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, cognitive and psychomotor skills. In addition, they are developing judgment. Students are expected to perform at the level indicated in the curricular objectives. Safety is a critical component of each clinical course.

The right of patients and the public to safe professional practice supercedes students’ learning and skill acquisition needs. The responsibility of the University, the School, and the faculty to protect patients, the public, and the staff of clinical settings from unnecessary exposure to dangerous situations is paramount. Faculty have the obligation to assess and make professional judgment with respect to each student’s fitness for safe practice during clinical hours.

Students have the responsibility to practice without undue risk to themselves or others, and to maintain fitness for duty throughout all clinical hours. When a faculty member makes a professional judgment that a student’s psychological and/or physical condition has impaired his/her ability to perform in accordance with course-specific clinical behaviors, the student will be asked to leave the clinical area. The student will be given the opportunity to hear the reasons for the suspension, and to discuss the incident with a representative from the School.

When the clinical agency has a policy regarding fitness for duty, in addition to the School of Nursing policy, that policy will be followed.

Students who are currently licensed by the Commonwealth of Pennsylvania must follow the procedures specified by the State Nurse Practice Act and the State Board of Nursing. Students licensed in another state will be expected to follow procedures specified by the Nurse Practice Act in the state where they are licensed. Any evidence of impaired practice which falls under regulations of the Pennsylvania State Board of Nursing must be reported. The School of Nursing will comply with this regulation. The State Board may suspend the RN’s license to practice, but stay further disciplinary action if the RN agrees to participate, and is eligible to participate, in the Voluntary Recovery Program. The School of Nursing will follow the policies and procedures of that program regarding assessment, treatment, and return-to-work or school monitoring.

Any expenses incurred as a result of assessment, treatment, transportation, and monitoring are solely the responsibility of the student.
PROCEDURE: 1. Initial Identification
   a. When there is concern that a student poses a risk of harm to self or patients, the faculty member may remove the student from the clinical area.
   b. The student is informed of temporary suspension from clinical practice and is sent to the School of Nursing for an immediate meeting with a representative of the School. If warranted by the student’s condition, the clinical instructor, campus security, or a representative from the School may accompany the student to the nearest healthcare facility for emergency treatment prior to bringing the student to the School for the meeting.
   c. The documented evidence of impaired clinical performance is reviewed with the student and the student has an opportunity to provide an explanation.
   d. When the cause of the impaired performance has been addressed satisfactorily, the student will be permitted to return to the clinical area.
   e. If the student requests a formal hearing, one will be conducted in accordance with the University’s judicial procedures, and the student has the right to representation.

2. Referral and Treatment
   a. Before being permitted to return to the clinical area, the student may be mandated to obtain a health assessment. This assessment may be done at the University Health Center, the Emergency Department of the nearest hospital, or any healthcare facility authorized by the student’s health insurance carrier, at the student’s expense.
   b. The student has the right to refuse this assessment, treatment, and further monitoring. However, the School of Nursing may tell the student that they are not permitted to return to clinical practice without certification from a recognized healthcare provider that they are either undergoing treatment or do not need treatment and are fit for duty.

3. Return to Clinical Practice
   a. If the student has been referred for treatment, the student will be permitted to return to clinical practice only on the specific recommendation of an appropriate treatment provider that the student is capable of safe and skilled clinical performance.
   b. Confidential medical information will be maintained in a restricted file in the Student Affairs and Alumni Relations.
   c. Information will be shared with treatment providers and others designated by the student, with the student’s written consent. The student may also be asked to give written permission for treatment providers and others to share information with a representative of the School as needed.
   d. No information will be shared with other members of the School of Nursing unless there is a clear and direct need to know.
   e. The student and a representative of the school will sign a return to school agreement, individualized according to the student’s needs. This agreement will delineate the terms of the student’s return to clinical practice.
   f. The School of Nursing has the right to impose conditions on the student’s return to clinical practice as necessary following treatment.
   g. The School of Nursing will provide direct supervision of the student following return to school and clinical practice, and the appropriate Associate Dean of Student Affairs and Alumni Relations will monitor the satisfactory achievement of the student.
   h. Any subsequent behaviors that indicate unsafe clinical performance may be cause for dismissal from the School (See Policy #305).

Approved by Faculty 4/99, 10/11, 3/13
Reviewed 2/05, 10/11, 12-13, 15-16, 18-19, 10/22