes of individual or group study with other students enrolled in the same class. Any audio/visual recording or edited portion of the recording shall not be reproduced, transferred, or uploaded to any publicly accessible internet environment such as, but not limited to, social media sites, internet blogs, or live podcasts (see CHPW Professionalism in Social Media Policy No.: I:27.00). Retention of recordings is prohibited. Upon completion of the associated course, students shall destroy all recordings unless specific permission is obtained from the course instructor. Violations of this policy may result in punitive action, including dismissal from the nursing program.

The recording of lectures, presentations, or laboratory demonstrations will be the sole responsibility of the student. Audio/Visual equipment used for recording must not present any disruption of normal class activities. Course instructors reserve the right to deny any recording device deemed to be intrusive, distracting, or otherwise incompatible with normal class activities.

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Document No.: I:26.00

Last Reviewed: June 2023

Adoption Date: September 1998

Last Revised: November 2020

Subject: CHPW Statement of Understanding Regarding EPP

Committee: CHPW Curriculum Committee

Approved: Dean Tracey Matthews

CHPW Statement of Understanding Regarding EPP

ETS Proficiency Profile

Prior to graduating all students must take the ETS Proficiency Profile (EPP). The ETS Proficiency Profile assesses four core skill areas —critical thinking, reading, writing and mathematics—in a single multiple-choice test. It measures proficiency in critical thinking, reading, writing and mathematics in the context of humanities, social sciences and natural sciences, and academic skills developed, as opposed to subject knowledge taught, in general education courses.

This test must be **COMPLETED** prior to graduation. Students should consult their specific academic programs for specific completion dates. The exam is administered online and is non-proctored. The EPP examination is a mandatory graduation requirement for JSU. The Graduation Certification Advisor will email the EPP instructions and information during student's final semester.

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Attachment A

Statement of Understanding Regarding EPP

I have been advised and fully understand that I must take the ETS Proficiency Profile (EPP). The ETS Proficiency Profile assesses four core skill areas – critical thinking, reading, writing and mathematics – in a single test. I understand the ETS measures proficiency in these areas in the context of humanities, social sciences and natural sciences, and academic skills developed, as opposed to subject knowledge taught, in general education courses.

Failure to comply with these guidelines may prevent my graduating as scheduled.

Signature of Student

Date

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Document No.: I.27.00

Last Reviewed: June 2023

Adoption Date: April 2012

Last Revised: June 2018

Subject: CHPW Professionalism in Social Media

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Professionalism in Social Media

The purpose of this policy is to help clarify how best to protect the personal and professional reputations and privacy of our institution, employees, students, clinical partners, and patients. This policy is not intended to supersede any present or future policy of Jacksonville State University (JSU) regarding professional expectations, information technology, electronic communication, or social media.

Employees and students at the CHPW are liable for all forms of communication. The same laws, professional expectations, and guidelines for interacting with employees, students, parents, alumni, donors, media, clinical partners and other university constituents apply to all forms of communication.

Definition of Social Media: For the purposes of this policy, social media is defined as any form of online publication or presence that allows end users to engage in conversations in or around the content of an internet website. Examples include, but are not limited to, Instagram, LinkedIn, Twitter, Facebook, YouTube, blogs, and wikis. The absence of, or lack of explicit reference to a specific social media site, does not limit the extent of the application of this policy.

Definition of Electronic Communication: any electronic transfer of signs, signals, writing, images, sounds, data, or intelligence of any nature transmitted in whole or in part via electronic device. This includes, but not limited to, cellular phones, computers, texting devices, facsimile (Fax), data storage devices, or video and voice recordings (unless otherwise specified in the Audio and Visual Recording Policy No.: I:25.00).

Protect confidential and proprietary information: Do not post confidential or proprietary information about JSU, the CHPW, students, employees, clinical partner agencies, patients, or alumni. Employees and students must follow applicable federal requirements such as FERPA and HIPAA regulations. Employees and students who share confidential information do so at the risk of disciplinary action, up to, and including termination/dismissal from the program. All HIPAA and FERPA regulations apply to social media and electronic communications.

Protect Institutional Voice: When utilizing social media and electronic communication, identify your views as your own. It should be clear that you are not speaking for JSU/CHPW.

Faculty and student interaction: Faculty may implement and encourage the use of social media in their courses but may not require a student to join or participate in a social media site. Required interaction outside of the classroom must occur within a university-approved format.

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Faculty may accept connections to students in social media contexts at their discretion but may not initiate this connection without prior approval from the appropriate program director and Dean.

Prohibited communication: Faculty, staff, and students are prohibited from making any reference to clinical activities in social media forums and electronic communication. Attempts to avoid explicit identification of a clinical partner agency, associate, agency location, patient, or JSU entity should not be perceived as a guarantee of anonymity or compliance with HIPAA, FERPA, or this policy. For example, avoiding the use of a patient's or clinical agency's specific name does not guarantee compliance with this policy. Communication related to clinical activities, as described above, can result in disciplinary action, up to, and including termination/dismissal from the program.

Violations of this policy also result in a violation of the Professional Scholar's Code and will be handled in accordance with that policy.

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Document No.: I.28.00

Last Reviewed: November 2020

Last revised: June 2018

Subject: CHPW Professional Scholars' Code

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Professional Scholars' Code

I. Professional Scholars' Code

A. Introduction

The academic community of student and faculty at the College of Health Professions and Wellness (CHPW) strives to develop, sustain, and protect an environment of honesty, trust and respect. Students within the system receive the benefits of the academic pursuit of knowledge, free from the obstacles of academic dishonesty. The Professional Scholar's Code demands that students act with integrity in all their endeavors. Exhibiting honesty in academic pursuits and reporting violations of the Professional Scholar's Code will encourage others to emulate integrity in the nursing profession. Every student who approaches their studies with honesty and forthrightness suffers when another student attains an unfair advantage through academic dishonesty. Most importantly, the safety of patients is jeopardized when students are dishonest in completing program requirements (The University of Florida, 2006, p. 5).

B. Dissemination and Clarification

JSU Nursing

The nursing profession is one of highest distinction that promotes honesty and integrity. The JSU Nursing requires students and faculty to comply with the standards of conduct deemed appropriate for the nursing profession by the American Association of Colleges of Nursing Essentials of Baccalaureate Education, the American Association of Colleges of Nursing Essentials of Masters Education, the American Nurses Association's Code of Ethics, as well as those delineated in the Professional Scholars' Code of the JSU Nursing.

1. All students and faculty in the JSU Nursing shall be informed of the Professional Scholar's Code upon registration and/or employment in the department and thereby assume the responsibility of abiding by the spirit of honesty in their academic pursuits. The establishment of a Professional Scholars' Code is not intended to be an indication that academic dishonesty behavior is commonplace at this institution. The Professional Scholars' Code is a method of reaffirming the existing code of honor which has prevailed at this department since its inception.

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- a. The Scholars' Code shall be part of the student handbooks, course shells and Faculty/Staff Policy and Procedures Manual. It is the responsibility of students, faculty, and staff to be familiar with this policy. Students and faculty must indicate acknowledgement of this policy via Attachment A upon admission or hire. This document will be placed in individual's file and students will mark electronically reviewed in course shells in subsequent semesters.
- b. It shall be the responsibility of each faculty member to inform students of the Professional Scholars' Code as part of the course orientation (live or electronic) at the beginning of every semester, through the course syllabus/notebook or other effective means. Faculty shall support the principles of academic integrity and fairness through course policies and procedures.
- c. The appropriate officials and offices shall conduct an orientation for all nursing students, incoming nursing faculty to familiarize these individuals with the provisions of the Scholars' Code prior to attending classes or teaching.

Department of Respiratory Therapy

The Department of Respiratory Therapy requires students and faculty to comply with the standards of conduct deemed appropriate for the profession by the American Association for Respiratory Care, the National Board for Respiratory Care, the Committee on Accreditation for Respiratory Care, and the Alabama State Board for Respiratory Therapy. All respiratory therapy students are also held to the standards delineated in the Professional Scholars' Code of the Department of Respiratory Therapy.

1. All students and faculty in the Department of Respiratory Therapy shall be informed of the Professional Scholar's Code upon registration and/or employment in the department and thereby assume the responsibility of abiding by the spirit of honesty in their academic pursuits. The establishment of a Professional Scholars' Code is not intended to be an indication that academic dishonesty behavior is commonplace at this institution. The Professional Scholars' Code is a method of reaffirming the existing code of honor which has prevailed at this department since its inception.
 - a. The Scholars' Code shall be part of the student handbooks, course shells and Faculty/Staff Policy and Procedures Manual. It is the responsibility of students, faculty, and staff to be familiar with this policy. Students and faculty must indicate acknowledgement of this policy via Attachment A upon admission or hire. This document will be placed in individual's file and students will mark electronically reviewed in course shells in subsequent semesters.

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b. It shall be the responsibility of each faculty member to inform students of the Professional Scholars' Code as part of the course orientation (live or electronic) at the beginning of every semester, through the course syllabus or other effective means. Faculty shall support the principles of academic integrity and fairness through course policies and procedures.

c. The appropriate officials and offices shall conduct an orientation for all students and incoming faculty to familiarize these individuals with the provisions of the Scholars' Code prior to attending classes or teaching.

II. Violations of Professional Scholar's Code

Any action by students revealing dishonesty is considered a violation of the Professional Scholar's Code. Actions of this nature should be reported to the course faculty.

A. Violations of Academic Honesty

Though the following list does not include all of the possible violations of the Professional Scholars' Code, it is indicative of the types of actions which must be prohibited in order to maintain academic integrity at this University.

1. Dishonesty on an examination, problem solution, exercise, or assignment which is offered by the student in satisfaction of course requirements or as extra credit is a violation of the Professional Scholars' Code. Dishonesty occurs when a student gives, receives, makes, or uses unauthorized assistance. Dishonesty includes but is not limited to the following: using notes or cheat sheets, copying another individual's work, having another person take an examination for the student, giving false reasons for absence or tardiness, or improper use of electronic equipment. These actions violate the principles of the Professional Scholars' Code.
2. Plagiarism is the act of passing off the ideas, works, and writings of another as one's own. Its most blatant form consists of copying verbatim the work of another without citation. This most obvious type of plagiarism requires a degree of premeditation and careful planning, but plagiarism can be the result of carelessness, negligence, or ignorance of acceptable forms of citation. An act of plagiarism includes copying of another person's ideas or words, interspersing one's own words within another's work, paraphrasing another's work (using ideas or theory but rewriting the words), fabricating sources of data, and other uses of another's ideas or words without acknowledgement (A.T. Still University, Student Handbook, 2008). It is incumbent on each student to learn the proper forms of citation and to exercise due caution in the preparation of papers and assignments. If there are questions regarding how to apply the Professional Scholars' Code in a particular situation, the student should request immediate clarification from the instructor.

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3. The submission of commercially prepared papers, reports, or themes in satisfaction of course requirements are prohibited. The use of another's academic work wholly, or in part, as a means of satisfying course requirements is also prohibited. Falsifying or misrepresenting the results of a research project or study is a violation of the Professional Scholars' Code.
4. Examinations, practical exercises, and problem solutions, whether administered in the classroom or given in a take-home form should be the work of the individual who submits them. Unless it is intended to be a take home test, the exercises shall not be removed from the classroom/lab/computer lab. **STUDENTS SHALL NOT SHARE TEST INFORMATION/EXAM QUESTIONS WITH ANY OTHER STUDENTS DURING OR AFTER THE ADMINISTRATION OF AN EXAMINATION.**
5. Group work and other forms of collaboration may be authorized by an instructor for a specific assignment. The presumption remains, however, that unless otherwise permitted and specified by the instructor, all academic work is to be an individual effort. In this spirit, the Professional Scholars' Code prohibits both the giving and receiving of unauthorized assistance.
6. Audio or visual recording of lectures, presentations, or laboratory demonstrations by students is permissible within strict guidelines as outlined in the Audio and Visual Recording Policy (See policy I.24.00). Noncompliance with the audio/visual recording 4guidelines is a violation of the Professional Scholars' Code.

A student of the College of Health Professions and Wellness who submits an examination or other work certifies that the work is his or her own and that he or she is unaware of any instance of violation of this code by himself/herself or others.

III. Suspected Violations of Professional Scholar's Code

1. Students suspected of violating the Professional Scholar's Code will be notified verbally and in writing. Faculty should use Attachment B for communication of violation to student. Faculty should complete Attachment C in order to document the alleged incident, the student's response, and resolution of the incident. All documentation should be placed in the student's permanent file.
2. The student has the right to seek advice from the Program Director, Academic Advisor or Department Head for their own program.
3. The student may admit the offense or refute it and offer written evidence supporting the denial. Written evidence must be provided within three (3) working days. Faculty will employ diligence in assuring due process.
4. Faculty will consider the nature of the offense; evidence presented by the student and make a decision regarding consequences.
5. Consequences for students found guilty of violation of the Professional Scholar's

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Code may include, but are not limited to additional assignments, zero credit for an assignment, failure of course, or dismissal from program.

6. Should the student wish to appeal the faculty decision, the student should follow the 'Student Appeal And/or Grievance Procedure' as outlined in the student handbook.

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References

University of Florida. (2006). Academic Honesty Guidelines. Retrieved from
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A.T. Still University (ATSU). (2009). Student Handbook. Retrieved from
www.atsu.edu/student_services/handbook/pdf

University at Buffalo (2012). School of Nursing Undergraduate Student Handbook. Retrieved from <http://nursing.buffalo.edu/Portals/0/2012-2013%20BS%20Handbook.pdf>

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Attachment A

Professional Scholars Code Agreement

The students and faculty of the College of Health Professions and Wellness recognize that academic honesty and integrity are fundamental values of healthcare professions and this University community as evidenced by the Professional Scholar's Code. Students and faculty at the College of Health Professions and Wellness commit to holding themselves and their peers to the high standard of honor required by the Professional Scholars Code. **Any individual who becomes aware of a violation of the Professional Scholars Code is bound by honor to take corrective action** (University of Florida, 2006).

We, the members of the College of Health Professions and Wellness, pledge to hold ourselves and our peers to the highest standards of honesty and integrity.

I have read and understand the Professional Scholar's Code. I hereby pledge that on all work submitted at the College of Health Professions and Wellness. I will neither give nor receive unauthorized aid in doing any or all assignments.

Student/Faculty Signature

Date

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Attachment B

Notification of Alleged Violation of the Professional Scholars' Code

Student's Name: _____

Date of Alleged Incident: _____

Course: _____

The student listed above is reported to have committed a violation of the Professional Scholars' Code of the College of Health Professions and Wellness. This form is a notification of alleged violation and potential disciplinary action. Please contact (insert name and phone # or email) immediately.

The student is required to sign this form acknowledging notification. Signing the form acknowledges notification; it is not an admission of guilt. This report will be filed in the student's permanent file.

The accused student has the right to know the allegations and have an opportunity to a meeting with faculty where he/she may present evidence in writing. The student has the right to seek advice from his/her Academic Advisor or the Director of Student Services.

Signature of Student

Date of Notification

Signature of Course Faculty

Date

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Attachment C

Professional Scholars' Code Report Form

Individual (s) involved in violation or alleged violation of Scholars' Code:

Contact Information of individuals in violation or alleged violation of the Scholars' Code:

Date of Incident: _____

Date of Notice to Individuals of Alleged Violation of Scholars' Code (attach copy of notice to this report):

Please give a full report of the situation in which the breach/alleged breach in the Professional Scholars' Code occurred:

Please describe the student's response and attach any documentation provided by the student.

Please describe the resolution of the breach/alleged breach of the Professional Scholars' Code.

Print Faculty Name

Faculty Signature

Date

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Document No.: I:29.00

Last Reviewed: June 2018

Last Revised: June 2018

Subject: CHPW Standards for Professional Behavior

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Standards for Professional Behavior

II. Standards for Professional Behavior

A. Introduction

The academic community of students and faculty at the College of Health Professions and Wellness (CHPW) strives to develop, sustain and protect an environment of professionalism. The Standards for Professional Behavior demands that students and faculty display professionalism in all of their endeavors. Exhibiting professionalism in academic pursuits and reporting violations of the Standards for Professional Behavior will encourage others to emulate professionalism in the nursing profession. Every student and/or faculty who approaches their studies or nursing student/faculty role with professionalism suffers when another student/faculty behaves in an unprofessional manner that reflects negatively on the CHPW and the profession.

B. Dissemination and Clarification

JSU Nursing

The JSU Nursing requires students and faculty to comply with the standards of conduct deemed appropriate for the nursing profession by the American Association of Departments of Nursing Essentials of Baccalaureate Education, the American Association of Departments of Nursing Essentials of Masters Education, the American Nurses Association's Code of Ethics, as well as those delineated in the Professional Scholars' Code of the JSU Nursing.

1. All students and faculty/staff in the JSU Nursing shall be informed of the Standards for Professional Behavior upon registration and/or employment in the Department and thereby assume the responsibility of abiding by the spirit of professionalism in their academic pursuits. The establishment of a Standards for Professional Behavior is not intended to be an indication that unprofessionalism is commonplace at this institution.
 - a. The Standards for Professional Behavior shall be part of the student handbooks, course shells and Faculty/Staff Policy and Procedures Manual. It is the responsibility of students, faculty, and staff to be familiar with this policy. Students and faculty must indicate acknowledgement of this policy via Attachment A upon admission or hire. This document will be placed in

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individual's file and students will mark electronically reviewed in course shells in subsequent semesters.

b. It shall be the responsibility of each faculty member to inform students of the Standards for Professional Behavior as part of the course orientation (live or electronic) at the beginning of every semester, through the course syllabus/notebook or other effective means. Faculty shall support the principles of professionalism through course policies and procedures.

c. The appropriate officials and offices shall conduct an orientation for all nursing students, incoming nursing faculty and staff to familiarize these individuals with the provisions of the Standards for Professional Behavior prior to attending classes or teaching or assuming an employee role within the DON.

III. Unprofessional behavior is the improper conduct by a student faculty, or staff which infringes on the reasonable freedom of others, or which is otherwise detrimental to the proper conduct of Jacksonville State University, The JSU Nursing, and clinical agency partners. The JSU Nursing is dedicated to maintaining excellence and integrity in all aspects of its professional conduct. Violations within these areas will be processed appropriately without regard to the sex, race, color, religious affiliation, national or ethnic origin, age, veteran status, or disability of any of the participants.

Professional behaviors such as accountability, promptness, responsibility, honesty, and respect are expectations of all students, faculty, and staff. As representatives of the nursing profession and Jacksonville State University, students, faculty, and staff are expected to maintain these professional behaviors within the classroom, online educational platforms, clinical activities, and communities it serves. Professional decorum is expected in all interactions with administration, faculty, staff, classmates, vendors, clients, families, visitors, and all clinical healthcare partners and their associates.

Evidence of unprofessional behavior can result in verbal/written warning, prescriptive educational assignments, reduction in course grade, clinical or course failure, or dismissal from the nursing program and/or Jacksonville State University.

Unprofessional behaviors include, but are not limited to, the following:

1. Unsafe practice (acts of commission or omission) that places a client in serious jeopardy.
2. Falsification of records (academic, clinical medical records, records of attendance or completion of course objectives).
3. Being under the influence of any substance that impairs performance as outlined in The JSU Nursing *Impairment and Substance Abuse Policy*.
4. Academic dishonesty (lying, cheating, and plagiarism; may also be considered a violation of the Scholar's Code).

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5. Distribution (physically or verbally) of actual or summarized test questions, assignments, papers, or any graded activities.
6. Physical or verbal altercations.
7. Incivility or willful harassment, sexual harassment, abuse or intimidation (physical, non-physical, verbal) of administration, faculty, staff, classmates, vendors, clients, families, visitors, and all clinical healthcare partners and their associates.
8. Willful expressions of disrespect (physical, non-physical, verbal) of administration, faculty, staff, classmates, vendors, clients, families, visitors, and all clinical healthcare partners and their associates related to race, cultural values/practices, religious beliefs, sexual orientation, physical/mental disabilities, and socioeconomic status.
9. Violation of confidentiality as outlined by HIPAA, FERPA, and confidentiality agreements with clinical partner agencies.
10. Theft of property
11. Rudeness, disruptive behavior, and/or lack of professional decorum in the classroom, online educational platforms, clinical practicum, and all communication/interaction settings that include, but are not limited to, face-to-face meetings, postal mailings, email, text messaging, facsimile (fax), social media, and video/audio recordings. This includes a pattern of late arrivals to class/clinical site or repetitive absences from class, clinical, and online platforms.
12. Unprofessional or inappropriate dress in the classroom, clinical practicum, clinical or simulation laboratory, and JSU Nursing and/or University functions. This includes failure to wear ID badge in clinical areas.

(University at Buffalo School of Nursing Undergraduate Handbook, 2012)

Department of Respiratory Therapy

1. All students and faculty/staff in the College of Health Professions and Wellness shall be informed of the Standards for Professional Behavior upon registration and/or employment in the college and thereby assume the responsibility of abiding by the spirit of professionalism in their academic pursuits. The establishment of a Standards for Professional Behavior is not intended to be an indication that unprofessionalism is commonplace at this institution.
 - a. The Standards for Professional Behavior shall be part of the Student Handbooks and Faculty/Staff Policy and Procedures Manual. It is the responsibility of students, faculty, and staff to be familiar with this policy.
 - b. It shall be the responsibility of each faculty member to inform students of the Standards for Professional Behavior as part of the course orientation (live or electronic) at the beginning of every semester, through the course syllabus/notebook

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or other effective means. Faculty shall support the principles of professionalism through course policies and procedures.

c. The appropriate officials and offices shall conduct an orientation for all students, incoming faculty and staff to familiarize these individuals with the provisions of the Standards for Professional Behavior prior to attending classes or teaching or assuming an employee role within the Department of Respiratory Therapy.

Unprofessional behavior is the improper conduct by a student faculty, or staff which infringes on the reasonable freedom of others, or which is otherwise detrimental to the proper conduct of Jacksonville State University, The College of Health Professions and Wellness, and clinical agency partners. The College of Health Professions and Wellness is dedicated to maintaining excellence and integrity in all aspects of its professional conduct. Violations within these areas will be processed appropriately without regard to the sex, race, color, religious affiliation, national or ethnic origin, age, veteran status, or disability of any of the participants.

Professional behaviors such as accountability, promptness, responsibility, honesty, and respect are expectations of all students, faculty, and staff. As representatives of the health care profession and Jacksonville State University, students, faculty, and staff are expected to maintain these professional behaviors within the classroom, online educational platforms, clinical activities, and communities it serves. Professional decorum is expected in all interactions with administration, faculty, staff, classmates, vendors, clients, families, visitors, and all clinical healthcare partners and their associates.

Evidence of unprofessional behavior can result in verbal/written warning, prescriptive educational assignments, reduction in course grade, clinical or course failure, or dismissal from the College and/or Jacksonville State University. Unprofessional behaviors include, but are not limited to, the following:

1. Unsafe practice (acts of commission or omission) that places a client in serious jeopardy.
2. Falsification of records (academic, clinical medical records, records of attendance or completion of course objectives).
3. Being under the influence of any substance that impairs performance as outlined in The College of Health Professions and Wellness *Impairment and Substance Abuse Policy*.
4. Academic dishonesty (lying, cheating, and plagiarism; may also be considered a violation of the Scholar's Code).
5. Distribution (physically or verbally) of actual or summarized test questions, assignments, papers, or any graded activities.
6. Physical or verbal altercations.
7. Incivility or willful harassment, sexual harassment, abuse or intimidation (physical, non-physical, verbal) of administration, faculty, staff, classmates, vendors, clients, families, visitors, and all clinical healthcare partners and their associates.

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8. Willful expressions of disrespect (physical, non-physical, verbal) of administration, faculty, staff, classmates, vendors, clients, families, visitors, and all clinical healthcare partners and their associates related to race, cultural values/practices, religious beliefs, sexual orientation, physical/mental disabilities, and socioeconomic status.
9. Violation of confidentiality as outlined by HIPAA, FERPA, and confidentiality agreements with clinical partner agencies.
10. Theft of property
11. Rudeness, disruptive behavior, and/or lack of professional decorum in the classroom, online educational platforms, clinical practicum, and all communication/interaction settings that include, but are not limited to, face-to-face meetings, postal mailings, email, text messaging, facsimile (fax), social media, and video/audio recordings. This includes a pattern of late arrivals to class/clinical site or repetitive absences from class, clinical, and online platforms.
12. Unprofessional or inappropriate dress in the classroom, clinical practicum, clinical or simulation laboratory, and College of Health Professions and Wellness and/or University functions. This includes failure to wear ID badge in clinical areas.

Department of Kinesiology

1. All students and faculty/staff in the department of Kinesiology shall be informed of the Standards for Professional Behavior upon registration and/or employment in the college and thereby assume the responsibility of abiding by the spirit of professionalism in their academic pursuits. The establishment of a Standards for Professional Behavior is not intended to be an indication that unprofessionalism is commonplace at this institution.
 - a. The Standards for Professional Behavior shall be part of the Student Handbooks and Faculty/Staff Policy and Procedures Manual. It is the responsibility of students, faculty, and staff to be familiar with this policy. Students and faculty must indicate acknowledgment of this policy via Attachment A. This document will be placed in the individual's file.
 - b. It shall be the responsibility of each faculty member to inform students of the Standards for Professional Behavior as part of the course orientation (live or electronic) at the beginning of every semester, through the course syllabus/notebook or other effective means. Faculty shall support the principles of professionalism through course policies and procedures.
 - c. The appropriate officials and offices shall conduct an orientation for all Kinesiology students, incoming Kinesiology faculty and staff to familiarize these individuals with the provisions of the Standards for Professional Behavior prior to attending classes or teaching or assuming an employee role within the College of Health Professions and Wellness.

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Unprofessional behavior is the improper conduct by a student faculty, or staff which infringes on the reasonable freedom of others, or which is otherwise detrimental to the proper conduct of Jacksonville State University, The CHPW, and agency partners. The CHPW is dedicated to maintaining excellence and integrity in all aspects of its professional conduct. Violations within these areas will be processed appropriately without regard to the sex, race, color, religious affiliation, national or ethnic origin, age, veteran status, or disability of any of the participants.

Professional behaviors such as accountability, promptness, responsibility, honesty, and respect are expectations of all students, faculty, and staff. As representatives of the health care profession and Jacksonville State University, students, faculty, and staff are expected to maintain these professional behaviors within the classroom, online educational platforms, clinical activities, and communities it serves. Professional decorum is expected in all interactions with administration, faculty, staff, classmates, vendors, clients, families, visitors, and all clinical healthcare partners and their associates.

Evidence of unprofessional behavior can result in verbal/written warning, prescriptive educational assignments, reduction in course grade, clinical or course failure, or dismissal from the College and/or Jacksonville State University. Unprofessional behaviors include, but are not limited to, the following:

1. Unsafe practice (acts of commission or omission) that places a client in serious jeopardy.
2. Falsification of records (academic, clinical medical records, records of attendance or completion of course objectives).
3. Being under the influence of any substance that impairs performance as outlined in *The CHPW Impairment and Substance Abuse Policy*.
4. Academic dishonesty (lying, cheating, and plagiarism; may also be considered a violation of the Scholar's Code).
5. Distribution (physically or verbally) of actual or summarized test questions, assignments, papers, or any graded activities.
6. Physical or verbal altercations.
7. Incivility or willful harassment, sexual harassment, abuse or intimidation (physical, non-physical, verbal) of administration, faculty, staff, classmates, vendors, clients, families, visitors, and all clinical healthcare partners and their associates.
8. Willful expressions of disrespect (physical, non-physical, verbal) of administration, faculty, staff, classmates, vendors, clients, families, visitors, and all clinical healthcare partners and their associates related to race, cultural values/practices, religious beliefs, sexual orientation, physical/mental disabilities, and socioeconomic status.
9. Violation of confidentiality as outlined by HIPAA, FERPA, and confidentiality agreements with partner agencies.
10. Theft of property
11. Rudeness, disruptive behavior, and/or lack of professional decorum in the classroom, online educational platforms, clinical practicum, and all

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communication/interaction settings that include, but are not limited to, face-to-face meetings, postal mailings, email, text messaging, facsimile (fax), social media, and video/audio recordings. This includes a pattern of late arrivals to class/clinical site or repetitive absences from class, clinical, and online platforms.

12. Unprofessional or inappropriate dress in the classroom, clinical practicum, clinical or simulation laboratory, and CHPW and/or University functions.
13. Unprofessional, inappropriate or misuse of technology both personally and professionally in and out of academic environments. Digital citizenship violations including but limited to inappropriate photo/video of other individuals not meant for academic purposes and without expressed consent, posting slanderous, misleading or defaming remarks on social media platforms targeted at the JSU community.

III. Suspected Violations of Standards for Professional Behavior

1. Students suspected of violating the Standards for Professional Behavior will be notified verbally and in writing. Faculty should use Attachment B for communication of violation to student. Faculty should complete Attachment C in order to document the alleged incident, the student's response, and resolution of the incident. All documentation should be placed in the student's permanent file.
2. Suspected faculty/staff violations will be managed by the Dean/Associate Dean and referred to Human Resources, if necessary.
3. The student has the right to seek advice from his/her Academic Advisor, Program Director or the Department Head for their own program.
4. The student may admit the offense or refute it and offer written evidence supporting the denial. Written evidence must be provided within three (3) working days. Faculty will employ diligence in assuring due process.
5. Faculty will consider the nature of the offense; evidence presented by the student and make a decision regarding consequences.
6. Consequences for students found guilty of violation of the Standards for Professional Behavior may include, but are not limited to additional assignments, zero credit for an assignment, failure of course, or dismissal from program.
7. Should the student wish to appeal the faculty decision, the student should follow the 'Student Appeal and/or Grievance Procedure' as outlined in the student handbook.

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Attachment A

Standards for Professional Behavior Agreement

The students and faculty/staff of the College of Health Professions and Wellness recognize that professionalism is a fundamental value of healthcare professions and this University community as evidenced by the Standards for Professional Behavior. Students and faculty/staff at the College of Health Professions and Wellness commit to holding themselves and their peers to the high standard of honor required by the Standards for Professional Behavior. **Any individual who becomes aware of a violation of the Standards for Professional Behavior is bound by honor to take corrective action** (University of Florida, 2006).

We, the members of the College of Health Professions and Wellness, pledge to hold ourselves and our peers to the highest standards of honesty and integrity.

I have read and understand the Standards for Professional Behavior. I hereby pledge that I will maintain the highest level of professionalism in all settings of which I am representing the College of Health Professions and Wellness.

Student/Faculty/Staff Signature

Date

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Attachment B

Notification of Alleged Violation of the Standards for Professional Behavior

Name: _____

Date of Alleged Incident: _____

Course: _____

The student/faculty staff listed above is reported to have committed a violation of the Standards for Professional Behavior of the College of Health Professions and Wellness. This form is a notification of alleged violation and potential disciplinary action. Please contact (insert name and phone # or email) immediately.

The student is required to sign this form acknowledging notification. Signing the form acknowledges notification; it is not an admission of guilt. This report will be filed in the student's permanent file.

The accused student has the right to know the allegations and have an opportunity to a meeting with faculty where he/she may present evidence in writing. The student has the right to seek advice from his/her Academic Advisor or the Director of Student Services.

Signature of Student

Date of Notification

Signature of Course Faculty

Date

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Attachment C

Standards for Professional Behavior Report Form

Individual (s) involved in violation or alleged violation of the Standards for Professional Behavior: _____

Contact Information of individuals in violation or alleged violation of the Standards for Professional Behavior:

Date of Incident: _____

Date of Notice to Individuals of Alleged Violation of the Standards for Professional Behavior (attach copy of notice to this report):

Please give a full report of the situation in which the breach/alleged breach in the Standards for Professional Behavior occurred. For Nursing only, please link the behaviors to the specific ANA Code of Ethics Provision(s) that has been violated, when applicable.

Please describe the individual's response and attach any documentation provided.

Please describe the resolution of the breach/alleged breach of the Standards for Professional Behavior.

Print Faculty Name

Faculty Signature

Date

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Document No.: I.30.00

Last Reviewed: June 2023

Adoption Date: May 1991

Last Revised: June 2023

Subject: CHPW Procedure for Student and Faculty Health Appraisals

Committee: CHPW Leadership Committee

Approved: Dean Tracey Matthews

CHPW Procedure for Student and Faculty/Adjunct Health Appraisals
(only applicable to those students in specific upper division programs such as Nursing,
Respiratory Therapy, and Athletic Training)

In accordance with affiliate agencies and CHPW requirements, all students upon admission into upper division CHPW, and faculty upon hire, are to have a physical examination and subsequent exams while enrolled/employed. The findings are to be reported on the appropriate health forms.

During orientation and initial advisement, students may receive information regarding specific health requirements for completion and submission via the electronic documents tracking system.

Faculty and students must assume financial responsibility for the immunization. Failure to comply with these requirements may impact employment status at Jacksonville State University or dismissal from the CHPW.

The following procedure outlines STUDENT Initial and annual Health Appraisals and must be completed at the CHPW designated facility for upper division CHPW students.

1. The “Initial Health Appraisal Form” will be made available to the student in the online orientation to be completed upon acceptance into your academic program. Thereafter, the “Annual Health Appraisal Form” is to be obtained from the website.
2. The student should then contact the designated facility to arrange an appointment for the “Initial Health Appraisal” to be completed. “Annual Health Appraisals” will be conducted by the contracted healthcare providers.
3. The Initial health appraisal must be completed prior to the first day of class for all upper division nursing students.
4. Subsequent annual health appraisals must be completed prior to the first day of class.
5. If an individual elects to have a titer, he or she must assume financial responsibility for the test. If the test reveals a non-immune status, the student must follow the Centers for Disease Control (CDC) recommended guidelines.
6. The completed health forms will be reviewed by the designated facility medical review officer and healthcare providers. All deficiencies must be rectified, and the student must be cleared by the designated due date.
7. Any student who does not comply with the policy stated herein will not be allowed to function in the clinical area until the completed health appraisal is submitted to the Director of Clinical Services. Failure to comply with guidelines may result in course failure and possible dismissal from the program.

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The following procedure outlines FACULTY/ADJUNCT Initial and annual Health Appraisals and must be completed at the designated facility (Nursing and RT, only).

1. The Faculty/Adjunct will upon hire receive an “Initial Faculty Profile” sheet which documents necessary clinical needs to satisfy clinical requirements pertaining to health records.
2. All immunizations and/or titers must be presented with the “Initial Faculty Profile”.
3. Subsequent Health Appraisals must be completed annually.
4. The Director of Clinical Services will maintain Faculty/Adjunct files.

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Document No.: I.31.00

Last Reviewed: June 2023

Adoption Date: February 2005

Last Revised: November 2020

Subject: CHPW Requirements for TB Skin Test

Committee: CHPW Leadership Team

Approval: Dean Tracey Matthews

CHPW Requirements for TB Skin Test

All faculty assigned to a clinical course(s) must present written documentation for Tuberculosis (TB) screening with negative results (or appropriate treatment if positive) on an annual basis to supervise students in clinical courses. Testing (one-step, two-step, or chest x-ray) must have occurred within the last calendar year and be valid through the clinical semester.

Faculty who cannot provide evidence of negative TB status within the past year will be required to obtain a two-step Tuberculin skin test before starting clinical rotations and are mandated to renew the Tuberculin one-step skin test once per year. A chest x-ray is acceptable in lieu of skin testing where applicable in accordance with CDC guidelines. Acceptable documentation consists of evidence of the TB test on letterhead from facility that provided the test.

Faculty testing positive will be required to comply with the current Centers for Disease Control (CDC) treatment recommendations. Failure to comply with the CDC requirements may impact employment status at Jacksonville State University.

Requirements for TB Skin Test for Students

All students involved in clinical courses must present written documentation for Tuberculosis (TB) screening with negative results (or appropriate treatment if positive).

Students will be required to obtain a two-step Tuberculin skin test with the first injection administered and read prior to clinical. Students must also renew their one-step TB skin test on an annual basis.

Students testing positive will be required to comply with the current Centers for Disease Control (CDC) treatment recommendations as directed by the designated facility. Failure to comply with the CDC requirements may result in dismissal from the student's academic program.

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Document No.: I.32.00

Last Reviewed: June 2023

Adoption Date: January 19, 1990

Last Revised: November 2020

Subject: CHPW Requirements for Hepatitis B Vaccine

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Requirements for Hepatitis B Vaccine

All CHPW students and faculty who perform tasks that may involve exposure to blood or body fluids should receive vaccinations for Hepatitis B. The following process should be followed:

1. Faculty and students should provide proof of a 3-dose series of hepatitis B vaccine at 0-, 1-, and 6-month intervals.
 - a. If series occurred prior to acceptance to upper division, students should provide evidence of series to designated facility.
 - b. If series has not occurred or been interrupted, the student or faculty should receive series from designated facility.

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Document No.: I.33.00

Last Reviewed: June 2023

Adoption Date: January 19, 1990

Last Revised: November 2020

Subject: CHPW Requirements for MMR Booster

Committee: CHPW Leadership Team

Approval: Dean Tracey Matthews

CHPW Requirements for Measles, Mumps, Rubella (MMR)

All CHPW faculty and students involved in clinical courses must present written documentation of immunity to Measles (Rubeola), Mumps, and Rubella and Tetanus. Faculty and students born in 1957 or later must do one of the following to be considered immune to measles, mumps, or rubella:

- Provide documentation of (a) physician-diagnosed measles or mumps disease.
- Provide laboratory evidence of measles, mumps, or rubella immunity from a blood sample titer.
- Provide evidence of appropriate vaccination against measles, mumps, and rubella (i.e., administration on or after the first birthday of two doses of live measles and mumps vaccines separated by 28 days or more, and at least one dose of live rubella vaccine).
- Faculty and students born in 1957 or later without serologic evidence of immunity or prior vaccination should receive 2 doses of MMR, 4 weeks apart.
- Faculty and students born before 1957 should discuss the need for MMR vaccination with medical staff at the designated facility if they do not have a history of physician-diagnosed measles and mumps disease (or laboratory evidence of immunity from blood sample titer) and do not have laboratory evidence of rubella immunity. These students may be particularly vulnerable in the event of a mumps outbreak.

If blood titers reveal an “indeterminate” or “equivocal” level of immunity, the faculty member or student will be considered nonimmune. Further recommendations related to any of the above categories may be made by medical staff at the designated facility. As a result, the faculty or student may be required to sign a “Low Titer Waiver”.

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Document No.: I.34.00

Last Reviewed: June 2023

Adoption Date: May 2009

Last Revised: November 2020

Subject: CHPW Requirements for Tetanus/Diphtheria/Pertussis (Td/Tdap)

Committee: CHPW Leadership Team

Approval: Dean Tracey Matthews

CHPW Requirements for Tetanus / Diphtheria / Pertussis (Td/Tdap)

All CHPW faculty and students involved in clinical courses must present written documentation for Tetanus, Diphtheria, and Pertussis. All faculty and students who have completed a primary series of a tetanus/diphtheria-containing product (DTP, DTaP, DT, Td) should receive Td boosters every 10 years.

Faculty and students must also be given a 1-time dose of Tdap as soon as feasible (give if TD booster has not been received in the last two years).

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Document No.: I.35.00

Last Reviewed: June 2023

Adoption Date: March 2005

Last Revised: November 2020

Subject: CHPW Requirements for Varicella (Chickenpox)

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Requirements for Varicella (Chickenpox)

All faculty and students assigned in clinical courses must present written documentation of immunity to Varicella (chickenpox) through one of the following:

- Having received 2 doses of varicella vaccine given at least 28 days apart
- Having had a physician diagnosis of a history of varicella or herpes zoster or laboratory confirmation of disease
- Demonstrate laboratory evidence of immunity

Before a faculty member or student can receive the varicella vaccine, the Alabama Department of Public Health (ADPH) requires a **negative varicella titer**. The ADPH guidelines state that individuals who receive their first dose of varicella vaccine after the thirteenth birthday must be given two doses at least one month apart.

If a blood titer test reveals a non-immune status, the faculty member or student must follow the Centers for Disease Control (CDC) recommended guidelines and receive two (2) doses of vaccine.

Faculty and students must assume financial responsibility for the immunization. Failure to comply with these requirements may impact employment status at Jacksonville State University or dismissal from the CHPW program.

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Document No.: I:36.00

Last Reviewed: June 2023

Adoption Date: March 2014

Last Revised: November 2020

Subject: CHPW Requirements Influenza and COVID-19 vaccination

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Requirements for Influenza and COVID-19 vaccination (flu)

Influenza is a serious respiratory disease, and it is highly recommended that all healthcare workers submit to yearly vaccinations. Faculty and Students should present proof of influenza vaccination (not mist) or sign the Seasonal Influenza (Flu) Vaccine Declination Form (Attachment A).

While JSU does not require COVID vaccination, many of the clinical facilities do require COVID vaccination. If an exemption is warranted, students must follow the procedure for requesting a medical or religious exemption through each facility with the understanding that a request for exemption may not be granted and that some facilities do not allow for exemptions.

Faculty and students must assume financial responsibility for the immunization. Failure to comply with these requirements may impact employment status at Jacksonville State University or dismissal from the CHPW program.

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Attachment A

Seasonal Influenza (flu) for Faculty and Students Declination Form

As a faculty member/nursing student of the College of Health Professions and Wellness, I have been advised of the benefits of receiving the flu vaccines.

I understand that are many contributing factors to not being able to receive the influenza vaccine, including but not limited to, the following:

- Concern about side effects
- Allergy to eggs or chicken
- Allergy to Thimerosal, Gentamycin, or Latex
- Possibility of contracting Guillain-Barre Syndrome within 6 weeks of receiving flu shot

I acknowledge that I am aware of the following facts:

- Influenza is a serious respiratory disease that kills an average of 26, 000 people and hospitalizes more than 200,000 people in the United States each year (CDC, 2011).
- Influenza vaccination is recommended for all health care workers to protect clients from influenza disease, its complications and death.
- If I contract influenza, will shed the virus for 24-48 hours before and up to seven (7) days after my symptoms appear. My shedding the virus can spread influenza disease to patients.
- The influenza virus can live on surfaces such as doorknobs and keyboards for 2-8 hours.
- The consequences of my refusing to be vaccinated could result in a life-threatening consequence to my health and the health of those with whom I have contact, including my family, co-workers and clients.
- I understand that I cannot contract influenza from the influenza vaccine.
- I understand that I may be required to wear a mask or any other preventative gear while attending clinical.
- I understand that I may not be able to perform clinicals in certain agencies that require flu shots.

Knowing these facts, I choose to decline the vaccination at this time.

Signature

Date

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Document No.: I.37.00

Last Reviewed: June 2023

Adoption Date: May 2001

Last Revised: November 2020

Subject: CHPW Low Titer Waiver

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Low Titer Waiver

I, _____ have received the vaccination for the following
_____ (Measles (Rubeola), Mumps, and Rubella; Hepatitis B, etc.) and my
titer level remains low.

Based on the low titer results, I understand that I am not considered to be immune. I am aware that the College of Health Professions and Wellness requires participation in patient treatment and clinical procedures. I am also aware that as a result of my participation, I may be exposed to infectious diseases.

By my signature below, I release Jacksonville State University, employees, and the participating clinical agencies from any liability for injury, illness or infection that may be contracted as a result of this incident. I understand that I am responsible for any future financial expenses that may incur at this time or in the future.

Faculty/ Student Signature

Date

Witness

Date

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Document No.: I:38.00

Last Reviewed: June 2023

Adoption Date: September 1999

Last Revised: November 2020

Subject: CHPW Health Insurance and CPR Policy

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Health Insurance and CPR Policy

All College of Health Professions and Wellness students are required to have proof of valid health insurance and CPR verification while attending clinicals. These verifications are due on the first day of class.

Health Insurance:

1. The student will complete and submit the “Health Insurance Form” along with a copy of the health insurance card (or verification of payment submitted to the insurance company) for validation. If health insurance is purchased online through a monthly payment system, student must provide proof of active insurance each month.
2. The Director of Clinical Services will maintain a record of the forms collected the first day of class; the course coordinator is responsible for reviewing the record for their course and ensuring that no student goes to clinical with an outstanding deficit.
3. Prior to onset of clinicals, the forms will be submitted to the Director of Clinical Service’s Secretary for filing in the student’s permanent record.

CPR:

1. The student will present a copy of their current BCLS card (acceptable CPR certification was provided to student during orientation). In the event that the CPR card expires during the student’s tenure, a new CPR card will be presented. Students will not be allowed to attend clinical with an expired CPR card. Should the student not be in possession of their CPR card, a written letter on professional letterhead and signed by the instructor of the class is sufficient until the CPR card is received.
2. The Director of Clinical Services will maintain a record of the forms collected the first day of class; the course coordinator is responsible for reviewing the record for their course and ensuring that no student goes to clinical with an outstanding deficit.
3. Prior to onset of clinicals, the forms will be submitted to the Director of Clinical Services’ Secretary for filing in the student’s permanent record.

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Attachment A

COLLEGE OF HEALTH PROFESSIONS AND WELLNESS
HEALTH INSURANCE FORM

Verification of Medical Insurance for _____ (Semester) _____ (Year)

Student's Name (print): _____

Insurance Company: _____

Name of Insured (name on card): _____

Contract #: _____

Group #: _____

Effective date: _____

I certify that the above information is accurate and true. I am fully covered with medical insurance that extends through the end of this semester. I understand if I purchase insurance with a monthly payment, I will provide the CHPW with a monthly receipt. If this insurance status changes before the end of the semester, I will notify my course coordinator and will purchase additional insurance immediately. **I understand I cannot attend clinicals unless I am covered with medical insurance. Failure to continue insurance until the end of the semester could result in dismissal from the program.**

Signature of student: _____

Date: _____ Verified By: _____

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Document No.: I:39.00

Last Reviewed: June 2023

Last Revised: November 2020

Subject: CHPW Student Responsibility for Medical Care

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Student Responsibility for Medical Care

In the event of sickness or injury, students are responsible for all costs related to the provision of medical care as needed.

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Document No.: I:40.00

Last Reviewed: June 2023

Adoption Date: September 2002

Last Revised: June 2023

Subject: CHPW Authorization for Release of Information by Medical Provider

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Authorization for Release of Information by Medical Provider
(Hold Harmless Agreement) Authorization for Use and Disclosure by JSU

Student's Name: _____
Other Name(s) Used _____
Address: _____
City: _____ State: _____ Zip: _____
Student ID #: _____ Gender: _____
Date of Birth: ____ / ____ / ____ Telephone No.: (____) _____
Email: _____@_____

I hereby authorize and request release to Jacksonville State University College of Health Professions and Wellness (CHPW) my medical records and information of whatever kind and nature relating, without limitation, to my healthcare history. These protected records shall be released to: ATTN: Dean of CHPW, JACKSONVILLE STATE UNIVERSITY, 700 PELHAM ROAD NORTH, JACKSONVILLE, AL 36265.

The purpose of this request for release of records is to determine suitability for and compliance with requirements to participate in clinical experiences with patients in my capacity as a student of the _____ program.

I authorize these records to be delivered upon request and upon presentation of a copy of this Authorization for Release. I understand that I have a right to revoke this authorization in writing at any time, except to the extent information has already been released in reliance upon this authorization.

I am aware that clinical entities TO WHICH I AM ASSIGNED may require, AMONG OTHER INFORMATION, proof of compliance with REQUIRED immunizations and evidence, AND EVIDENCE OF negative TB TESTS AND / OR drug screens. JSU CHPW has my permission to release proof of immunizations and evidence of negative drug screens to clinical agencies where I provide patient care.

I EXPRESSLY RELEASE AND HOLD HARMLESS ANY MEDICAL PROVIDER RESPONDING TO THIS REQUEST FOR MEDICAL RECORDS AND / OR INFORMATION, AND JACKSONVILLE STATE UNIVERSITY, THEIR RESPECTIVE AGENTS, SERVANTS, AND EMPLOYEES, FROM ANY LIABILITY, CLAIM, DEMAND, ACTION OR CAUSE OF ACTION RELATED to, DIRECTLY OR INDIRECTLY, FULFILLING THIS REQUEST AS SUBMITTED. THIS RELEASE IS BEING EXECUTED VOLUNTARILY WITH KNOWLEDGE OF MY RIGHT NOT TO DO SO; HOWEVER, I understand that if I refuse, I may be unable to complete clinical requirements FOR TRAINING and, therefore, be unable to participate in or complete the JSU CHPW academic programs.

DATED: _____

STUDENT'S SIGNATURE: _____ WITNESS SIGNATURE: _____
Print Name: _____
Address: City: _____ State: _____ Zip: _____

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Document No.: I:41.00

Last Reviewed: June 2023

Adoption Date: July 2004

Last Revised: June 2023

Subject: CHPW Requirements for Criminal Background Check

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Requirements for Criminal Background Check

(this policy applies to CHPW faculty and students that participate in clinical activities that require a background check)

All CHPW faculty, part time clinical associates and adjuncts, and students must have a background check completed by the agency designated by the CHPW, prior to acceptance in their respective role.

In the case of faculty, clinical associates, and adjuncts, the University's employment process also requires one or more additional background checks. The information obtained from the CHPW investigation will be shared with the Dean of the CHPW, and with the administrative personnel at any/all assigned clinical sites or agencies as required by the policies of these agencies or institutions. The information obtained in the reports rendered to the University shall be kept confidential except to the extent necessary in making admission, employment, and clinical assignment decisions.

Policies mandating criminal background checks are congruent with The Joint Commission (TJC), (TJC Standard HR.1.20.05 requires a criminal background check for staff and students as well as volunteers who work in the same capacity as staff who provide care, treatment, and services.)

Faculty, clinical associates, adjuncts, and CHPW students must be successfully cleared through criminal background checks, healthcare licensing or certification registries and state boards of nursing prior to engaging in patient contact.

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Attachment A

Letter of Understanding Regarding Criminal Background Checks

I have read and understand the CHPW policies regarding the requirement for criminal background checks. I voluntarily give my consent to the obtaining of one or more necessary reports and the use thereof as outlined in the stated policy.

Print Full Name (Include Middle Name)

(Maiden Name If Applicable)

Signature

Date

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Document No.: I.42.00

Last Reviewed: June 2023

Adoption Date: July 2004

Last Revised: November 2020

Subject: CHPW Requirements for Positive Background Checks

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Requirements for Positive Background Checks

1. If a positive background is detected, the Dean or the Dean's designee will contact the student and ask for the following: 1) written explanation of the occurrence; 2) discussion as to how this situation was resolved or will be resolved; (Be sure to include information specific to the punishment, such as probation, rehab, counseling, etc.)
2. Upon receipt of the written information from student, the Dean will send information to the appropriate academic administrator and related committees and may consult with University Counsel. The Committee and/or Program Directors may meet virtually or in person to provide a recommendation to the Dean regarding status of the student.
3. Once the Dean is notified regarding the recommendation, he/she will review the case and communicate with the student. If the student is allowed to continue in the program, the Dean or the Dean's designee must contact agencies to determine where the student can participate in clinical activities. The Director of Clinical Services for CHPW will track this information each semester and communicate with the student and faculty as needed regarding clinical sites.

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Document No.: I.43.00

Last Reviewed: June 2023

Adoption Date: September 6, 1996

Last Revised: June 2023

Subject: CHPW Blood and Body Fluid Exposure

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Blood and Body Fluid Exposure

Philosophy

The CHPW faculty, professional staff, clinical associate/adjuncts, and students adhere to Standard Blood and Body Fluid Precautions. These groups will be referred to collectively as ‘individuals’ for this policy. One principle of these precautions is to assume that all patients are potential carriers of blood borne disease. In addition, health care workers should assume themselves to be potential carriers. They must exercise caution as to protect both patients and health care workers from exposure to blood and body fluids.

Individuals are responsible for adhering to the established accidental exposure policies, procedures of the clinical agency, and the CHPW with respect to reporting and documentation of the incident.

Prevention

Individuals are required to receive the Hepatitis B vaccine series, as indicated in Policy I.32.00.

Individuals that present reactions or life-threatening complications must provide written documentation from their health care provider to be exempt from this requirement.

Before entering the clinical setting, all individuals are instructed on Standard Blood and Body Fluid Precautions and post-exposure procedures.

Post-Exposure Protocol

When an individual is directly exposed to or in contact with blood or other potentially infectious materials, the response shall be as follows:

1. If the potential exposure involves a needle stick, puncture injury, cut, or fluid contact, wash the area with soap and water for at least 15 seconds. In the case of a mucous membrane exposure, rinse the site with copious amounts of water or normal saline solution. Irrigate the eyes with commercially prepared isotonic solution in eye wash stations, if available, or with saline solution or clean water. Flush splashes to the nose, mouth, or skin with water.

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CHPW Student and Faculty/Professional Staff/Clinical Associate/Adjunct Exposure

1. The CHPW student must immediately consult his/her clinical faculty/preceptor, JSU Student Health Center (256-782-5310) or his/her own health care provider, emergency health care provider, or infectious disease specialist regarding the advisability of post-exposure prophylaxis. Protocol for exposure can be found on the “Post Blood or Body Fluid Exposure Procedure for the JSU Nursing Students Card” included in the Dress Code for Clinical and Laboratory Settings (III:05.00)
2. Faculty/Professional Staff/Clinical Associate/Adjunct must immediately consult the JSU Student Health Center (256-782-5310) or his/her own health care provider, emergency health care provider, or infectious disease specialist regarding the advisability of post-exposure prophylaxis. Clinical faculty/preceptor will report the incident to the course coordinator and appropriate agency staff.
3. **The health care provider will make the judgment as to whether the exposure warrants prophylaxis.** Coordination of the individual’s plan of care and follow-up will be the responsibility of the student and the student’s health care provider.
4. Once the clinical faculty /preceptor has notified the agency charge nurse or immediate supervisor, it is recommended that the clinical agency’s infectious disease nurse, if available, also be notified. An incident (exposure) report should be completed. If the agency will allow, a copy of the report should be obtained and forwarded to the Course Coordinator (or designee). If the agency will not provide a copy of the report, the clinical instructor or preceptor should write a memorandum for record to the Course Coordinator, summarizing the details of the exposure. The Course Coordinator (or designee) will notify the Dean within three (3) days that an incident has occurred.
5. Notification of the patient (if the exposure source is known), risk screening of the patient or other diagnostic testing of the patient, if indicated, will be coordinated in accordance with agency policies.
6. The JSU Student Health Center, the exposed individuals’ own health care provider, emergency health care provider, or infectious disease specialist will manage the individual’s post-exposure baseline and follow-up laboratory tests for bloodborne pathogens. Individuals are responsible for coordinating the release of their initial test results to the health care provider of their choice, if needed. The College is not responsible for ensuring the student’s compliance with post-exposure care.
7. CHPW students and Faculty/Professional Staff/Clinical Associate/Adjunct will be responsible for all costs with regards to their post exposure medical care.

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Attachment A

Possible Exposure to Blood Borne Pathogens
Release of Liability
Student

I _____ am aware that the CHPW requires participation in patient treatment and clinical procedures during the course of my academic classes. I am also aware that as a result of my participation, I may be exposed to infectious diseases.

I have been informed by my clinical instructor/preceptor _____ that on this date I have been involved in an incident that may have resulted in my being exposed to infectious disease. I understand that it is the policy of the CHPW to release me from the clinical environment in order that I have the opportunity to seek medical evaluation of risk status and further treatment. It is my decision to refuse to seek medical evaluation for risk status and further treatment. By my signature below, I release Jacksonville State University, any of its employees, and the participating agency _____ from any liability for injury, illness or infection that may be contracted as a result of this incident.

I am aware that I am responsible for following the agency policies with regards to reporting and documentation of the exposure incident, regardless of my decision to seek medical attention. I understand that I am responsible for any future financial expenses resulting from my decision not to seek medical evaluation at this time, or any expenses resulting in the future should I elect to change my mind and seek care in the future.

Student Signature

Date

Student ID Number

Student Program

Clinical Instructor/Preceptor

Date

The signed release of responsibility will be maintained in the student's permanent file.

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Document No.: I.44.00

Last Reviewed: June 2023

Adoption Date: August 2007

Last Revised: November 2020

Subject: CHPW Impairment and Substance Abuse Testing Policy

Committee: CHPW Leadership Team

Approved: Dean Tracey Matthews

CHPW Impairment and Substance Abuse Testing Policy

I. Philosophy

Jacksonville State University (JSU) CHPW is committed to maintaining a drug-free workplace and academic environment. In compliance with Federal law, the University has adopted a University Drug-Free Workplace Policy that prohibits the illegal manufacture, distribution, dispensing, possession, or use of a controlled substance. All CHPW students, faculty, and staff must become familiar with and comply with this university-wide policy, which applies to behavior that not only occurs on the University campus but also on property owned or controlled by the University and/or a University-sponsored or University-supervised activity at other locations. This policy is accessible at [JSU Substance Abuse Policy Statement - Department of Human Resources](#). The JSU CHPW Impairment and Substance Abuse Testing Policy, as described below, is intended to compliment the University's Drug-Free Workplace Policy. This policy applies to CHPW students, faculty, clinical associate and adjuncts, professional staff, and students at any time and in any location while in a role affiliated with JSU.

II. Purpose

For obvious health and safety concerns, CHPW students, faculty, and clinical faculty must conduct health care and educational activities fully in control of their manual dexterity and skills, mental faculties, and judgment. The presence or use of drugs or alcohol, lawful or otherwise, which interferes with the judgment or motor coordination of nursing students, faculty, and clinical faculty in a health care setting, poses an unacceptable risk for patients, colleagues, the University, and affiliating clinical agencies.

The CHPW recognizes its responsibility to provide a safe, efficient academic environment for students, faculty, and clinical faculty and to cooperate with clinical agencies in providing for the safe and effective care of their patients during nursing students' clinical experiences in their facilities. Therefore, the following policy has been adopted to:

1. Prevent substance abuse and/or activities or behaviors a) that are prohibited by the University's Drug-Free Workplace Policy, state or federal laws or b) which may subject the involved student, other individuals, and the University to legal penalties or consequences, or c) which may cause a deterioration of the atmosphere and circumstances under which the care of patients and the nursing educational programs are conducted.

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2. Cooperate with affiliating clinical agencies by requiring CHPW faculty, and clinical faculty reporting to such agencies to consent voluntarily a) to allow those agencies to drug test the student, faculty, or clinical faculty in accordance with their policies, and b) to disclose any drug testing results to appropriate CHPW officials; and
3. Require all students enrolled in clinical courses in the CHPW to submit to pre-clinical testing, random testing, and mandatory drug testing based upon reasonable suspicion of substance abuse.
4. Require all part time clinical faculty to submit to pre-employment testing and mandatory drug testing based upon reasonable suspicion of substance abuse.
5. Require all faculty and full-time clinical faculty employed in the CHPW to submit to pre-employment testing, random testing, and mandatory drug testing based upon reasonable suspicion of substance abuse.

III. Definitions of Terms Used in Policy

Drug Testing means the scientific analysis of urine, blood, breath, saliva, hair, tissue, and other specimens of the human body for the purpose of detecting a drug or alcohol.

1. Pre-clinical testing means that all students will be tested prior to engaging in any clinical activity and/or patient care.
2. Pre-employment testing means that all faculty and full/part time clinical faculty will be tested prior to employment in the CHPW.
3. Random testing means that CHPW students, faculty, and full-time clinical faculty will be arbitrarily selected for drug testing using a computerized system. This testing can occur at any time during employment or enrollment in upper division of the BSN, Respiratory Therapy, Kinesiology or Graduate Programs.
4. Reasonable suspicion testing means that evidence exists which forms a reasonable basis for concluding that it is more likely than not that a student, faculty, or clinical faculty has engaged in substance abuse. Facts which could give rise to reasonable suspicion include but are not limited to the odor of alcohol or drugs, impaired behavior such as slurred speech, decreased motor coordination, difficulty in maintaining balance, marked changes in personality or job performance, and unexplained accidents. Such evidence may come from a professional or expert opinion, layperson opinion, scientific tests, or other sources or methods.

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Illegal drug means any drug which is not legally obtainable; any drug which is legally obtainable but has not been legally obtained; any prescribed drug not legally obtained; any prescribed drug not being used for the prescribed purpose or by the person for whom it was prescribed; any over-the-counter drug being used at a dosage level other than that recommended by the manufacturer, or being used for a purpose other than the purpose intended by the manufacturer; and any drug being used for a purpose or by a person not in accordance with bona fide medical therapy. Examples of illegal drugs include, but are not limited to, stimulants, depressants, narcotic or hallucinogenic drugs, cannabis substances, such as marijuana and hashish, cocaine, heroin, methamphetamine, phencyclidine (PCP), and so-called designer drugs and look-alike drugs.

Impaired means that a person's mental or physical capabilities are reduced below their normal levels (with or without any reasonable accommodation for a disability). An impaired student manifests deterioration in the level of function as compared to that previously observed, or the student does not function at a level normally expected under the prevailing circumstances. Impairment may exist in one or more multiple domains, including psychomotor activity and skills, conceptual or factual recall, integrative or synthetic thought processes, judgment, attentiveness, demeanor, and attitudes as manifested in speech or actions. Impairment will include addiction to and/or physical dependence upon chemical substances.

CHPW student means any individual formally enrolled in a major within the College of Health Professions and Wellness.

Faculty means any person employed in the faculty role in the CHPW.

Clinical faculty are employed full or part time by the CHPW to supervise students in clinical settings. Examples of clinical faculty may include but are not limited to registered nurses or certified athletic trainers. Clinical faculty may be hired as adjuncts or clinical associates.

Substance abuse means (a) the manufacture, use, sale, purchase, distribution, transfer, or possession of an illegal drug while on University or affiliated clinical site premises or while participating in any University or affiliated clinical site-sponsored or related activity, including any nursing-related course or clinical training activity; (b) the consumption, possession, or distribution of alcohol, unless approved by the University or clinical agency, by any nursing student, faculty, or clinical faculty while on University or affiliated clinical site premises or while participating in any University-or affiliated clinical site-sponsored or related activity, including any nursing-related course or clinical training activity; and (c) a student, faculty, or clinical faculty's use of alcohol or any drug in such a way that their performance in any nursing course, including activities at any clinical site, is impaired.

IV. Policy Requirements

A. Drug and Alcohol Prohibitions and Duty to Notify of Drug/Alcohol Convictions

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1. Substance abuse as defined in this policy, or a violation of any term of the Jacksonville State University Drug-Free Workplace Policy while engaged in any University affiliated experience is strictly prohibited. All students, faculty, and clinical faculty in the CHPW courses or programs are required to abide by these rules when reporting to nursing-related courses and clinical experiences and while at affiliating clinical agencies (including parking lots and grounds).
2. Under no circumstance should CHPW students, faculty, or clinical faculty participate in CHPW therapy-related courses or clinical activities while they are impaired.
3. CHPW students who violate these rules will be deemed to be unable to meet the essential qualifications/functions of the nursing curriculum. CHPW students determined to have violated these prohibitions shall be dismissed from the CHPW.
4. A violation by any CHPW student of any state or federal statute, or regulation established pursuant to such statute, pertaining to the manufacture, improper possession, sale, use, or distribution of a drug or alcohol is strictly prohibited. Any such violation must be reported to the Dean of the CHPW within five days. Such violation, if substantiated, will result in disciplinary action up to and including student's dismissal from the CHPW. A CHPW student who fails to notify the Dean of the CHPW within five days of an administrative action or legal conviction for any such violation shall result in dismissal from the CHPW.
5. Faculty or clinical faculty determined to have violated these prohibitions shall result in termination from the CHPW.

B. Student, Faculty, and Clinical Faculty's Agreement to Submit to Drug Testing and to Consent to Release of Test Results to Dean of the College of Health Professions and Wellness.

1. The student, faculty or clinical faculty must agree to submit to drug testing prior to being assigned to an affiliating agency, for random testing, and for reasonable suspicion. The individual shall sign a consent: a) to abide by the drug/alcohol policies and drug testing policies of each affiliating clinical agency in which a student is assigned; b) to submit to any drug/alcohol testing (random or reasonable suspicion) required by the CHPW and/or the affiliating clinical agency; and c) to release a copy of any and all drug/alcohol test results to the Dean of the CHPW (see Attachment A for consent). Failure to sign such consent shall be grounds for non-placement at an affiliating clinical

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agency and shall result in dismissal from the program in the case of the student or termination in the case of full or part time clinical faculty.

2. A CHPW student, faculty, or clinical faculty's failure to submit to a required drug testing, or attempting to tamper with, contaminate, or switch a sample shall result in dismissal from the CHPW.
3. The cost of all drug/alcohol testing required shall be borne by the person or individual depending on what term we want to use being tested.

V. Procedures for Drug Testing Requested by the CHPW

A. Procedure for Pre-Clinical/Pre-Employment Drug Testing Requested by the CHPW

1. Drug testing for pre-clinical **upper division traditional students in first semester** will be arranged by the CHPW. The cost of this drug testing will be assumed by the student.
2. Drug testing for pre-clinical for **GRADUATE NURSING PROGRAMS students** will be arranged by the student but must be conducted in a qualified laboratory setting. The cost of this drug testing will be assumed by the student. The student will be provided a list of specific drugs for testing by the Director, Graduate Studies.
3. Drug testing for pre-employment for faculty and clinical faculty will be arranged by the faculty or clinical faculty. The cost of this drug testing will be assumed by the employee. The faculty or clinical faculty will provide a copy of the drug test to the Dean, CHPW.

B. Procedure for Random Drug Testing Requested by the CHPW

1. Drug testing for random drug testing will be arranged by the CHPW. The cost of this drug testing will be assumed by the CHPW. Failure to comply with all aspects of random testing will result in dismissal from the program or termination of employment with the CHPW.
2. Students will be arbitrarily selected for random drug testing using a computerized system (depending on program). Random drug testing can occur at any time. The individuals will be notified by faculty/staff if his/her name is selected and will be required to report immediately for testing as directed.

C. Procedure for Reasonable Suspicion Drug Testing Requested by the CHPW

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1. Any CHPW student, faculty, or full/part time clinical faculty who demonstrates behavioral changes reasonably suspected to be related to substance abuse as defined herein will be subjected to testing. A decision to drug test based on reasonable suspicion of substance abuse may be made by a faculty/staff member and/or the clinical agency. The CHPW student, faculty, or full/part time clinical faculty's request to drug test will be documented (see Attachment B) and may be based on a variety of factors, including but not limited to:
 - a. observable phenomena such as direct observation of drug use and or physical symptoms or manifestations of being under the influence of a drug.
 - b. erratic behavior, slurred speech, staggered gait, flushed face, dilated/pinpoint pupils, wide mood swings, or deterioration of work or academic performance.
 - c. information that a student has caused or contributed to an accident that resulted in injury requiring treatment by a licensed health care professional.
 - d. substance abuse-related conviction by a court or being found guilty of a substance abuse-related offense in another administrative or quasi-legal proceeding.
2. Drug testing for reasonable suspicion will be arranged by the CHPW, unless done in cooperation with the affiliating clinical agency. The cost of this drug testing will be assumed by the individual being tested.

D. Collection and verification process

1. Drug testing will be conducted by a certified collector in accordance with established methods and procedures. Confidentiality of the student, faculty, and clinical faculty as well as the validity of the sample will be protected by the testing facility. The procedure for collection as determined by the collection site, will involve a urine sample, securable urine containers, and chain of custody procedures. This procedure ensures that the samples identified to a student, faculty, or clinical faculty actually contain materials from that individual, that the samples are protected from tampering, and that the analysis of them is done in accordance with federal guidelines.
2. The test shall screen for the use of drugs whose use is either illegal, or which are prone to abuse (including alcohol), as determined at the discretion of the Medical Review Officer of the testing facility, training hospital, CHPW or for the use of any drugs which are reasonably suspected of being abused or used by the nursing student, faculty, or clinical faculty.

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3. Non-negative test results will be confirmed by additional testing. If the test is positive, the entirety of the relevant available evidence, including health history, will be used to determine the presence or absence of substance abuse.
4. The Medical Review Officer will notify a CHPW student, faculty, or clinical faculty who has a non-negative drug test. If the results of the individual's test confirm the presence of a prescribed drug (verified negative) the person will be required to obtain a written statement from the prescribing physician or a Substance Abuse Professional (at the discretion of the CHPW) stating that the drug level is within prescribed limits and that the level does not indicate abuse. The prescribing physician or a Substance Abuse Professional must indicate that the drug will not interfere with safe practice in the clinical area. The Medical Review Officer will determine the final status of the drug test. Positive test results shall be communicated to the Dean and documented in the CHPW students, faculty, and clinical faculty records in the CHPW. A positive substance abuse test shall result in dismissal from the program or termination from the CHPW.
5. Failure to submit to any form of required drug testing (pre-employment/pre-clinical/random/reasonable suspicion) shall result in dismissal from the program or termination from the CHPW.

VI. Confidentiality

All drug testing results will be treated by the CHPW as information that is received in confidence and shall not be disclosed to third parties unless disclosure is required by law, the information is needed by appropriate college officials to perform their job functions, disclosure is needed to override public health and safety concerns, or the CHPW student, faculty, or full/part time clinical faculty has consented in writing to the release of the information. The CHPW and the University shall have the right to use and disclose the results of drug testing required by this policy in connection with internal academic purposes and in connection with the defense of any student grievance and any claims filed by a nursing student, faculty, or full/part time clinical faculty by his/her personal representative, in any court of law or with any state or federal administrative agency.

VII. Appeal Process

A CHPW student may appeal the Department's decision to dismiss or not re-admit a student through the established Student Grievance Procedure.

Used with permission from *The University of Alabama Capstone College of Nursing, Substance Abuse Policy/Drug/Alcohol Testing Policy.*

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Last Reviewed: August 2023

Last Revised: August 2023

Adoption Date: May 2014

Subject: CHPW Format for Syllabus

Committee: CHPW Curriculum Committee

Approved: Dean Tracey Matthews

CHPW Format for Syllabus

It is the policy of the College of Health Professions and Wellness to utilize the following template when developing a Syllabus. All courses must adhere to the format below to provide consistency among all graduate and undergraduate courses.

Syllabus Template (attached)

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**Enter Course Number and Title Here: For Example: NU 400 Research and Outcomes
Syllabus (must match JSU catalog name)
Enter Term, Year: (Example: Spring 2014)**

COURSE FACULTY

Provide faculty contact information (name/title/credentials, office location and room number, office & cell or home number, email address, office hours) here along with faculty photo (include clinical faculty). For credentials, should be highest level first i.e., PhD, RN

COURSE DESCRIPTION

Place course description here, NOTE this must match the description in the JSU catalog.

COURSE CREDIT

Enter course credit information here including breakdown of lecture, lab, & clinical (if applicable).

PREREQUISITES

Enter prerequisites here

STUDENT LEARNING OUTCOMES

Copy and paste your student learning outcomes here.

COURSE REQUIREMENTS

List the specific requirements for your course (attendance, email, assignment requirements, APA, late assignments, attendance/absences, tardiness, Kaplan® requirement, professional scholar's code letter of agreement, software requirements, labeling of work submitted, classroom decorum, exam policy/review, med calc exam requirements – if applicable, taping policy, etc.).

All course assignments and activities in this course must be completed and submitted for successful course completion.

TEXTBOOK AND LEARNING RESOURCES

List the title of required and recommended textbooks as well as any other learning resources required.

METHODS OF EVALUATION

Please add/change rows as needed to fit individual course needs.

<i>Evaluation</i>	<i>Percentage of Course Grade</i>
Unit Exams	79%
ATI	1%
Final Exam	20%

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COURSE GRADING RUBRICS

Please insert your grading rubrics here.

DISABILITY RESOURCES

1. Disability Resources (DR) provides appropriate and reasonable accommodations for students with documented disabilities. It is the goal of DR to ensure that students with disabilities have equal opportunities to achieve their personal academic goals while maintaining the integrity of JSU's academic program requirements.
2. DR provides reasonable accommodations through a variety of services and programs. Accommodations may include exam proctoring, special testing procedures, extended time on exams, priority registration, interpreter services, captioning services, readers, note-takers, brailled formats, enlarged print materials, alternative formats, and assistive technology. Disability Resources is located in the Student Success Center on the 2nd floor of Houston Cole Library and more information can be located at www.jsu.edu/disabilityresources. DR phone number is 256-782-8380.

CRITICAL DATES PERTAINING TO JSU

In this section, you should provide a hyperlink to the academic calendar.

(Example: www.jsu.edu)

MILITARY-CONNECTED STUDENT STATEMENT

The Office of Veteran Services serves all active duty, guard, reserve, veteran, and dependent students at JSU. If you have any questions about Veteran Services please contact (256) 782-8838, veterans@jsu.edu, If you are a student currently serving in the military (Active Duty, Guard, or Reserves) with the potential of being called to military service or training during the course of the semester, you are encouraged to contact your course instructor no later than the first week of class to discuss the class attendance policy. The instructor may make accommodations for this absence or suggest that you take the course at another time.

Title IX

JSU does not discriminate on the basis of sex in the educational programs or activities that it operates. JSU is required, by Title IX of the Education Amendments of 1972 and Department of Education regulations to implement Title IX, not to discriminate in such a manner. This requirement to not discriminate in educational programs and activities extends to employment by the university

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and to admission thereto. Questions regarding Title IX and the implementing regulations should be referred to JSU's Title IX Coordinator, to the Assistant Secretary of Education for Civil Rights, or to both. For more information about the Title IX grievance procedure, including how to report or file a complaint of sex discrimination, how to report or file a formal complaint of sexual harassment and how JSU will respond to such complaints, please visit our Title IX website at www.jsu.edu/titleix.

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Subject: CHPW Curriculum Change Process

Committee: CHPW College Curriculum Committee

Approved: Dean Tracey Matthews

CHPW Curriculum Change

The process for curricular changes in the College of Health Professions and Wellness is designed to facilitate the development, refinement, renovation, and outcomes management for all programs and is responsive to the needs of a student- centered learning environment, the consumer, and the healthcare system.

Departments in the CHPW may or may not have program or department specific curriculum committees.

Departments that do not have curriculum committees use the following process:

1. Faculty submit curriculum proposals after discussion with department faculty and the department head.
2. Curriculum proposals are submitted through Courseleaf, electronic management system and the College Curriculum committee reviews and votes on the proposal.
3. If the proposal is approved, it moves to the Dean for approval; if it is not approved, the proposal will be returned to the originator.
4. If the Dean approves the proposal, it is moved to the University Undergraduate Curriculum Committee or Graduate Curriculum Committee, depending on program level. If the proposal is not approved, it is sent back to the originator.
5. Upon approval from either the University Undergraduate Curriculum Committee or Graduate Curriculum committee the proposal is sent to the Provost for final approval
6. Should the University-wide committees or Provost not approve the proposal, it will be sent back to the originator.

Nursing Process:

All faculty members must seek approval from their program curriculum committee prior to making revisions to the course in regard to content, method of delivery, and/or method of evaluation (tests, exams, quizzes, checkoffs, clinical models). Textbook adoptions may be at the discretion of the course coordinator/lead faculty and do not need committee approval **unless** the adoption poses substantive changes in the content to be taught, teaching /learning strategies or methods of assessment/evaluation of student learning.

1. Any change to curriculum requires completion of the Curriculum Request for Change form specific to undergraduate or graduate. This form is submitted to the program curriculum committee.

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2. If the change is editorial only, the committee may vote to accept the change or via faculty no protest; however, if the change involves a substantive change, the recommendation will go before program faculty for a vote.
3. If the proposed change goes to faculty for a vote, the Curriculum Request for Change form should circulate via email to the faculty at least one week prior to the vote.
4. If a curriculum change results in a subsequent catalog change, the curriculum proposal is submitted through Courseleaf, electronic management system and the College Curriculum Committee reviews and votes on the proposal.
5. If the proposal is approved, it moves to the Dean for approval; if it is not approved the proposal will be returned to the originator.
6. If the Dean approves the proposal, it is moved to the University Undergraduate Curriculum Committee or Graduate Curriculum Committee, depending on program level. If the Dean does not approve the proposal, it is sent back to the originator.
7. Upon approval from either the University Undergraduate Curriculum Committee or Graduate Curriculum committee the proposal is sent to the Provost for final approval
8. Should the University-wide committees or Provost not approve the proposal, it will be sent back to the originator.

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Subject: Nursing Faculty Fellows

Committee: Faculty Affairs Committee

Approved: Dean Tracey Matthews

CHPW Faculty Fellows

The purpose of JSU CHPW Faculty Fellows is to recognize individuals who have contributed significantly to programs within the CHPW either within or external to the Jacksonville State University Community. We believe our health professions programs are to have dedicated and sincere individuals utilizing their knowledge, energy, expertise, and compassion to improve and promote the quality of health care delivery, We also believe these individuals positively influence the learning environment for those desiring to enter a healthcare profession.

Program Objectives

1. To recognize individuals for dedicated and exemplary service to healthcare professions.
2. To provide students with opportunities to interact with successful practitioners/advocates who are contributing to the quality of life of those we serve.

The designation of Faculty Fellows will be given to no more than two individuals who meet the criteria established by the CHPW.

The criteria to be met for Faculty Fellows are persons who have:

1. A strong commitment to the ideals/purposes of the profession/health care.
2. Superior achievement in endeavors/practice.
3. Recognized leadership abilities.
4. Significant contributions to their profession and/or the community.
5. A commitment to the JSU CHPW and a willingness to participate in the education of students.