2021-2022
GENERAL
STUDENT HANDBOOK
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GENERAL INFORMATION AND POLICIES

MISSION AND VALUES

OUR MISSION

Distinctly empowered to advance health for all

OUR VISION

FIRST IN NURSING

The world’s leading School of Nursing for the public

SHARE OUR VALUES

I-LEAD

Integrity: Respect and advocate for all in every interaction
Leadership: Inspire, empower and influence
Excellence: Unlock potential to transcend expectations
Agility: Innovate for the changing demands in education and healthcare
Diversity: Broaden perspectives, embrace open attitudes and enhance inclusivity

DISABILITY STATEMENT

POLICY STATEMENT ON NON-DISCRIMINATION

Consistent with its mission and philosophy, and those of The University of North Carolina at Chapel Hill ("UNC-CH"), the School of Nursing at UNC-Chapel Hill is committed to providing an inclusive and welcoming environment for its prospective and enrolled students, faculty and staff, and to ensuring that educational and employment decisions are based on individuals’ abilities and qualifications. Consistent with this principle and applicable laws, it is therefore the School of Nursing’s policy not to discriminate in offering access to its educational programs and activities or with respect to employment terms and conditions on the basis of race, color, gender, national origin, age, religion, creed, disability, veteran’s status, sexual orientation, gender identity or gender expression.
DISABILITY ACCOMMODATIONS FOR STUDENTS
The School of Nursing provides reasonable accommodations to otherwise qualified students with disabilities, so long as such disabilities, as determined on a case-by-case basis, do not preclude the student from meeting the qualifications considered essential by the faculty of the School of Nursing for successful completion of the educational objectives of its curriculum. These qualifications are described in the UNC-Chapel Hill School of Nursing Essential Standards for Admission, Progression and Graduation.

Students who seek disability accommodations should contact the UNC-Chapel Hill Office of Accessibility Resources and Service at (919) 962-8300. They will determine a student’s eligibility for accommodations and will recommend appropriate resources, accommodations and services.

Approved May 2002, revised August 2011; October 2013

DISRUPTIVE CONDUCT AND WORKPLACE VIOLENCE PREVENTION
The School of Nursing is a community of staff, faculty and students that is committed to a respectful, safe and protected environment, founded in civility and free from violence, in which all can work and learn. Acknowledging that workplace violence falls on a continuum from civility through physical violence, the School of Nursing requires that all members of our community value and respect each other. As a community, the School will make every effort to discourage incivility and protect its individual members from all forms of unacceptable interpersonal aggression including, but not limited to, verbal, written, physical, or any other forms. All members of the School of Nursing will strive to maintain an environment that is free from violence, threats of violence, harassment, intimidation, and other disruptive behavior. Additionally, as part of a larger university campus, the open nature of the building presents many challenges to maintaining a safe environment. Furthermore, the School of Nursing often has faculty, staff, and students who are working and studying beyond the normal operating hours. Members of the School of Nursing community will not tolerate inappropriate interactions from each other or from outside persons. All incidents will be taken seriously and will be dealt with promptly and appropriately. The School of Nursing will provide support and resources to all to ensure that this safe and protected environment happens.

All who participate in or engage with this community will abide by these guiding principles:

1. We value differences among individuals and, in that spirit, require that all treat each other with respect. Interactions in the School of Nursing are expected to be courteous, respectful, and professional.
2. Individuals are responsible for their own behavior and will be held accountable for that behavior.
3. Inappropriate and unacceptable behavior may be a warning sign of impending hostility or violence and will be reported and dealt with in accordance with the policies outlined below.
4. When inappropriate behavior occurs, members of the School of Nursing community are empowered and expected to deal with the situation according to established guidelines.
5. Individuals are expected to keep their own personal safety foremost in their plans and actions and to support others in doing the same.
6. Unacceptable behavior will be dealt with so that the message of zero tolerance is consistent and clear.
7. The School of Nursing will inform and train all members of the School on the University policy and how to carry out their role in maintaining a safe environment.

When inappropriate behavior occurs, the School of Nursing will:

- Respond promptly to immediate interpersonal dangers to staff, faculty and students in the school in accordance with established procedures.
- Facilitate the investigation of threats and other reported incidents, and file necessary reports per University policy with the Employee Services Office of the Human Resources Department.
- Respond to each report objectively, seriously address any allegations, even those that may appear frivolous, thus taking threats and threatening behavior seriously and ensuring that SON members feel safe in sharing their concerns.
- Take disciplinary actions under the University’s disciplinary policy when warranted.
- Support victims and affected workers after an incident.
DEFINITIONS

Definitions of key terms used in this policy are as follows:

**Inappropriate and prohibited behavior** is behavior that can serve as a warning sign of potential hostility or violence. Examples of these kinds of behaviors of interpersonal aggression include but are not limited to:

1. unwelcome name-calling
2. rude* or uncivil (e.g., slamming doors in angry response, making disparaging comments about another worker, purposefully blocking someone’s view or path, harshly criticizing a subordinate in public, vulgar or obscene words or actions, either written or verbal, including email, voice messages, and graffiti.
3. acts of abuse (e.g. verbal statements, including tone of voice, or physical act which may be construed as a derogatory, intimidating, bullying or psychologically or emotionally disturbing (from Canadian teachers assoc.))
4. intimidation through direct or veiled verbal threats
5. throwing objects regardless of size or type or whether a person is the target of a thrown object
6. physically touching another employee in an intimidating, malicious or sexually harassing manner
7. physically intimidating others including such acts as obscene gestures, fist-shaking, or “getting in your face” types of gestures
8. stalking, either in Carrington Hall or off campus.

**Threat:** the expression of intent to cause physical or mental harm. A threat is conveyed regardless of whether the individual communicating the threat has the present ability to carry it out and without regard to whether the expression of threat is contingent, conditional, or placed in the future.

**Physical attack:** unwanted or hostile contact such as hitting, fighting, pushing, shoving, or throwing objects.

**Property damage:** intentional damage to property owned by the state, employees, students, or visitors.

Each member of the School of Nursing community is responsible for upholding the values and actions embodied in this policy. The School of Nursing Dean’s office is responsible for oversight of these principles and key aspects of the policy.

All School of Nursing students, staff and faculty members are responsible for:

- Completing required training sessions,
- Maintaining basic competency in general knowledge and skills related to workplace safety practices and violence prevention principles and strategies

The experience of interpersonal hostility and violence can be extremely upsetting. Such incidents should not be experienced in isolation. Persons with these experiences are encouraged to seek support from individuals within the School of Nursing such as a direct supervisor or Human Resource Manager, who will provide active listening, advice, coaching as the situation dictates.

**REPORTING PROCEDURE**

Any situation that exemplifies inappropriate and prohibited behavior must be reported on a formal basis by the individual speaking with their direct supervisor or the Assistant Dean of Student Faculty Services and/or the Employee Services Department in the Office of Human Resources (962-1483).

All reports shall be made in good faith, and detail the incident thoroughly and accurately. In turn, the person making the report shall be assured of a confidential process, with information released only on a “need-to-know” basis, and that no act of retaliation or discrimination shall result from reporting an occurrence.

The University’s [Workplace Violence Reporting Form](#) must be completed and forwarded to appropriate parties as specified. Information related to the investigation and actions taken are promptly forwarded per University policy. All
members of the School of Nursing community are expected to report all threatening situations, physical attacks, and property damage to University Police.

The Workplace Violence Prevention Committee chaired by the Director of Administrative Services or a designee will be appointed by the Dean’s Cabinet to review and trend data on workplace concerns reported on a quarterly basis. Each reported allegation shall be thoroughly investigated by the direct supervisor in conjunction with the Assistant Dean, Student and Faculty Services, and involve all appropriate parties in the process. This review includes, but is not be limited to, an evaluation of all aspects of the alleged incident to ascertain how such occurrences may be prevented, how well faculty/staff/students managed the occurrence, effectiveness of the interventions utilized, and whether modifications to the School policy, security system, training program, or intervention plan are warranted.

TRAINING PROGRAM

Under the tutelage of the Workplace Violence Prevention Committee (WPVPC), a workplace safety training program specific to the School of Nursing will be developed. This program will be presented by a combination of local law enforcement specialists, WPVPC members, and additional content experts from the local community. The training program will be differentiated into levels and provided at the time of policy implementation, and at least annually thereafter. All current faculty and staff shall complete the basic course, and all those subsequently hired will complete as part of orientation; incoming students shall do so at the time of academic program matriculation. A suggested outline for the training program is presented as an addendum to this document.

A “reference library” of booklets, audio and videotapes, and supportive journal articles will be compiled and placed in key offices throughout the School for access by faculty, staff and students.

EVALUATION

Under the auspices of the Office of Student and Faculty Services, the efficacy of the School of Nursing’s Workplace Safety Program will be assessed at the conclusion of each training session and in an ongoing manner throughout the academic year. Periodic assessments will be conducted to ascertain whether the School community considers the SON a safe environment in which to work and learn, which is the ultimate goal of the training program and awareness education.

STANDARDS FOR ADMISSION, PROGRESSION, AND GRADUATION

INTRODUCTION

The curricula leading to degrees in Nursing from UNC Chapel Hill’s School of Nursing require students to engage in diverse and complex experiences directed at the acquisition and practice of essential nursing knowledge, skills, and function to attain and/or maintain appropriate professional licensure. Coursework, learning experiences, and assessments within each program are intentionally designed to simulate expectations of the professional nursing role. This includes preparation for licensure and certification examinations.

Combinations of cognitive, affective, psychomotor, physical and social abilities are required to acquire the knowledge and skills needed to perform the varied roles of nurses. In addition to being essential to the successful completion of the requirements of a nursing degree, these skills and functions are necessary to ensure the health and safety of patients, fellow students, faculty and other health care providers.

The following standards comprise the five core professional nursing competencies. In addition to academic qualifications, the School of Nursing considers these personal and professional qualifications essential for entrance to, continuation in, and graduation from its nursing degree programs.

Students who seek disability accommodations should contact the University’s Office of Accessibility Resources & Service (ARS) at 919-962-8300. ARS will determine a student’s eligibility for accommodations and will recommend appropriate accommodations and services. The use of a trained intermediary is not acceptable in most clinical situations in that it implies that a student’s judgement must be mediated by someone else’s power of observations, selection, and assessment.
STANDARDS

A. VISUAL, AUDITORY AND TACTILE

- Ability to gather data from written reference materials (including, without limitation, illustrations), oral presentations, demonstrations, observations of a patient and his/her environment and observations of procedures performed by others.
- Ability to perform health assessments and interventions; observe diagnostic specimens; and obtain information from digital, analog and waveform representations of physiologic phenomena to determine a patient's condition.

Examples of relevant activities:
1. Visual acuity – to draw up the correct quantity of medication in a syringe or detect changes in skin color or condition.
2. Auditory ability – to detect sounds related to bodily functions using a stethoscope or to detect audible alarms generated by mechanical systems used to monitor patient physiological status.
3. Tactile abilities – to detect unsafe temperature levels in heat-producing devices used in patient care or detect anatomical abnormalities, such as edema or small nodules.

B. COMMUNICATION

- Ability to communicate, including ability to ask questions and receive answers, with accuracy, clarity, efficiency and effectiveness with patients, their families and other members of the health care team. This includes: expressive and receptive oral and non-verbal communications, such as interpretation of facial expressions, affect and body language.
- Communications (expressive and receptive) include: oral, hearing, reading, writing, and computer literacy.
- Mastery of both written and spoken English, although applications from students with hearing or speech disabilities will be given full consideration. In such cases, use of a trained intermediary or other communication aides may be appropriate if this intermediary functions only as an information conduit and does not serve integrative or interpretive functions.

Examples of relevant activities:
1. Ability to give verbal directions to or follow verbal directions from other members of the health care team and to participate in health care team discussions of patient care.
2. Ability to elicit and record information about health history, current health state or responses to treatment from patients or family members.
3. Ability to convey information to patients and others as necessary to teach, direct and counsel individuals.

C. MOTOR

- Motor and psychomotor function to execute movements required to provide general care and treatment to patients in all health care settings.
- Motor functions include: gross and fine motor skills, physical endurance, strength, stamina and mobility to carry out nursing procedures; perform basic laboratory tests and provide routine and emergency care and treatment to patients.

Examples of relevant activities:
1. Fine motor skills to obtain assessment information by palpation, auscultation, percussion and other diagnostic maneuvers.
2. Physical endurance to complete assigned periods of clinical practice.
3. Mobility sufficient to carry out patient care procedures, such as tracheostomy care or performing emergency airway suctioning.
4. Strength to carry out patient care procedures, such as assisting in the turning and lifting/transfering of patients.

D. BEHAVIORAL, INTERPERSONAL AND EMOTIONAL

- Ability to relate to colleagues, staff and patients with honesty, integrity and non-discrimination.
• Capacity for the development of a mature, compassionate, respectful, sensitive and effective therapeutic relationship with patients and their families, including sufficient emotional and intellectual capacity to exercise good judgment and complete patient care responsibilities promptly and professionally.
• Ability to work constructively in stressful and changing environments with the ability to modify behavior in response to constructive criticism and to maintain a high level of functioning in the face of taxing workloads and stressful situations.
• Ability to participate collaboratively and flexibly as a member of a health care team.
• Capacity to demonstrate ethical behavior, including adherence to the professional nursing and student honor codes, as well as applicable laws and regulations governing the nursing profession.
• Openness to examining personal attitudes, perceptions and stereotypes which may negatively affect patient care and professional relationships.

Examples of relevant activities:
1. Emotional skills to remain calm in an emergency situation.
2. Interpersonal skills to communicate effectively with patients and families of diverse religious, cultural or social backgrounds.
3. Behavioral skills to demonstrate the exercise of good judgment and prompt completion of all responsibilities attendant to the diagnosis and care of clients.

E. COGNITIVE, CONCEPTUAL AND QUANTITATIVE
• Ability to exhibit behavior and intellectual functioning which does not differ from acceptable professional standards.
• Ability to read and understand written documents in English and solve problems involving measurement, calculation, reasoning, analysis and synthesis.
• Ability to gather data, develop a plan of action, establish priorities and monitor treatment plans and modalities.
• Ability to comprehend three-dimensional and spatial relationships.
• Ability to learn effectively through a variety of modalities, including, but not limited to, classroom instruction, small group discussion, individual study of materials, preparation and presentation of written and oral reports, and use of computer-based technology.

Examples of relevant activities:
1. Cognitive skills to calculate appropriate medication dosage given specific patient parameters.
2. Conceptual ability to analyze and synthesize data and develop an appropriate plan of care.
3. Quantitative ability to collect data, prioritize needs and anticipate reactions.
4. Ability to comprehend spatial relationships adequate to properly administer intramuscular injections or assess wounds of varying depths.

Download and sign PDF of the Essential Standards for Admission, Progression and Graduation policy here.

Created 5/02; Revised 8/11; Rev 02/18; Rev 10/19

INCLEMENT WEATHER

In the event of adverse weather conditions, the policies and procedures of the University are the main guide for the School of Nursing. Unless closed by the Chancellor or his designee, the University is always open. Information about the University’s operating status may be obtained by:

• Telephone at 919 843-1234
• University’s home page
• Campus parking and transit information
• Chapel Hill transit updates [919 968-2769]
• Radio broadcast at WUNC (91.5 FM), Wchl (1360 AM) or Wndw (1610 AM)
If the University is open, class, lab and clinical schedules will be followed to the extent possible. Individual faculty and students are in the best position to determine whether they can travel safely to campus or a clinical site. Individual judgments about personal circumstances must be made so that no one jeopardizes their safety and health.

If the University is officially open, but a faculty member is not able to travel due to adverse weather and must cancel a scheduled class or clinical, the faculty member should notify the School of Nursing and students. If Sakai is used in the course, and the faculty member has access to Sakai from home, a notice should be placed there as soon as possible. If the faculty member has access to email at home, a notice should be posted to the appropriate student listserv. In addition, the Office of Admissions and Student Services (919 966-4260) and the Office of Academic Affairs (919 966-7511) should be notified of the cancellation. Finally, faculty are encouraged to place a message on their office voice mail about cancellations.

If class or clinical is canceled, essential learning experiences still need to be met. Faculty may do this in a variety of ways such as adding small blocks of time to future classes or developing alternate guided student learning activities. Make-up sessions should not be planned for weekends, holidays or in conflict with other classes and clinical assignments. Students should check course syllabi for any specific requirements related to adverse weather.

If class or clinical is held on an adverse weather day and all students are not able to attend, faculty will provide make-up opportunities for any activities including exams that might jeopardize students’ progression in the course. If assignments are due, extensions will be given until either the University is open or all students are able to make it to campus.

PROFESSIONAL ATTIRE

The University of North Carolina at Chapel Hill School of Nursing believes that professionalism begins with appearance and attire. The SON Uniform Policy is formulated to ensure high standards of dress and appearance that represent our university to area hospitals and community settings. The values of asepsis, client safety, and client sensitivity are also incorporated into the policy. Faculty reserve the right to ask a student to leave the clinical area if appearance is not in keeping with the SON Uniform Policy.

UNDERGRADUATE UNIFORM

The official uniform for the School of Nursing may be purchased at UNC-Chapel Hill Student Stores:

- Pewter gray scrub pants
- Pewter gray scrub top with UNC SON logo*
- Ceil blue scrub jacket with UNC SON logo*
  - Note: When ordering from UNC-Chapel Hill Student Stores, scrub jackets are not pre-embroidered. Please allow 2-3 weeks for scrub jacket embroidery.
- A white lab coat should not be purchased as it will be provided to each new student at the annual White Coat Ceremony.
- White or black leather (or comparable material) professional shoes and white or black socks will be worn with the uniform. No open back/open toe clogs. Shoes should be clean and in good repair.
- Nametags. All undergraduate students must purchase two (2) nametags (standard size is approximately 1” x 3”). Nametags should have black lettering on a white background and include the following information:
  - FIRST NAME LAST NAME
  - UNDERGRADUATE STUDENT
  - UNC-CH SCHOOL OF NURSING

NAMETAGS

Students must wear a nametag as identification in clinical/research settings. Nametags may be purchased at most uniform or trophy/plaque stores (e.g., Signs Now/Occasions Engraving at Eastgate Shopping Center in Chapel Hill). Name tags and any agency specific ID badges must be visible at all times.
CLINICAL SETTINGS
The uniform must be worn on days in which you are in the clinical area unless faculty specifies otherwise. The uniform regulations stated above apply to many clinical settings. However, clinical practice dress codes may vary among clinical facilities/sites. Students are expected to adhere to any requirements specific to a particular clinical site. Uniforms are only to be worn in clinical areas, simulation labs or designated community events, such as health fairs.

PROFESSIONAL ATTIRE
For certain clinical areas or for picking up patient assignment information, attending classes in the clinical setting (e-charting, CPR etc.), or attending special sessions such as orientation in preparation for the clinical assignment, students are required to wear business attire.

- Scrub jacket or lab coat is required.
- UNC SON nametag is required.
- Pants or slacks to the ankle/shoe.
- Dresses and or skirts must be covering the abdomen and to the knee.

The following are not permitted:

- Jeans
- Shorts
- Halters
- Sleeveless shirts or camisoles worn alone
- Items with logos other than the UNC SON
- Flip-flops, slippers or excessively high-heeled shoes

ACCESSORIES

- Jewelry restricted to one wedding ring and no more than one pair of small earrings in the ear lobe. No large or dangling earrings should be worn in the clinical area or lab settings.
- Necklaces should not be visible.
- One watch with second hand is required.
- No other visible body jewelry.
- No tattoos should be visible.
- Avoid all heavily scented products, e.g. soaps, perfumes, after shaves, deodorants, hair grooming items, laundry products, etc.

HAIR AND NAILS

- Hair is to be worn off the face, and should be neat as well as comfortable. If your hair is longer than shoulder length, it should be tied back.
- Nails should be clean and neatly trimmed. Only clear nail polish is permitted.
- Artificial nails are not permitted in the clinical setting.
- Male students should be clean shaven or have neatly trimmed beards or moustache.

OTHER

- A white or light blue colored shirt may be worn under the uniform.
- In addition to the requirements listed above, students must comply with any dress code policies for nurses set by the clinical agency in which students are participating in a clinical experience.
- Gum chewing is not permitted. It detracts from your professional demeanor.
- Cleanliness is an essential part of providing professional care to clients. Attention to personal hygiene and a clean, unwrinkled appearance are required. It is the right of patients to be cared for by staff who maintain high standards of personal hygiene and a related right of colleagues to expect a non-offensive and hypo-allergenic work environment. Students should report at the beginning of each clinical shift with, and maintain throughout their shift, clean clothing, being free of body odor or excessive perfume, cologne, after shave, fragrance or tobacco odor, and with a clean face, hands and fingernails. Visible tattoos and body piercings other than earrings are strongly discouraged and may be deemed inappropriate.

Revised-March 2011; Implementation: Spring 2011, revised February 2012
GRADUATE

UNIFORMS
All graduate students in the clinical arena for the academic purposes of fulfilling clinical precepting assignments or conducting research must be identified as a School of Nursing student by displaying a proper nametag. During these activities, students are considered individual representatives of the School; therefore the students’ dress and behavior should reflect that professional level of responsibility.

The School of Nursing nametag will be attached to the left front (shoulder). The clinical preceptor or policies of the clinical agency in which the academic activity is being conducted shall designate specific attire.

NAMETAGS
Graduate students engaged in clinical practice or research activities must purchase two nametags (standard size is approximately 1” x 3”). Nametags should have black lettering on a white background and include the following information:

FIRST NAME LAST NAME, CREDENTIALS
GRADUATE STUDENT
UNC-CH SCHOOL OF NURSING

Students must wear a nametag as identification in all clinical/research settings. Nametags may be purchased at most uniform or trophy/plaque stores (e.g., Signs Now/Occasions Engraving at Eastgate Shopping Center in Chapel Hill).

Revised - Sept 2015

SOCIAL MEDIA POLICY

USE OF SOCIAL MEDIA BY SON STUDENTS AND EMPLOYEES

While social media allows the University to reach many audiences including faculty, staff and students, use of social media by School of Nursing faculty, staff and students presents special concerns for privacy and confidentiality. The general use of social media by SON faculty, staff and students is not affected by the following policy;* its use related to confidential information about the School (including the faculty, staff and students), patients or SON-clinical affiliates (agencies with which the SON has entered a contractual relationship to provide clinical experience opportunities for students) is notably restricted.

Social media are defined as, but not limited, to web-based or mobile technologies used for interactive communication. Examples of social media include but are not limited to collaborative projects (e.g., Wikipedia), blogs and microblogs (e.g., Twitter), content communities (e.g., YouTube), social networking sites (e.g., Facebook), virtual game worlds (e.g., World of Warcraft), and virtual social worlds (e.g., Second Life). Regardless of how these forms of media are used, employees and students are responsible for the content they post or promote. Content contributed on these platforms is immediately searchable and shareable, regardless of whether that is the intention of the contributor. Once posted online, the content leaves the contributing individual’s control forever and may be traced back to the individual in perpetuity.

COMMUNICATION

Official SON electronic communication regarding academic classes or academic schedules will occur through School-sanctioned channels, e.g., UNC-Chapel Hill email, listservs, Blackboard, Sakai, and UNC-Chapel Hill websites. Electronic communications for academic courses are NOT permitted outside these channels.

SOCIAL MEDIA

SON students and employees are prohibited from disclosing the following through social media:

- Protected Health Information, as defined by the Health Insurance Portability and Accountability Act (HIPAA) – For example, individuals may not disclose patient names or otherwise refer to patients in any way that identifies them individually, including by their initials or by their location (e.g., hospital name or unit).
• Education Record Information, as defined by the Family Educational Rights and Privacy Act (FERPA) – Employees may not disclose FERPA-protected information regarding students.
• Confidential Personnel Information, as defined by the State Personnel Act – Employees may not disclose confidential personnel information regarding other employees.
• Confidential, non-public or proprietary information about families, clinical facility staff or clinical institutions;
  o The School, its employees and students;
• Copyrighted or intellectual property belonging to the University.
• Comments that express or imply sponsorship or endorsement by the School or the University, unless you are officially authorized to act in this capacity on behalf of the University or the School.

Accordingly, the use of social media for clinical discussions that include any identifiable information related to patients or SON-affiliated clinical facilities is prohibited.

If a faculty member or student identifies themselves as such online (e.g., list affiliation with the School in their Facebook profile), a disclaimer should be added that any opinions or views expressed do not represent the opinions of the School of Nursing or the University of North Carolina at Chapel Hill.

Students in violation of this policy may be considered as having violated the UNC-Chapel Hill Honor Code. Further, like faculty and staff who violate this policy, students may face disciplinary action up to and including termination, and may be subject to personal, civil and/or criminal liability and legal penalties. Violations include, but are not limited to, unprofessional and/or unethical conduct, mismanagement of patient records, breach of confidentiality, revealing privileged communication, among others.

RELATED REFERENCES
• UNC-Chapel Hill Honor Code
• UNC-Chapel Hill ITS policies
• HIPAA
• FERPA
• PCI
• ANA
• NCSBN White Paper

Download and sign PDF of Social Media policy here.

* Other than any issues related to HIPAA, FERPA and other sensitive information as noted at http://help.unc.edu/6475, all of which remain prohibited disclosures, even in personal (social media or otherwise) communications.

Approved by SON Faculty: 04/09/12; 11/19

STUDENT REVIEW POLICY FOR UNSAFE OR UNPROFESSIONAL PRACTICE

The School of Nursing has a legal and ethical responsibility to protect members of the public and the health care community from unsafe or unprofessional nursing practices. Students engaged in the study of nursing who demonstrate practices that endanger the public and/or violate the North Carolina Nurse Practice Act and related Administrative Code Rules or are unable to comply with the School of Nursing’s Essential Standards for Admission, Progression and Graduation may be referred to and reviewed by the Office of the Dean of Students.

This may include, but is not limited to, Emergency Evaluation and Action Committee consideration and/or referral to other entities as deemed necessary by applicable law or policy. Grounds for this referral include, but are not limited to, students that “(1) present physical or emotional problems which conflict with safety essential to nursing practice and do
not respond to treatment or counseling within a timeframe that enables meeting program objectives; (2) demonstrate behavior which conflicts with safety essential to nursing practice” (21 NCAC 36.0320 (d) (1)(2). Additional information regarding the Emergency Evaluation and Action Committee and its policies and procedures is available online at [http://policy.sites.unc.edu/files/2013/04/EEAC.pdf](http://policy.sites.unc.edu/files/2013/04/EEAC.pdf)

Approved by the Academic Affairs Council, August 28, 2014; Revised by Academic Affairs Policy Committee, July 10, 2019.

### STUDENT SAFETY

The School of Nursing seeks to provide a safe environment for students whether on the campus, within the school or in assigned clinical practice settings. At the campus level, the Department of Public Safety publishes a variety of [campus and community security measures](http://policy.sites.unc.edu/files/2013/04/EEAC.pdf).

Students are encouraged to download the [Rave Guardian Safety App](http://policy.sites.unc.edu/files/2013/04/EEAC.pdf) to enhance personal safety both on and off campus.

School of Nursing and classroom safety is outlined in *Disruptive Conduct and Workplace Violence Prevention* and in the document describing SON Emergency procedures.

Agency specific safety guidelines, including parking and safe transit to and from the physical facility or client’s home, are reviewed with students prior to entering the clinical setting for students at all program levels. A required web-based orientation for clinical placement at the undergraduate level outlines safety precautions within any acute care clinical setting in “Student and Faculty Core Orientation.”

Approved by the Academic Affairs Council, September 22, 2014.

### TRAVEL REGULATIONS

#### UNDERGRADUATE

Because of the broad scope of clinical facilities and locations, undergraduate nursing students must have access to a car. For information about the North Carolina requirements for automobile liability insurance, vehicle registration and operator’s license, write to the North Carolina Department of Motor Vehicles, Raleigh, NC 27602. Students and/or parents are responsible for maintaining appropriate insurance coverage. Some insurance companies may consider such travel as “business driving.”

Expenses for travel are the responsibility of the student.

#### GRADUATE

Graduate students must have access to a car due to the broad scope of clinical facilities and locations.

Expenses for travel are the responsibility of the student.

Students can anticipate travel up to 1.5 hours one-way to a clinical site placement location. Situations may arise when travel one-way may be up to 2 hours. Students are responsible for their own transportation to clinical sites and should consider this factor when calculating and planning for their education expenses and scheduling demands.
COMPLIANCE POLICIES AND CLINICAL REGULATIONS

STUDENT CODE OF CONDUCT
We, the students of the School of Nursing at the University of North Carolina, Chapel Hill, believe that professional behavior plays an important role in our ethical development as nurses. We are committed to demonstrating professional behavior in our roles both inside and outside of the School of Nursing. This goal will be supported through adoption of the following ideals:

We are committed to conducting ourselves in a manner that appropriately represents the prestigious institution which we attend. We seek to reflect the utmost respect for ourselves, and our instructors, classmates, mentors, patients, and the wider community. SON students will:

- Present themselves in a manner that is representative of the School of Nursing dress code.
- Raise their hands when appropriate during lecture and wait to be called on before speaking.
- Contribute personal comments and experience only when these pertain to the topic at hand.
- Refrain from personal conversations and comments during lectures.
- Avoid using laptops for purposes other than educational or pertaining to class.
- Silence all phones and electronic devices before lectures begin.
- Wait until it is declared appropriate by the professor to gather their things for breaks and at the end of class.
- Avoid leaving the room in the middle of a lecture or exam, and will wait for a break in class.

We assume responsibility for our own actions and are committed to personal growth into a professional role. SON students will:

- Avoid all acts of discrimination.
- Seek accuracy in stating facts, practices, conclusions, and laws.
- Offer only constructive feedback to faculty, staff, and other students.
- Conduct themselves in a manner that fosters trust among peers, faculty, staff, and the wider community.
- Utilize appropriate opportunities to enhance faculty and staff understanding of student needs.
- Examine and discuss questions of interest and freely express opinions without judging others.
- Maintain acceptable academic performance in each course while having protection through administration against prejudiced academic procedures or evaluations.
- Document and seek guidance from clinical faculty about incidents in the clinical setting that provide opportunity for further reflection and personal growth.
- Utilize opportunities to enhance their communication and critical thinking skills.
- Contribute to the development of the professional nursing curriculum.

We are committed to strictly upholding the UNC Honor Code and recognize its importance to the institution and to our professional growth. Students will:

- Seek to display the ideals of integrity, honesty, competence, and fairness.
- Provide assistance and guidance among themselves to uphold the UNC Honor Code.
- Maintain their own belongings, including their own mailboxes and lockers, without disturbing or offending others.

We are committed to enhancing and preserving the health of the community through education and awareness. Students will:

- Advocate for the rights of patients while maintaining patient confidentiality.
- Advocate for the nursing profession in the larger community.
- Strive to secure and maintain their own personal health.
• Support access to health resources for each other and for all members of the community.
• Have the right to belong or decline to be a part of any group or organization.
• Promote and develop a learning environment that respects human rights, values and choices, including cultural and spiritual beliefs.

Written: 2008 Class Board
Adopted: 2008 UG Student Body, spring 2008
Approved: Baccalaureate Executive Committee, April 2008

STUDENT CRIMINAL BACKGROUND CHECK POLICY
In order to comply with the “Regulation on Student Applicant Background Checks (#700.5.3[R]) policy adopted by the General Administration of The University of North Carolina as well as the contractual mandates of clinical agencies to which students are assigned for clinical education experiences, the School of Nursing (SON) requires all affiliated students to undergo a Criminal Background Check (CBC). The CBC shall be performed: 1) at the initiation of this policy, 2) following admission acceptance but prior to program matriculation, 3) upon program re-entry subsequent to a leave of absence, program withdrawal or program separation greater than thirty consecutive days, and 4) when deemed necessary by School administration. All offers of admission to the SON issued subsequent to August 2007 will stipulate the applicant’s admission as contingent upon the results of the CBC. Any student who fails to comply with this requirement may not enroll in the SON.

The CBC must be performed, at students’ expense, by a qualified vendor selected by the University or by the SON in concert with University specifications, and will meet the following criteria:

• CBC must be completed prior to program matriculation or as designated above.
  o Exception: checks for students admitted within 72 hours of the first day of class may be “in process” by student’s matriculation date but must be concluded within five business days following the first day of class.
• CBC will be initiated using student’s full legal name and date of birth as identifiers.
• CBC must cover the past seven (7) years, or the time period since the student’s 16th birthday, whichever is less.
• CBC must cover all geographic addresses, both domestically and internationally, associated with the student’s complete residential history, places of employment, and educational institutions the student has attended, for the last seven (7) years or since turning 16 years of age.
• CBC must include:
  o A search for felony and misdemeanor charges and convictions (except minor traffic related violations) in all local, state, federal court systems and sexual offender/predator databases associated with reported addresses
  o A review of The UNC Suspension and Expulsion Database, The National Student Clearinghouse and The NC Department of Public Instruction enrollment database (when available),
  o A check against the DHHS Office of the Inspector General's List of Excluded Individuals/Entities (LEIE) and the General Services Administration's Excluded Parties List (EPLS), and
  o When available, the UNC Suspension and Expulsion Database, National Student Clearinghouse and NC Department of Public Instruction enrollment database
• The vendor must make available to the SON an electronic copy of the report.

Students must sign a Release to Share Background Information and Agreement to Report Future Felony or Misdemeanor Convictions form, which enables the School to share information obtained in the CBC with clinical agencies for the purpose of securing a clinical placement as part of the student’s educational experience. Students must agree to report any felony or misdemeanor charges and convictions (including minor traffic violations), which occur during their enrollment in the SON to the appropriate Academic Assistant Dean (AAD) and/or Asst. Dean, Student Affairs (ADSA). Failure to report and engage in the resolution of current or future felony or misdemeanor charges and/or convictions in a timely (within 10 business days) and complete manner, and failure to provide requisite information pertinent to disposed or pending cases are violations of the University’s Honor Code. All such offenses will be
immediately reported to the Honor System via the Office of Student Conduct, and may serve as grounds for dismissal from the SON.

The SON agrees to use student information for the sole purposes of admission screening and to obtain clinical education placements. In the event the CBC report is positive revealing a felony or misdemeanor charge and/or conviction, the appropriate AAD will discuss the issue directly and immediately with the student prior to sharing the information with a clinical agency. Prior to meeting with the AAD, the student will submit a thorough but succinct statement (approximately one page in length, signed and dated) describing the incidents denoted in the CBC report, how each case was resolved, and lessons learned from the experience. In the event the student determines the positive CBC report is erroneous, the student may request a repeat check be conducted at student expense using additional information provided by the student to aid in the vendor more accurately identifying the student and issuing a corrected report.

The School and University make the final decision as to whether a student with a positive report may proceed to matriculation. The clinical agency makes the final decision about whether a student with a positive report may be placed at that site. The Associate Dean of Academic Affairs will hear student appeals of administrative actions taken as a result of CBC findings.

All student reports conducted prior to the availability of electronic reports will be maintained in paper copy in the School’s permanent student files for a period of no less than ten years post-graduation. All student reports generated electronically will be maintained in a secure electronic database supported by the vendor.

Notes/clarifications:
1. Affiliated students include: degree-seeking undergraduate or graduate students, post-doctoral fellows of the Schools’ T-32 NRSA fellowship programs, students admitted via The Office of Part-Time Studies with special permission to enroll in selected nursing courses, and students participating in the AHEC RN-Refresher Program.

2. Admitted students who initiate a CBC through the School but subsequently withdraw or defer enrollment, are responsible for the standard processing fee.

3. Students who resided outside the US due to active military deployment, service in the Peace Corps or employment with the US Foreign Service, may submit one of the following alternative forms of documentation in lieu of securing an international background check:
   - A copy of the Certificate of Release or Discharge from Active Duty Form (Form DD214) detailing an “honorable” discharge status, OR
   - A copy of the final Description of Peace Corps Volunteer Service detailing completion of services assignment in “good standing”, OR
   - A copy of the letter terminating service in “good standing” from the US Foreign Service or affiliated agency.

Note: University policy exempts students who are less than 16 years or greater than 65 years of age from completion of the CBC. The SON is unable to do so due to contractual requirements of affiliated clinical agencies.

Draft: 0704; Revised 1104; Revised 0705; Revised 0206; Revised 1007; Revised 1208, Revised 0309; Revised 0409. Revised 0809; Revised 1109; Revision 1011 (Clarifications approved by Office of University Counsel (UNC-Chapel Hill) and Office of General Counsel (The University of North Carolina General Administration); Revised 0212.

INFECTIOUS/COMMUNICABLE DISEASE POLICY
Infectious/Communicable Disease Policy Infectious/communicable diseases are common and may be a threat to students and faculty of the School of Nursing. During the performance of clinical practice/research activities, students may have contact with patients/subjects with various infections such as bloodborne transmitted disease (e.g., Hepatitis B [HBV], Hepatitis C [HCV], Human immuno-deficiency virus [HIV; AIDS]), airborne transmitted disease (e.g., tuberculosis[TB], measles, varicella), droplet transmitted disease (e.g., influenza, pertussis, mumps) and contract transmitted disease (e.g., methicillin-resistant Staphylococcus aureus). This contact may expose the student to infectious agents, and may result in the student transmitting an infectious disease to other students, faculty, patients,
family members, and subjects. During pregnancy, the fetus may also be at risk depending on the infection (e.g., Varicella).

To help protect the health and safety of its students, as well as that of patients and subjects, the School of Nursing requires:

1. Initial infectious disease screening
2. Pre-exposure prophylactic immunization against specified infectious/communicable diseases
3. Post-exposure prophylactic follow-up/treatment following exposure to specified infectious diseases such as HBV, HIV, and tuberculosis

**CLINICAL AGENCY INFECTIOUS/COMMUNICABLE DISEASE POLICIES/PROTOCOLS**

Students must comply with the communicable/infectious disease policy and protocols of the agency or facility with which they are assigned for clinical practice or research activity, as well as with the policies of the UNC-Chapel Hill School of Nursing, the University, state and Federal statues, regulations, and the contractual mandates of clinical affiliates.

**ENROLLMENT AND HEALTH SCREENING**

1. All students enrolled in the University, are required by North Carolina statute to present to the University on or before the first day of enrollment a certificate of immunization that indicates that the student has received the vaccinations required. Student failure to submit documentation as described shall constitute significant non-compliance. In accordance with University policy, the student shall have 30 calendar days from the first day of classes to obtain the required immunizations. Students who fail to comply with the immunization requirements by the end of the specified 30 calendar days will be administratively withdrawn from the University by the University's Registrar.

2. Student failure to submit documentation specific to School of Nursing required immunizations, health data and safety elements prior matriculation in the School of Nursing, shall result in the rescission of the student's offer of admission to the School. Non-compliance that occurs after matriculation shall result in the student being withdrawn from lab/clinical practice/research assignments, loss of privileges in applicable Learning Management Systems, incurring an account hold and may impact enrollment.

3. Students have the right to petition for an exemption from statutorily required or School required immunizations. Appeals must be based on a student’s health condition, medical disorder or religious beliefs. Documentation supporting the exemption should be submitted to OASS and include: (1) a written justification from the student's personal medical provider explaining why the vaccination is contraindicated; OR (2) a notarized copy of the “Request for Exemption from Immunization Requirements: Religious Reasons” form.

**HEALTH COSTS AND COVERAGE**

Students may become ill, injured or exposed to infectious/communicable diseases while engaging in clinical practice/research activities. Illness, injury, or exposure to disease may require, but may not be limited to, counseling, prophylactic intervention, diagnostic procedures and/or follow-up treatment.

1. The School of Nursing is **not** liable for health care costs associated with a student’s illness or injury resulting from clinical practice/research activities.

2. For any student who experiences a blood or body fluid exposure incident, the School of Nursing is responsible for medical costs incurred for counseling and both initial and serial diagnostic testing. The student is responsible for all follow-up care and treatment and/or any diagnostic tests/procedures conducted subsequent to the evaluation phase. Should such post-exposure testing become necessary, all results will be held in the strictest confidence by CHS. Designated CHS staff will document exposures they manage in charts maintained only for such exposures and available only for review by CHS designees and, when necessary, the legal counsel for the University. All specimens will be sent to the Roche Biomed Reference Laboratory using a code. For each “exposure” the following will be documented: the route(s) of exposure, the circumstances, and the name and HIV and Hepatitis B status of the source.

3. Any student who exposes another to his/her blood/body fluids and/or an infectious disease during clinical practice/research activities may be responsible for all costs incurred as a result of that exposure.
All School of Nursing students (undergraduate, graduate, and post-graduate) who engage in clinical practice/research activities are also required to submit documentation to OASS of current enrollment in a health insurance plan. Students may carry any health and accident insurance plan that provides coverage for blood/body fluid exposure. Students without current health insurance coverage are strongly encouraged to enroll in the UNC System-wide Student Health Plan. Enrollment in this Plan provides coverage for blood/body fluid exposures as well as other health related problems. For information related to specific coverage and coverage costs of the Plan, students are to contact:

Pearce & Pearce, Inc.
P.O. Box 2270, Florence, S.C. 29503
Phone: 888-722-1668
E-mail: unc-ch@studentinsurance.com
Web: https://www.pearceandpearce.com/PearceSite/Schools/NC/UNC/

Students who fail to provide documentation of health insurance prior to the first day of enrollment in the School of Nursing will not be permitted to matriculate. Students failing to maintain on-going coverage while enrolled in the School, may not engage in any course related activities, and may be dis-enrolled until coverage has been re-established.

SAFETY EDUCATION AND TRAINING
As required by the Occupational Health and Safety Administration (OSHA) students must undergo annual training in the use of universal precautions and transmission-based precautions applicable to individuals with infectious communicable diseases, including HBV, HCV, HIV and tuberculosis. Safety training will be undertaken utilizing the University’s training modules or those required by the UNC Health Care System. The specific communicable disease policies of the agency to which a student is assigned for clinical experience will be reviewed by faculty and students prior to conducting clinical practice/research activities in that facility. Evidence of certification is required by the School upon initial matriculation and annually thereafter, and for each clinical agency assigned. A copy of the certifying document must be maintained in the student’s permanent file in OASS.

STUDENT REFUSAL TO CARE FOR PATIENTS WITH HBV, HCV, HIV, AND TUBERCULOSIS
Refusal to provide care to persons with HBV, HCV, HIV, Tuberculosis, and/or other infectious diseases is inconsistent with performance expectations for students at the School of Nursing and is antithetical with the ethics of the nursing profession. It is expected that students will provide care to persons with HBV, HCV, HIV, and Tuberculosis. In cases when continuing clinical practice/research activities present more than a minimal risk, such as when a student is immunosuppressed, the student may be temporarily reassigned.

Nursing’s mandate to provide care is exquisitely expressed in an ANA publication:

“Nursing is a caring profession, oriented toward patient advocacy. Because of nursing’s long history of standing ready to assist the ill and vulnerable in society, society has come to rely on nursing and to expect that it will rise to the health demands of virtually any occasion. In a sense, this reciprocity is crucial to the profession. All must know that care will be given when needed and that it will not be arbitrarily, prejudicially or capriciously denied.” (American Nurses Association Position Statement on Risk Versus Responsibility in Providing Nursing Care, December 8, 1994.)

REQUIRED IMMUNIZATIONS FOR STUDENTS
1. Diphtheria, Tetanus, Pertussis (childhood DTP) or Tetanus-Diphtheria (Adult TD) – 3 dose series.
2. Tetanus-Diphtheria (Td) Booster – every 10 years, or if no Td Booster obtained in this time period, a Tetanus-Diphtheria-acellular Pertussis (TDaP) vaccination is required.
3. Polio – 3 doses only if under 18 years of age.
4. Mumps – (1) documented administration of two doses of live mumps virus vaccine, or (2) laboratory evidence of immunity.
5. Measles (Rubella) – (1) documented administration of 2 doses of live measles virus vaccine, or (2) laboratory evidence of immunity.
6. Rubella (German measles) – (1) documented administration of two doses of live rubella virus vaccine, or (2) laboratory evidence of immunity.
7. TDaP – documented administration of one dose of Tetanus-Diphtheria-acellular Pertussis since 2005.
8. Varicella (Chicken Pox) – (1) Documentation of completed two-dose series vaccination, or (2) Laboratory evidence of a positive serologic titer

9. Hepatitis B Virus (HBV) Vaccination
   i. Documented administration of three dose vaccination series, completed no later than 6 months from program matriculation for all students engaged in clinical practice/research activities
   ii. Effective May 2001, laboratory evidence of immunity in the form of a post-vaccination serum antibody titer obtained 4-6 weeks following completion of the vaccination series. The titer may be obtained from CHS or primary care provider of choice.

10. Seasonal influenza: documentary evidence of seasonal influenza vaccine submitted prior to admission and annually.

11. Tuberculosis Screening
   i. Tuberculosis Skin Test (TST: purified protein derivative of Mycobacterium tuberculosis) and results within the past 12 months, unless the test is contraindicated upon a health care provider’s written advice. Written verification of the test results and/or contraindication must be submitted to OASS and CHS. Effective May 2001, the University’s Campus Health Services is requiring a two-step initial TST. All matriculating students shall undergo the primary test as described above, then within no less than 7 days and no more than 12 weeks report to CHS or preferred primary provider for a second test. This approach establishes a baseline test reaction in each student. Annual testing is required thereafter.
   ii. A student with a positive TST shall:
      1. If reaction is >5mm induration, adhere to the follow-up/therapeutic regimen of CHS or his/her health care provider
      2. If reaction is >10 mm induration, present documentation of: TST results, follow-up therapeutic regimen, treatment received (if any), and chest film results (if any). If treatment is initiated, a negative chest x-ray must be submitted one year post-diagnosis. An Annual TB Symptoms Questionnaire completed by CHS or the student’s health care provider is required annually thereafter
      3. A student who has diagnosed pulmonary symptoms suggestive of TB shall refrain from contact with patients/subjects until his/her health care provider submits written documentation that the health of patients/subjects is no longer jeopardized. Neither faculty, staff nor students of the School of Nursing may “read” a student’s TST.
      4. Persons allergic to the preservative in the TST, have been vaccinated with BCG or prefer an alternative to the TST, may instead undergo QuantiFERON-TB Gold testing initially and on an annual basis to diagnose current and latent cases of TB.
      5. All students traveling outside the US must obtain a TST 6-8 weeks subsequent to their return to the US L. Other vaccinations: Students participating in international travel which is funded by the University or for which course credit is awarded must adhere to the University’s policies related to international travel, including adherence to all health and security requirements established by the Centers for Disease Control and Prevention and/or the US Department of State.

NOTE: Immunizations A through F are stipulations of the North Carolina immunization statutes and upheld by the University of North Carolina at Chapel Hill: http://www.immunize.nc.gov/schools/ncruleslaws.htm

IMMUNIZATION AND INFECTIOUS DISEASE RECORD
An immunization record shall be established and maintained in OASS and in CHS.

1. OASS shall maintain records of the following:
   i. TST results and associated documents, if any
   ii. Documentary evidence of immunizations (DPT, TDaP, MMR, Varicella, Influenza, HBV and seasonal influenza)
   iii. Signed vaccination contraindication and religious exemption forms
   iv. Documentation of vaccinations required for international travel
   v. OSHA training and test results
   vi. Anecdotal documentation of exposure incidents involving students
   vii. Documentation of physician’s recommendation of return to clinical setting following exposure or positive test results.
2. Campus Health Services maintains official records of 1-4 above, plus:
   i. Polio vaccination
   ii. Official records of exposure incidents involving students

SCHOOL OF NURSING RESPONSIBILITIES AND RESOURCES

INFECTIOUS DISEASE COORDINATOR

A faculty member designated by the Dean serves as the Infectious Disease Coordinator to facilitate communication and dissemination of information about infectious disease control. The Coordinator apprises academic administrators and faculty of CDC recommendations, University, School, and/or agency requirements and other applicable information. The Infectious Disease Coordinator may serve as a resource to students who are exposed to an infectious disease. The University’s CHS will maintain official records of students' exposure incidents that may occur during clinical practice/research activities. CHS will serve as an available consultant for local providers when a needlestick exposure occurs off-site. In the consultant capacity, CHS will provide local providers with a student’s health record information and information related to the CHS blood and body fluid exposure protocol. CHS will not serve as infectious disease consultants in the case of off-site exposures, however, they will manage care of the student upon the student’s return to the UNC-Chapel Hill campus. It is the responsibility of the clinical faculty to notify the Infectious Disease Coordinator or designee when exposure incidents occur. Anecdotal records of exposure incidents will be submitted to OASS to be filed with the student's record. The following documents addressing University policy and North Carolina law are available for students’ review/copy in the Office of the Infectious Disease Coordinator, Dr. Margaret Miller, Assistant Dean, Suite 1400, Carrington Hall:

   A. North Carolina Immunization Law General Statutes of North Carolina
   B. General Statutes of North Carolina
      1. Control Measures for Communicable Diseases
      2. Control Measures – HIV
      3. Control Measures – Hepatitis B
      4. Control Measures – Tuberculosis
   C. OSHA Occupational Safety and Health Standards, Bloodborne Pathogens
   D. Exposure Protocol for Students at UNC-Chapel Hill
   E. CDC Infection Prevention Guideline for Outpatient Settings

EXPOSURE INCIDENTS

An “exposure incident” refers to a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee’s duties [a student's clinical practice/research activities] (OSHA). Students who follow the recommendations developed by the Centers for Disease Control (CDC Universal Blood and Body Fluid Precautions) have minimal danger of contracting any infection in the course of their clinical practice/research activities. When an incident occurs, students must follow the Exposure Protocol for Students at UNC-Chapel Hill as established by CHS.

FOLLOW-UP TO EXPOSURE TO BLOOD/BODY FLUIDS

Initial and subsequent care and follow-up activities including recommendations related to counseling, prophylactic/treatment regimens, and continued or restricted practice activities following a student's exposure incident will be determined by the student’s health care provider (in collaboration with the student) and other appropriate health care professionals. In the absence of a primary health care provider, the student should utilize CHS for health care.

All determinations regarding source of exposure including contact with source, notification of the source’s health care provider, testing of the source, and applicable laws/regulations regarding confidentiality will be made by the student’s health care provider.

1. In the case where source and student testing has been performed and evaluated, CHS will provide the student with information regarding the health care professional’s opinion.
2. “Exposure incidents” are reported to the appropriate sources by CHS. Documentation maintained by the School of Nursing is strictly anecdotal.
STUDENT AS SOURCE OF BLOOD OR BODY FLUID TO ANOTHER INDIVIDUAL

The following steps are recommended when a student has exposed another individual (to his/her own blood/body fluids during practice, research or other care activities:

1. The exposed individual should immediately call the Campus Health Services Needlestick Hotline, 919-966-6573 during week-day hours (8am – 5pm). After hours call 919-966-6573 and have the Health Link nurse page the on-call CHS physician. Students on-site should report to CHS immediately after the call. Off-site students should report to CHS immediately upon return to the UNC-Chapel Hill campus. Health care providers at CHS determine any needed follow-up for the exposed individual in accordance with their Bloodborne Pathogen Exposure Protocol.

2. In any instance where students practicing at UNC Hospitals are the source of a blood or body fluid occupational exposure to a patient, that exposure must be reported to Hospital Epidemiology at (919) 966-1638. The information must also be reported to the appropriate unit of the non-UNC Hospitals agency(ies) to which the student is assigned.

REFERENCES


Campus Health Services, University of North Carolina at Chapel Hill (2011). Bloodborne pathogen exposures – students (policy number: INF-N-03).


HEALTH AND SAFETY COMPLIANCE PROGRAM

OVERVIEW

Infectious/communicable diseases are common and may be a threat to students and faculty of the School of Nursing (SON). During the performance of clinical practice/research activities, students may interact with clients/research participants with tuberculosis (TB), hepatitis B (HBV), HIV/AIDS, and other infections. This contact may expose the student to infectious agents and may result in the student transmitting an infectious disease to other students, faculty, clients, family members, and research participants. During pregnancy, the fetus may also be at risk. Conversely, the student’s health status may adversely impact the student’s abilities to interact with clients/research participants. Should an exposure or high-risk situation occur, clinical or research experiences may require alteration to provide optimal student learning and to ensure the well-being of both client and student.

Additionally, state and federal statutory regulations, University policy and accreditation standards for affiliated clinical agencies require that nursing students demonstrate particular cognitive and clinical competencies consistent with minimum practice standards. As such, the School is contractually mandated to ensure all students attain and maintain full compliance with each required competency detailed in this policy. Further, the School is contractually obligated to share individual student compliance data with health care agencies to which students have been assigned for clinical educational experiences.

THE STUDENT’S RESPONSIBILITIES

Each enrolled student is accountable for maintaining his/her own health, protecting him/herself and the clients/research participants with whom he/she interacts from communicable/infectious disease, and attaining and maintaining competency with identified practice standards. Further, students must attain and maintain compliance with SON/UNCCH requirements from matriculation through the last day of class in the semester of graduation, and to clinical agency requirements minimally six weeks prior to and throughout the semester of assignment. In all cases,
compliance is achieved by submitting documents to the School’s external compliance vendor by posted due dates. Any element slated to expire during a given semester must be completed prior to the start of the term.

**EXCEPTIONS**

- Doctor of Philosophy (PhD) students must meet compliance requirements commensurate with the intensity of client/human subject contact they experience through research or employment activities. These students comply with all universal requirements prior to matriculation, submitting appropriate annual renewal documentation as needed. If the student’s situation changes, as with employment or dissertation work, the student must consult with the Asst. Dean, Student Affairs, and attain compliance with applicable requirements prior to engaging in an elevated level of client/subject contact.

- Requirements by contact level:
  - *No contact*: matriculation requirements; exceptions: drug screening, demonstrated Hepatitis B immunity, professional liability insurance, AHA-BLS certification, NC RN license, and AHEC Core Orientation
  - *Indirect contact, or non-invasive direct contact*: matriculation requirements; exceptions: demonstrated Hepatitis B immunity, professional liability insurance, AHA-BLS certification, and NC RN license
  - *Invasive direct contact*, to include serving as Teaching Fellow: matriculation requirements without exception

**CONSEQUENCES OF NON-COMPLIANCE**

Students admitted to the SON are of expected to be of strong character and high integrity who epitomize professional standards and consistently demonstrate policy compliance. However, should a student(s) fail to satisfy initial requirements or meet compliance standards continually throughout the program of study, the following will occur:

- Upon program entry, any student who fails to attain compliance by the first day of class, may not attend classes. (Exception: students admitted less than two weeks prior to the first day of class must meet compliance by end of the first week of class).

- Continuing students deemed non-compliant by posted compliance deadlines and/or first day of class in any term, will be withdrawn from enrolled clinical course(s), and, following advisement by the appropriate program Assistant Dean, will establish an alternate study plan and re-enroll in needed clinical courses in a later semester.

- Students who attain compliance initially but fail to properly maintain compliance with School, University or agency-specific requirements will jeopardize their Sakai access, incur an academic hold on their UNCCH account, have their clinical privileges revoked, and incur a grade penalty in all enrolled courses. If the student doesn’t respond within 72 hours, the student will be reported to the respective Progression Review Committee for violation of unprofessionalism by violation of this policy. If the student doesn’t respond within 72 hours, the student will be reported to the respective Progression Review committee (PRC) for violation of this policy and unprofessionalism. The PRC will review the incident within 48 hours and take definitive action on the student’s status which may include course disenrollment, semester suspension, or program dismissal.

*Note:* Students are accountable for all course content, assignments or tests missed while Sakai access is withdrawn. Faculty are not responsible for disseminating missed content or providing alternative assignments or testing opportunities.

- **Repeated failure to attain or maintain compliance with SON/UNCCH/agency compliance requirements may result in student disenrollment. Note: no grace period exists following the confirmed expiration date or posted submission deadlines.**

**INTERNATIONAL TRAVEL**

The SON values international education, research and service experiences. Students participating in international travel funded by UNCCH or for which course credit is awarded must adhere to the UNCCH’s policies related to international travel, including adherence to UNCCH policy related to high-risk or prohibited destinations (see: [http://global.unc.edu](http://global.unc.edu)). In addition, all such students must be administratively cleared by Office of Student Affairs (OSA) prior to, and upon return from, any travel outside the United States. UNCCH policy also requires student adherence to all health and
security requirements established by the Centers for Disease Control and Prevention
(http://wwwn.cdc.gov/travel/default.aspx) and/or the US Department of State (http://www.state.gov/travel/). Neither
UNCCH policies nor SON requirements related to international student travel may be modified by individual faculty,
campus departmental/school personnel or staff of external organizations. Exceptions to policies or requirements are
not allowed. ( Approved: SON Academic Affairs Council, 09/08/09; reaffirmed AAD/AAPC 10/19)

THE SCHOOL OF NURSING’S RESPONSIBILITIES

It is the legal responsibility of the SON to maintain documentary evidence of policy compliance in each student’s
permanent file. Further, the SON communicates requirement expectations to students through an external compliance
vendor – a secure, web-accessible, name/email authenticated database and document repository (currently,
CastleBranch). The system provides easily identifiable compliance requirements for the SON, UNCCH and clinical
agencies by containing forms, instructional documents, tutorials, web links, etc. necessary for meeting compliance
standards. Through this 24/7 accessible system students independently monitor their compliance status and receive
reminders of impending deadlines and expirations.

REQUIREMENTS

Matriculation to the nursing program requires satisfying the following requirements. Documentation must be
submitted for official review through the School’s external compliance vendor:

HEALTH REQUIREMENTS

(Based on NC BON regulations and/or CDC guidelines; detailed requirements available via external compliance vendor)

- Assessment of current health status* (includes physical examination and psycho-emotional evaluation);
  original form must be submitted to OSA for inclusion in permanent student file
- Measles/Mumps/Rubella^: evidence of definitive immunity
- Diphtheria/Pertussis/Tetanus^: evidence of lifetime and current immunity
- Varicella^: evidence of definitive immunity
- TB screening^: current evidence of negative screening prior to matriculation and annually
- Hepatitis B: evidence of definitive immunity
- Seasonal influenza vaccination^: evidence of annual vaccination

SAFETY REQUIREMENTS

- Current AHA-BLS Certification
- Annual OSHA training/testing
- Annual validation of personal health/accident insurance coverage^
- Background check^*** conducted in strict accordance with SON policy (Student Criminal Background Check
  Policy) based on legal name, date of birth and student provided SSN, and covering the lesser period of the past
  seven years or since the student’s 16th birthday, to include a search of:
  - all geographic addresses, both domestically and internationally, associated with the student’s
    complete residential history, places of employment, and educational institutions attended
  - all felony and misdemeanor charges and convictions;
  - the national Sexual Offender/Predator Database check,
  - the Office of the Inspector General’s List of Excluded Individuals/Entities (LEIE) and the General
    Services Administration’s Excluded Parties list (EPLS), and
  - the UNC Suspension and Expulsion Database, National Student Clearinghouse and NC Department
    of Public Instruction enrollment database (as available).
- Annual 12-Panel Urine Drug Screen** Includes: AMP (amphetamine), BAR (barbiturates), BZO
  (benzodiazepines), COC (cocaine), THC (marijuana), MTD (methadone), mAMP methamphetamine),
  MDMA (ecstasy), OPI (opiate), PCP (Phencyclidine) PPX (Propoxyphene), and OXY (oxycodone).
LEGAL REQUIREMENTS

- **Confidentiality Statement**^*
- Annual HIPAA training/testing ^
- Annual evidence of professional liability insurance (only UNC policy accepted; coverage level: $1M per occurrence/$3M aggregate)
- Unrestricted RN License (as applicable to student classification)
- AHEC Core Orientation completed annually

UNIVERSITY/SCHOOL OF NURSING POLICY DOCUMENTS

- **Essential Standards of Admission, Progression and Graduation**^*
- **Criminal Background Check Release Form**^*
- **Social Media Policy for Faculty, Staff and Students**^*
- **Acknowledgement of SSN, Visual Image and Student Handbook Form**^*
- **Academic Integrity and University Honor Code education modules**^*

*Designated forms are submitted to the external compliance vendor and Office of Student Affairs for inclusion in student's permanent file

** Background check and drug test must only be completed by School's approved external vendor

^ Universal requirements (applicable to all students)

Prepared: 12/09; rev 03/11; rev 02/12; rev 05/13; rev 05/16; rev 07/17; rev 08/18 (approved AAPC); rev 10/2019 (app. AAD/AAPC 2019)

CPR CERTIFICATION REQUIREMENTS

All students are required to present proof of CPR certification. Evidence of certification in the form of a copy of the American Heart Association certification card is required:

- **Minimum** certification requirement: AHA Basic Life Support (BLS) or Healthcare Provider level with minimally a 2-year certification term.
  - BLS-Instructor, ACLS, ACLS-Instructor, PALS, and PALS-Instructor certifications are acceptable alternatives
- Effective October 2014, certification based on the 2015 AHA BLS guidelines is required (updated courses began ~April 2011)
- **Note**: Neither American Red Cross CPR Certification nor “Chain of Survival” courses are acceptable

Students must maintain current CPR certification throughout enrollment in the School in Nursing. An expired CPR certification will result in immediate restriction from the clinical setting thus jeopardize student standing in the program. Courses are available through most hospitals, AHECs, and local American Heart Association affiliates. Local vendors providing individual instruction for certification and re-certification offer a flexible option.

Revised: 0305, 02/06, 10/06, 04/09; 02/11; 03/16; 10/19
<table>
<thead>
<tr>
<th>Compliance Program Requirements by Academic Program</th>
<th>Pre-Licensure BSN</th>
<th>MSN/PM/DSN/DNP</th>
<th>PhD*</th>
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<tr>
<td>Assessment of Current Health Status</td>
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<td>Varicella Vaccination Series or Titer</td>
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<tr>
<td>TB Test Results (Two-Step)</td>
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<td>Hepatitis B Vaccination Series &amp; Serologic Titer</td>
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<td>TDap (if Tetanus &gt; 2 years old)</td>
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<td>Seasonal Influenza vaccination</td>
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<td>SON policy</td>
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<td>TB Test - Annually</td>
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*Additional requirements for PhD students engaged in clinical practice or research activities involving human subjects are determined by the algorithm on page 2.

Written/Approved: 5/02; Revised 02/03; Revised 04/03; Revised 06/03; Revised 02/04; Revised 04/04; Revised 08/04; Revised 07/05; Revised 02/06; Revised 10.06; Revised 03/07; Revised 06/07; Revised 04/08; Revised 11/08; Revised 12/08; Revised 3/09; Revised 4/09; Revised 08/09; Revised 10/09; Revised 08/10; Revised 03/11; Draft rev 05/11; Revised 02/12; Revised 05/13; Revised 03/16; Revised 10/19
RESEARCH REGULATIONS AND POLICIES

ACCESSING SCHOOL OF NURSING STUDENTS FOR PARTICIPATION IN RESEARCH PROJECTS

PREAMBLE
The School of Nursing is committed to the conduct of research as a core component of its mission. As part of this commitment, the School will facilitate, within identified parameters, the potential participation of School of Nursing students as subjects in research projects of faculty and students in academic units at UNC-CH as well as entities beyond this campus. Participation by students as subjects in a research project is always voluntary. A student’s choice whether to participate or decline will not jeopardize their academic standing in any course or program. Approval to approach nursing students in any School of Nursing program or course must be obtained by the researcher from the Associate Dean for Academic Affairs. This includes recruitment for any type of research activity, ranging from participation in a clinical study to an educational research project. IRB approval is also required and informed consent procedures designated by the IRB must be followed.

PROCEDURE FOR STUDENT PARTICIPATION
The following steps must be followed for the recruitment of students and collection of data from students in approved research projects:

1. The researcher must submit a request to access students as subjects and a copy of the IRB approval* to the Associate Dean for Academic Affairs before any recruitment activities take place. The request should include the plan for recruiting students and provide sufficient detail on the time commitment that would be required if classroom time is being proposed for recruitment or data collection. The IRB approval must have been obtained from an IRB at the University of North Carolina at Chapel Hill. If approval has been obtained by a non-university researcher at another federally designated IRB (FWA), the external IRB approval is sufficient unless the study requires UNC-Chapel Hill to be engaged in conducting research (i.e., a UNC-Chapel Hill employee or student obtains data about subjects through intervention or interaction, possesses private information about the subjects, or is involved in the informed consent process of subjects). If UNC-Chapel Hill is engaged in research, review by the UNC-Chapel Hill IRB is required.

2. The Associate Dean for Academic Affairs or designee will contact the appropriate Assistant Dean, who will review the study as appropriate. Final approval to approach students will be made by the Associate Dean for Academic Affairs in consultation with the relevant Assistant Dean(s) and will notify the researcher of the decision.
   a. The preferred approach to student recruitment is outside the context of an individual class. The Office of Academic Affairs will facilitate recruitment of students in approved projects by posting informational flyers from the investigator in the School of Nursing, distributing approved recruitment announcements prepared by the investigator to student listservs, or other similar broadcasting activities. Under no circumstances will student names be provided to investigators for contacting students directly.
   b. If the researcher provides sufficient reasons for wanting to recruit students in a convened course, permission from the course coordinator must be granted to the researcher for use of class time. This permission is required to either describe or promote the project in a class session or to gather data. Recruitment of students during a convened class session in any program can take place only if there is demonstrated educational value in the research topic proportional to the time needed for recruiting students in the class.

[1] The IRB approval may not always be “in hand” at the time access is requested, but must be available before permission can be granted.

Policy And Procedure For Accessing School Of Nursing Students For Participation In Research Projects

Approved General Faculty, March 1, 2004; Reviewed and approved by Academic Affairs Council 3/28/2017.
HUMAN SUBJECTS APPROVAL

All projects, master’s theses and doctoral dissertations research involving human subjects must be reviewed and approved by a UNC Chapel Hill Institutional Review Board (IRB, also called Human Subjects Committee) or by an IRB with which the UNC-Chapel Hill IRB can negotiate an IRB Authorization Agreement. The UNC-Chapel Hill IRB has negotiated these agreements with many institutions including Duke University, Bowman Gray School of Medicine and Wake Medical Center. Research involving human subjects and submitted for external or internal funding, including NRSA and minority supplements, also typically needs IRB approval, although whether that approval must be received before submission or after funding varies among funding agencies. Research is generally considered to involve human subjects if the investigator has direct or indirect contact with individuals or identifiable data or pathological specimens about living persons. Research using only data from publicly available and deidentified databases or from published sources may not be considered human subjects research if no one on the study team has a way to link to the identity of the original subjects; this determination is best made by the IRB. It is important to note that databases without name or social security number are not necessarily deidentified, as there are many other demographics considered as "identifiers." Determination of whether or not data is sufficiently deidentified is best made by the IRB.

A number of studies submitted to the UNC-Chapel Hill IRB are deemed “not human subjects” research which means, once reviewed and so designated, no further involvement with the IRB is needed unless a change in the study might alter that decision. This designation can be given to studies that involve human beings but are not considered to be research in the federal regulations (e.g., not systematic, as in single subject case studies and/or are not designed to contribute to generalizable knowledge, as in program evaluation or quality improvement projects) or when information is collected from humans but is not about them (e.g., a survey of public health department directors about the content of programs offered). When a student has a study that might qualify for a “not human subjects research” designation from the IRB, the online IRB application will be shortened considerably. Once submitted, the IRB will review the application and let the student know if it agrees with the “not human subjects research” determination. If it does not agree, then a longer IRB application will be necessary.

IRB applications are submitted online and students can be “PI” (Principal Investigator) for the IRB submission. However, the faculty member guiding the research, typically the research advisory committee chair, must be listed as the faculty advisor on the IRB submission. While the student is responsible for the conduct of the research, including adhering to laws, regulations and University policies pertaining to human subjects research, the faculty advisor has the ultimate responsibility for ensuring the student’s compliance.

The IRB application is a “smart application” in that it builds the latter parts of the application based on answers to earlier questions. Two students submitting IRB applications may answer quite different questions, depending on the nature of their respective proposed studies; the greater the complexity of the study or the potential for risks to subjects, the longer the application will be. However, most student research does not trigger an extensive number of questions, so that application is straightforward.

Rarely does an application get approved when initially submitted, although it does happen. Feedback from the IRB can be expected within a week for most studies. If you pay close attention to the issues raised by the IRB, a resubmission should be approved within a few days after being returned to the IRB. While applications can be submitted at any time, studies that require review by the entire IRB committee (referred to as a “full board review”) must be submitted at least 10 business days prior to a scheduled meeting. Meeting dates for the Non-Biomedical IRB, the Committee most commonly involved in reviewing applications from the School of Nursing, can be found on the IRB website. Rarely do School of Nursing faculty- or student-led studies necessitate full committee review, so these deadlines should not be a concern for most students.

It is School of Nursing policy that thesis, research project or dissertation studies may not be submitted to an IRB until the research advisory committee has approved the proposal for the study. In rare instances (for example, studies that require pilot work prior to the final development of the proposal), exceptions may be made to this policy with the consent of the committee chair. However, exceptions will not be made purely to decrease the time spent in the research process.

Graduate students who are working on their dissertation, research project or thesis with a faculty member’s data from a study with current IRB approval may not need to have their own IRB approval if the proposed study is wholly subsumed
under the existing IRB approval. Guidance for this can be found on the IRB Website in the [FAQ section](#) (download the document under the FAQ question “What about student research or other class projects?”). If the student’s intended research activity is not addressed in the faculty member’s current IRB approval, there are two options — either the student will need to submit an independent IRB application for their research activity or the faculty advisor can submit an addendum to their original IRB protocol including the student’s research activities.

Secondary analysis of completely deidentified data is often not considered to be human subjects research. One exception to this, as noted earlier, is when someone on the research advisory committee has access to the “link” between the subject codes and the identity of the subject. In these cases the IRB cannot determine the research to be “not human subjects research.” As noted earlier this is best decided by the IRB after submitting an IRB application.

After passing the thesis, research project or dissertation proposal defense, the student submits the [Research Proposal IRB Tracking Form](#) to the Office of Academic Affairs. On this form, the student and committee chair indicate which IRB the study will be submitted to and the approximate date of this submission. The Office of Academic Affairs (OAA) Secretary will stamp and copy the IRB tracking form and return the stamped form to the student. OAA will retain a copy of the form. Note that a copy of the project, thesis or dissertation proposal is to be submitted along with the IRB application. As noted earlier, the IRB used must be a UNC-Chapel Hill IRB or an IRB with which the UNC-Chapel Hill is willing to enter into an IRB Authorization Agreement.

Students who intend to include patients (or their families) or nurses at University of North Carolina Hospitals in their research activities must have their studies reviewed by the Nursing Research Council (NRC) at UNCH. It is important to check with that committee chair to determine if that review occurs before, after or simultaneously with the IRB submission. Once a study is approved by the NRC and the IRB, additional permission may be needed for access to the patients and nurses. Check with the direct administrator (such as nurse manager on a clinical unit) to obtain more details on how to proceed with research. Similar permission is generally needed at other institutions, although there may or may be a review committee. *Remember: IRB approval does not guarantee access to potential subjects.*

All SON students and faculty conducting or participating in research must have recent education specific to human subjects in research. Before any IRB application is approved, the student and faculty advisor must have completed this education and be included in the UNC-Chapel Hill Ethics Training database. This database typically is updated two or three times a week. Additionally, anyone on the study tram or advisory committee with access to identifiable data is also required to complete the same human subjects ethics education. Completion of the required education is automatically checked when the IRB application is received. Also, students working on faculty research involving human subjects, whether as an RA, volunteer or as part of a course assignment, are required to complete human subjects education training. Doctoral students are informed about the need for human subjects ethics training during orientation and Master’s students should hear about it during their research course. To check whether the education has been completed and recorded, go to the [OHRE website](#).

The Health Insurance and Portability and Accountability Act (HIPAA) may be an issue for studies involving Protected Health Information (PHI). HIPAA reviews are conducted along with the IRB protocol review if the study has HIPAA implications. For more information about HIPAA, see the [University’s HIPAA website](#). Because a study involves what HIPAA defines as PHI does not necessarily mean that there must be specific review for HIPAA when the IRB application is reviewed; PHI is only PHI if a health care provider, plan or clearinghouse is involved.

**SUBMISSION OF IRB APPLICATIONS**

IRB applications are submitted [online](#). Once the application is complete and the “submit” button selected, the student and faculty advisor must certify the application in an electronic routing process. The faculty advisors division chair will also have to certify it before it actually reaches the IRB. Until these and any additional certifications occur, the application will not be released to the IRB for review. When incomplete or incorrectly developed applications are submitted to the IRB, the time needed for approval lengthens since no review will occur if the application is missing essential components.

All of the IRBs noted earlier have the same three levels of review: exempt, expedited and full board. The exact type of review that a study requires can be determined by referring to the [OHRE website](#) and consultation with the research advisory committee, an IRB Coordinator or an IRB committee chair. All studies involving human subjects must be
reviewed by an IRB even if they are thought to be exempt. Exempt status is a determination made by the IRB after it has been initially reviewed to assure the level of risk is no more than minimal and other criteria are met. Expedited and full board review studies are monitored by the IRB, and renewals must be filed at least annually. The actual renewal date will be established by the IRB at the time of approval/subsequent renewals. Studies that have expedited or full board approvals must be closed when the study is completed and before the student graduates. Closing an IRB approved study involves completing the closure component of the online application.

UNC-Chapel Hill requires that any signed consent forms and a copy of the original data (paper-based or digital) must be retained for at least three years after the end of the project. It is often best to entrust these to the faculty advisor as they need to be retained on campus.

INSTITUTIONAL APPROVAL

All research in which data are to be collected through the cooperation of a hospital or other institution/agency must have the approval of that institution. IRB approval does not connote institutional access. The policies and procedures of any research performance site should be discussed with the advisory committee chair prior to approaching anyone at the institution. Many institutions have their own human subjects committees that must approve the study before institutional approval for access to subjects is granted. These committees cannot be utilized in place of a UNC-Chapel Hill IRB, but as noted in the previous section, the UNC-Chapel Hill IRB may facilitate an agreement with other IRBs so only an approval from one of the IRBs is needed. At times an external IRB will not be willing to review a study until it has approval from a UNC-Chapel Hill IRB.

SCIENTIFIC INTEGRITY

It is the responsibility of faculty and students to utilize the same high ethical standards when conducting research as during their professional practice. Deliberate falsification of data, plagiarism or misinterpretation of findings are violations of the University's Honor Code as well as violations of the rights of human subjects who took part in the study believing that it would contribute to scientific knowledge.

Many of the standard procedures associated with research, including management of data, protection of confidentiality and collaboration policies, differ from those of clinical practice. For example, it is recognized that raw data and all analyses are retained for a minimum of five years after publication and theses and dissertations are published by the University. Therefore, students should expect to receive instruction about these standards during research classes and informal discussions with the advisory committee chair. Also, research dilemmas, such as a conflict between the clinical needs of a research subject and the role of the researcher or a disagreement about the relative contributions of two students to a research project, may occur during the conduct of the study. A major role of the committee chair is to help students work through these dilemmas. If at any time students find that the committee chair is unable to help, they should feel free to discuss the problem with other members of the Research Advisory Committee, the Public Health/Nursing IRB chair, or the appropriate Assistant Dean.
UNIVERSITY POLICIES

UNC POLICIES, STANDARDS AND PROCEDURES

UNC OFFICE OF STUDENT CONDUCT

UNC HONOR SYSTEM