UNIVERSITY OF PITTSBURGH  
SCHOOL OF NURSING  

ACADEMIC POLICIES AND PROCEDURES FOR THE  
UNDERGRADUATE AND GRADUATE PROGRAMS  

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<th>TITLE OF POLICY:</th>
<th>UNSAFE STUDENT CLINICAL PERFORMANCE</th>
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<tbody>
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<td>ORGINAL DATE:</td>
<td>MAY 1, 1995</td>
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<td>LAST REVIEWED/REVISED:</td>
<td>MAY 2016</td>
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**POLICY:**  
Students whose clinical practice is determined to be dangerous or potentially dangerous to patients or others will be dismissed from the School of Nursing.

**BACKGROUND:**  
A major aspect of student learning in this School of Nursing occurs in clinical settings with direct student/patient contact. While in clinical courses, students are acquiring knowledge and cognitive and psychomotor skills. In addition, they are developing judgment. Students are expected to perform at the level identified in the curricular level objectives. **Safety** is a critical component of each clinical course.

Faculty members, the School, and the University have a responsibility to patients, the public, and the staff of clinical settings to protect them from unnecessary exposure to dangerous situations. The right of patients and the public to safety is paramount and supersedes students' learning and skill acquisition needs. The American Nurses' Association *Code for Nurses with Interpretive Statements* (1985) requires that "the nurse acts to safeguard the client and public when health care and safety are affected by the incompetent, unethical, or illegal practice of any person." Nursing faculty have this independent obligation as nurses and as faculty members.

 Unsatisfactory clinical performance by students is not necessarily dangerous requiring immediate faculty intervention to protect patients or others. Unsafe behavior, however, is always unsatisfactory and requires immediate intervention to protect patients and the public from unnecessary exposure to dangerous, or potentially dangerous, situations. Examples of unsafe behavior include:

(a) medication errors (administering, ordering, or prescribing) that could result in serious injury or death, and

(b) performing any procedure or administering any medication without direct faculty supervision after specific instruction by the clinical faculty member that this level of supervision is required.
PROCEDURE:  

When faculty makes a professional judgment that a student's behavior is dangerous, or potentially dangerous, to patients or others the faculty should initiate the procedure outlined below. This procedure is intended to review the specific judgment. It is not a substitute for ongoing formative evaluation of student performance by faculty, ongoing communication between clinical faculty and student, or documentation of the evaluation process. A student's prior performance (clinical or didactic) may, however, be taken into consideration when determining the response to the unsafe behavior.

1. When the faculty member makes a professional judgment that the student's behavior is dangerous or potentially dangerous to patients or others, the faculty member relieves the student immediately of direct patient care responsibilities and communicates concerns to the primary teacher and the Associate Dean for Clinical Education maintains written anecdotal notes and written clinical evaluation form, provides the Associate Dean for Clinical Education an objective, detailed description of the events or behavior in writing.

2. On the day notified by the faculty member the Associate Dean for Clinical Education suspends the student from all clinical activities pending the assessment of the faculty member's concern(s). The Associate Dean for Clinical Education communicates this suspension in writing to the student, the faculty member, primary teacher, department chair, and Dean.

3. Within 2 academic working days of the suspension if the Associate Dean for Clinical Education does not concur with the faculty member's judgment that the student's the behavior in clinical is dangerous, or potentially dangerous to patients or others then the Associate Dean for Clinical Education lifts the suspension, makes recommendations to the faculty member and the primary teacher and communicates these recommendations to the department chair and provides the student with written notice of the findings, expectations, outcome measures, and plans for future monitoring of performance.

4. Within 2 academic working days of the suspension if the Associate Dean for Clinical Education concurs with the faculty member's judgment that the student behavior in clinical is dangerous or potentially dangerous to patients or others and finds mitigating circumstances, then the Associate Dean for Clinical Education, along with the faculty member, the primary teacher and the department chair, determines the conditions under which the suspension will be lifted and provides the student with written notice of the findings, expectations, outcome measures, and plans for future monitoring of the student's clinical performance.

5. Within 2 academic working days of the suspension if the Associate Dean for Clinical Education concurs with the faculty member's judgment that the student's behavior in clinical is dangerous or potentially dangerous to patients or others and does not identify mitigating circumstances, then the Associate Dean for Clinical Education requests a review of the judgment by a faculty panel.
6. Within 5 academic working days of the request by the Associate Dean for Clinical Education, the Faculty Review Panel reviews the judgment that the student’s behavior in clinical is dangerous or potentially dangerous to patients or others and provides a written opinion to the Associate Dean for Clinical Education.

7. If the Faculty Review Panel does not concur that the behavior is dangerous or potentially dangerous to patients or others then the Associate Dean for Clinical Education along with the clinical faculty member, the primary teacher and the department chair, determines the conditions under which the suspension will be lifted and provides the student with written notice of the findings, expectations, outcome measures, and plans for future monitoring of clinical performance.

8. If the Faculty Review Panel concurs that the behavior is dangerous or potentially dangerous to patients or others, then the Faculty Review Panel recommends to the Associate Dean for Clinical Education that the student be dismissed from the School on safety grounds. The Associate Dean for Clinical Education then recommends to the Dean that the student be dismissed from the School on safety grounds.

9. Within 5 academic working days of receiving the recommendation from the Associate Dean for Clinical Education, if the Dean does not concur that the student’s behavior in clinical is dangerous or potentially dangerous to patients or others then the Dean along with the faculty member, the primary teacher, the department chair, and the Associate Dean for Clinical Education determines the conditions under which the suspension will be lifted and provides the student with written notice of the findings, expectations, outcome measures, and plans for future monitoring of clinical performance.

10. Within 5 academic working days of receiving the recommendation from the Associate Dean for Clinical Education, if the Dean concurs that the student’s behavior in clinical is dangerous or potentially dangerous to patients or others, then the Dean communicates the dismissal from the School in writing to the student, the faculty member, the primary teacher, the department chair, the Associate Dean for Clinical Education and the Associate Dean for Student Affairs and Alumni Relations that the student has been dismissed.

Faculty Review Panels

Since there is a difference in the level of practice between undergraduate students and graduate students (in advanced practice curricula), there will be a separate review panel for undergraduate and graduate students. All full-time faculty in the School of Nursing who are professional nurses licensed in the Commonwealth of Pennsylvania are eligible to sit on the faculty review panels (FRPs). Specific criteria for membership for each FRP are listed below. Each FRP will consist of three faculty members, selected by the Associate Dean for Clinical Education.

The faculty member initiating this process cannot participate as a member of the FRP for the specific review.

FRP for Undergraduate Students
The FRP for Undergraduate Students will consist of three members. Members of this panel will be tenured, tenure stream, or non-tenure stream faculty who teach primarily at the undergraduate level.

FRP for Graduate Students
The FRP for Graduate Students will consist of three members. If the unsafe practice occurred during direct patient contact, members of this panel will be certified as advanced practice nurses (clinical nurse specialist, nurse anesthetist, nurse midwife, or nurse practitioner) by the appropriate credentialing body. If the unsafe practice occurred during indirect care (e.g., Failure to protect the privacy or confidentiality of patient data or to address a patient safety issue at the system level), the FRP will include faculty with system level expertise.

Footnote: The Associate Dean for Clinical Education will follow the administrator for the day procedure as determined by the Dean’s Office.

Reference: Policy 366: Student Impaired Clinical Performance
Policy 368: Student Performance Improvement Plan

Approved by Total Faculty: 03/95, 12/10, 10/11
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