



Public Health Program Master of Public Health

Student Policy Handbook

Academic Year 2023-2024

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INTRODUCTION

The purpose of the *MPH Student Policy Handbook* is to inform you about important policies and procedures governing the Public Health Program. It is the *responsibility of the student* to become informed and to observe all regulations and procedures required by the University of North Dakota (UND), the School of Medicine and Health Sciences (SMHS), the School of Graduate Studies, and the Public Health Program. Ignorance of a rule does not constitute a basis for waiving that rule.

In addition to the *MPH Student Policy Handbook* and *MPH Bulletin*, students are responsible for following policies and procedures in the handbooks and policy manuals in the section below.

HANDBOOKS AND POLICY MANUALS

UND Academic Catalog

<http://und-public.courseleaf.com/>

UND School of Graduate Studies Handbook

<https://und.edu/academics/graduate-school/current-students/resources.html> for graduate school policies and procedures and other important information.

The graduate school website is:

<http://graduateschool.und.edu/>. This website should be used to locate graduate school forms and procedures related to your official progress throughout the degree.

UND School of Graduate Studies Policies

<https://und.edu/academics/graduate-school/current-students>

UND Student Conduct & Student complaint policy

<https://und.edu/code-of-student-life/>

School of Medicine and Health Sciences Policies and Procedures

<http://www.med.und.edu/policies/>

For a printed copy of any of the above policies, please contact Ashley Bayne, the Public Health Program Assistant Director, at ashley.bayne@UND.edu.

CAMPUS SAFETY

Personal Safety and Security

Report all harassment/discrimination concerns to Donna Smith. Donna is UND's Affirmative Action Officer.

Phone: 701.777.4171; e-mail address: UND.EO.TitleIX@UND.edu; 102 Twamley Hall; Box 7097, Grand Forks, ND 58202 <https://campus.und.edu/equal-opportunity/>

UND's safety and security related policies can be found at <http://und.edu/finance-operations/policy-office/a-z-index.cfm>

You may use the UND Safety Escort Service (777.3491) to escort you to your destination on campus or locations near campus. This service is provided 24 hours a day by UND Security or police officers. Additionally, emergency information will be communicated through the use of e-mail, UND's website, cable channel 3, residence hall channel 17, and the local media. Information on the status of UND activities can also be obtained by calling 777.6700.

Campus Emergency Notification System (CENS)

UND utilizes a number of redundant emergency notification systems that together comprise the CENS. Some or all of these methods of communication may be activated in the event of an immediate threat to the campus community. These methods of communication include emails, emergency voice messages that can be sent to a cellular or landline phone through a system named NotiFind, a recorded information telephone line, Audix voice messages to university phone lines, and audio and video interruption of televisions on campus tuned in to local or cable programming. This can be accessed not only by students, faculty and staff, but to anyone with Internet access.

Students other than student employees, although not required to participate, shall be notified of their opportunity to participate in the emergency notification system and encouraged to do so during registration or as otherwise provided under an institution's emergency notification system policy or procedures.

SMHS STUDENT BACKGROUND CHECK POLICY

Policy Summary

Criminal background checks (CBC) are required for all SMHS health professional students prior to matriculation and/or clinical assignment.

Policy Purpose

To describe the specific policies and procedures for a CBC for Health Sciences and Medical students.

Definition

An "unfavorable" CBC is defined as a CBC where the results of the CBC reveal an offense.

Governing Policies

Policy Entitled "Policy 511, Student Criminal History Background Checks." *North Dakota University System (NDUS) undergraduate admission applications shall require disclosure of criminal history information. Institutions that offer graduate or professional programs shall require disclosure of criminal history information on graduate and professional program applications. The chancellor shall adopt a procedure implementing this requirement and defining the information required on undergraduate applications. The chancellor shall adopt an implementing procedure and designate the programs for which nationwide criminal history background checks are authorized under N.D.C.C. §12-60-24. The procedure may include uniform requirements or guidelines that apply to all institutions or designated programs at all institutions. Each institution shall adopt policies or procedures implementing this policy, including requirements or guidelines governing criminal history background checks on students and use of criminal history information in admissions decisions.*

Policy Entitled "Criminal background checks for accepted applicants for admission to and enrollment in University of North Dakota School of Medicine and Health Sciences, the College of Arts and Sciences

and College of Nursing educational programs requiring assignment to a clinical health care facility.”
(revised 9-5-07). “The University of North Dakota School of Medicine and Health Sciences and College of Arts and Sciences (here and after referred to as the “University”) have developed a policy on Criminal Background checks for students who have contact in the course of their educational experience with vulnerable populations. The goal is to protect the safety of patients at settings where University of North Dakota students perform educational experiences.”

SMHS CBC Policy

The UND SMHS requires a CBC of students in all health-related programs prior to matriculation and/or clinical assignment. Professional programs that require a CBC prior to matriculation and/or clinical assignment include:

1. Athletic Training
2. Histotechnician
3. Medical Laboratory Science
4. Medical Education
5. Occupational Therapy
6. Physical Therapy
7. Physician Assistant
8. Public Health

For the above listed programs, a CBC is required and an FBI check is authorized (*NDUS Procedure 511: Student Criminal History Background Checks*). The student must initiate the CBC. Failure to submit a CBC will suspend the matriculation process and/or assignment to clinical or field experience.

It is essential that the professional program be able to document a CBC for students when requested by hospitals, clinics, and other non-UND training sites. Final acceptance into the program may be contingent upon the outcome of the CBC. In addition, an updated CBC may be required by a clinical site prior to the start of a clinical assignment.

SMHS Specific Policy (these policies are specific to the SMHS under the governing policy of the School of Medicine and Health Sciences and College of Arts and Sciences revised on 9/5/07):

- A. Each of the Professional programs may have a different procedure for the timing of the CBC. The student is responsible for checking with his or her respective programs to determine when the CBC is to be initiated.
 1. The CBC must be completed: (a) as a condition of the student’s admission, prior to initial enrollment; and/or (b) prior to a student’s clinical assignment and/or continued enrollment in the professional program. The CBC does not have to be part of the program application; however the results of the check must be reviewed and approved by the department and committee (if necessary) prior to matriculation and/or clinical assignment.
 2. Students who have an interruption in enrollment for more than one year must undergo another CBC prior to re-enrollment.

3. Students who refuse or who have a negative CBC outcome will not be allowed to matriculate in the professional program. Students who have a negative CBC after they have been admitted or prior to beginning a clinical experience may be dismissed from the professional program.

B. The initial results of the CBC will be reviewed by the Department Chairperson or Program Director and the Director of Clinical Education for that program. If the CBC is favorable, those individuals may approve the background check. Unfavorable CBC results will be brought to the SMHS Background Review Committee (BRC). In that event, matriculation into the professional program and/or clinical site placement will only be granted after review by BRC and approval by the Department Chairperson or the Program Director.

C. Prospective students who have an unfavorable CBC, as well as students who have already been admitted to a program but who have a negative CBC prior to a clinical assignment, will be given the opportunity to review the results of the CBC and an opportunity to challenge the results if they so choose, as per the governing policy.

D. If the results of the unfavorable results go unchallenged or unchanged, the results will be reviewed by the BRC, following the guidelines in the governing policy. The BRC has the right to request additional information from the student being reviewed. The BRC may render a decision electronically.

E. The BRC will review the findings of the CBC, and make recommendations to the Department Chairperson or Program Director for a final review and decision on matriculation or continuation in the professional program. The student will be informed of the decision in writing. The written decision may be delivered by electronic means.

F. The results of the CBC will become part of the student's record and are protected by the Family Educational Rights and Privacy Act. The results will be retained pursuant to the Records Retention Schedule. For those that are not admitted, the results will be destroyed.

G. Students who have an unfavorable CBC, and who are admitted to the professional program, must be informed that admission to the professional program does not guarantee that clinical facilities will allow them to begin a clinical assignment, in which case they may not be able to complete their program and may be removed from the program.

H. Criminal activity that occurs while the student is enrolled in the professional program will undergo the same review process as outlined above. It is the responsibility of the student to inform his or her respective program director or chairperson of any disciplinary or criminal activity that has occurred during his or her enrollment in the professional program. Students may be asked to sign a waiver that allows the program/department to request additional information from any college or university the student has attended.

SMHS GRIEVANCE POLICY AND PROCEDURES

As stated in the UND [Code of Student Life](#), *each undergraduate, graduate, and professional school or college shall have written procedures for academic grievances*. The following describes the UND SMHS' grievance policy and procedures as they are to be applied to undergraduate, graduate and professional students enrolled in SMHS programs or taking SMHS courses.

Students are encouraged to report other concerns about the program directly to the Public Health Program Director or the Public Health Program Manager so that there is continuous and timely improvement in the quality of the Public Health Program. Concerns may be reported in writing or in person, and they are welcome at any time during your course of study.

Statement of policy

Any student enrolled in an academic degree- or certificate-granting program or taking a course(s) at the UND SMHS shall be provided the opportunity to seek redress on decisions made concerning the student's academic performance and/or professional behavior or on decisions made on the basis of any policies or procedures thought by the student to be unfair by initiating an academic grievance.

The term "academic grievance" is defined as: *A statement expressing a complaint, resentment, or accusation lodged by a student about an academic circumstance (such as grading, testing, quality of instruction), which is thought by the student to be unfair* (UND Code of Student Life).

For purposes of this policy, professional behavior includes any behavioral component of academic performance defined by a profession as necessary for individuals to function as competent, honest, safe, and ethical professionals. Individual programs may further define specific expectations for professional behavior. Therefore, an "academic grievance" at the SMHS may also include: *A statement expressing a complaint, resentment or accusation lodged by a student regarding a decision made regarding a student's professional behavior, which is thought by the student to be unfair.*

Any person who believes that he or she is a victim of discrimination, either individually or as a member of a class as defined by the University's Equal Opportunity/Affirmative Action Policy (UND Code of Student Life), may initiate grievance procedures as outlined in the UND Code of Student Life. If a person brings a grievance in which discrimination is alleged, along with an academic grievance, the discrimination complaint will be dealt with simultaneously.

In all circumstances, it is the responsibility of each student in the SMHS to abide by the policies and procedures of UND as well as those described in the appropriate department or program.

All grievances must be initiated by the student within thirty (30) calendar days after notification of the grade or decision the student wishes to grieve. Each step of the grievance process must be initiated by the student within thirty (30) calendar days of the completion of the previous step; response time by the student at each step shall be thirty (30) calendar days unless otherwise stated. After student initiation of each step in the grievance process, the SMHS response will begin within ten (10) calendar days of receipt of the grievance.

Statement of procedures

1. Any student with a grievance of an academic nature should first bring it to the attention of the appropriate faculty member (course instructor/director, block director or clerkship director). Together the student and faculty member should attempt to resolve the grievance.
2. If the grievance is not resolved to the student's satisfaction, it may be brought to the department or program level. The grievance should be brought, in writing, to the department chair/program director/assistant or associate dean for preclinical or clinical education, as appropriate for the situation or grievance level. Within thirty (30) calendar days, the

chair/director/dean will conduct a review according to the established departmental/program policy, consulting as appropriate with other faculty, campus deans or staff, and inform the student, in writing, of the decision reached regarding the grievance. The department will retain records of all grievances pursuant to the records retention schedule.

3. If the grievance is not resolved to the student's satisfaction at the department or program level, the student may file the grievance for review by the School of Medicine and Health Sciences Grievance Committee, according to the following procedures:

- a. A student grieving any academic decision beyond the level of the department or program to the level of the School of Medicine and Health Sciences Grievance Committee must submit, in writing, the required documentation within 30 days of the decision of the department or program. Written documentation must include:

- i. The disputed decision;
- ii. The person(s)/body that made the decision;
- iii. The date the decision was made;
- iv. All efforts made to resolve the dispute informally and formally;
- v. Information directly relevant to the Committee's review of the grievance;
- vi. Name of any relevant counsel or advisor who may have assisted the student in developing the grievance or may accompany the grievant and provide assistance, if the grievant appears before the committee;
- vii. Any other relevant pertinent evidence or documents, and;
- viii. The desired outcome the student is seeking as a result of the Committee's deliberations.

Documentation should be submitted to: Senior Associate Dean for Academic and Faculty Affairs; UND School of Medicine and Health Sciences, 1301 North Columbia Road, Stop 9037, Grand Forks, ND, 58202.

- b. Upon receipt of the written grievance, the Senior Associate Dean for Academic and Faculty Affairs will be required to constitute the School of Medicine and Health Sciences Grievance Committee, according to the following procedures:

- i. The selection of members of the School of Medicine and Health Sciences Grievance Committee will be made by drawing names from a faculty pool—excluding faculty from the specific department/program from which the grievance arose. The Senior Associate Dean will draw six (6) faculty names (2 basic science, 2 clinical science, 2 health science) for each grievance and one (1) student name who will not be from the department/program of the grievant.
- ii. If it is determined that a Committee member has an unmanageable conflict of interest that may challenge his or her objectivity in the matter of the academic grievance, recusal may be warranted either by action of the Committee or by the Committee member himself/herself. The grievant may also have the opportunity to challenge no more than one member of the Committee for an unmanageable conflict of

interest. In all cases in which a Committee member is recused, another name will be drawn to complete the membership of the Committee.

- iii. The committee Chair will be appointed from among the Committee membership by the Senior Associate Dean for Academic and Faculty Affairs.
- c. A training session for Committee members will be scheduled by the Office of Academic Affairs. Training will include FERPA, Affirmative Action training, if appropriate, and a review of process. This training will occur before any information is disseminated to the committee.
- d. The Committee Chair will identify possible dates for a hearing and organize the hearing time and place. At the hearing, the Committee will consider all pertinent materials, including any new written information from both the grievant and the grieved party, who will both be invited to be present at the hearing along with the Committee.
- e. Dissemination of documentation will be completed by the Committee Chair at least ten (10) calendar days prior to hearing. Therefore, any new written information from either the grievant or the grieved party must be submitted no later than ten (10) calendar days prior to the hearing.
- f. The grievant will be invited to appear at the hearing to answer questions or to present any relevant information. A person representing the program or department being grieved will also be invited to appear before the committee. The grievant will be permitted to have a lawyer or advisor present at the hearing for assistance. If a lawyer or advisor is to be present, the grievant must notify the Chair of the committee at the time the date for the hearing is established. The lawyer or advisor may not participate in the presentation or discussion but is present as a support for the grievant. The committee hearing is an educational process, not a legal proceeding and does not follow the procedures of a court of law. The rules of evidence do not apply.
- g. Committee members and the grievant may appear via electronic means. If a grievant will be appearing electronically, it is their responsibility to acquire the resources to do so and to notify the Committee Chair of the arrangements at least two (2) business days before the hearing.
- h. The Committee Chair will arrange for the hearing to be recorded.
- i. Format of the hearing:
- i. The Chair will complete introductions.
 - ii. At the beginning of the hearing, the Chair will ask the grievant to state for the record whether the hearing is to be open or closed. The grievant will sign a written statement declaring the hearing open or closed. If the grievant and a person representing the program or department are not present, it is a closed meeting.
 - iii. Each party involved in the grievance, including each committee member involved in the hearing, will sign a non-retaliation statement.
 - iv. The grievant will give an opening statement regarding the grievance and rationale for his or her position. No witnesses may appear.

- v. The person representing the program or department being grieved will give an opening statement regarding the grievance.
- vi. As a regular order of business, each party present will have thirty (30) minutes for presentation. The Committee may ask questions of the grievant and the person representing the program or department being grieved after both opening statements have concluded.
- vii. The parties involved in the grievance will not address questions/ comments to each other. However, they may address their questions to the Chair of the Committee who may ask the questions on their behalf.
- viii. Each party will provide any closing statements.
- ix. The Chair will excuse the parties involved from the meeting along with any advisor present at the conclusion of their presentations and after the Committee's questions, if any, have been answered.
- x. The Committee will adjourn the hearing and then reconvene where the Committee will be free to discuss the grievance in closed session.

j. Post-hearing:

- i. No later than fifteen (15) calendar days following the hearing, the Committee will produce a written report of their findings, conclusions, and determination. This report will be based on the testimony heard and the documentation received from the parties involved in the grievance. The Chair is responsible for creating the final report, which all members of the Committee will sign and date with an indication of whether or not they are in agreement with the report's determination. A minority report can be written. The Chair will notify the grievant and faculty (program/department) of the Committee's decision and provide each a copy of the final report. The final report must be submitted to the Senior Associate Dean for Academic and Faculty Affairs. In rare circumstances, the Committee's review of an academic grievance may extend beyond 15 days following the hearing.
 - ii. The record consists of all written documentation received from the parties, the recording of the hearing, and the Committee's final report.
 - iii. The office of record for grievance records retention is the Office of Academic Affairs. The record will be retained pursuant to the records retention schedule.
 - iv. If the grievant chooses to grieve the decision of the Committee to the Dean of the School of Medicine and Health Sciences, the entire record will be forwarded to the Dean for his or her review and decision.
- 4. If the grievance is not resolved to the grievant's satisfaction by the School of Medicine and Health Sciences Grievance Committee, the grievant may request resolution from the Dean of the School of Medicine and Health Sciences or the Dean's designee. Copies of the decision by the Dean will be forwarded to all principal parties within thirty (30) calendar days.
 - 5. Any further pursuance of the grievance by the student beyond the School of Medicine and Health Sciences must be undertaken in accordance with relevant UND policies and procedures.
 - 6. In all stages of the grievance process, it is the responsibility of the grievant to initiate and advance the grievance to the appropriate stage of the process.

SMHS TECHNICAL STANDARDS FOR MATRICULATION, PROGRESSION AND GRADUATION

A. Overview

This policy describes the technical standards required for students in the health professions of medicine, occupational therapy, physical therapy, physician assistant, medical laboratory science, athletic training and public health. The University of North Dakota School of Medicine and Health Sciences (UNDSMHS) has a responsibility to society to graduate the best possible healthcare providers. All health profession graduates of this institution must use professional knowledge, skills, and attitudes to function in a wide variety of health care settings and to render a wide spectrum of patient care. The technical standards are designed to ensure the graduation of capable, well rounded and appropriately trained health care providers. (Each professional program may have additional technical standards specific to the requirements of the program.) In order to fulfill this responsibility, UND SMHS has established six areas of competency that must be sufficiently developed to participate in, and to graduate from a health profession's program.

Competency Areas:

1. Health Care/Scientific Knowledge
2. Clinical Skills
3. Ethical and Professional Behavior
4. Interpersonal and Communication Skills
5. Lifelong Learning
6. Healthcare Systems-based Practice and Improvement

The health profession's programs offered at UNDSMHS are academically rigorous with the structured broad general training that is intended to produce "undifferentiated healthcare providers." The school's academic and technical standards are intended to support that model. Whereas a truly undifferentiated healthcare provider may not be achievable, the standards attempt to ensure that health profession graduates of the school possess the background to pursue virtually any area of specialty. Thus all students must meet the academic and technical standards to matriculate, to progress through the curriculum, and to meet the requirements for graduation.

Academic standards refer to acceptable demonstrations of mastery in various disciplines, before matriculation and after, as judged by faculty members, examinations, and other measurements of performance. Every effort is made to meet the academic needs of the health profession student within the professional program. When a student's ability to perform the technical standards is compromised, the student must demonstrate alternative means and/or abilities to perform the specified tasks. The following technical standards describe the basic competencies essential to successful completion of the health profession programs at UND SMHS.

Beyond the academic standards, students must demonstrate the following technical standards **with or without accommodations**. It is the student's responsibility to identify/disclose any disabilities if requesting any needed accommodations.

Technical Standards and Capacity

In order for a student to adequately address the six competency areas noted earlier, each student must possess the requisite capacities/abilities in the following broad areas:

1. Perception/Observation

To achieve the required competencies in the classroom setting, in the clinical setting, and in the small group setting, students must be able to perceive, assimilate, and integrate information from a variety of sources. Students must be able to perceive and appropriately interpret nonverbal communications.

2. Communication

Students must be able to skillfully communicate through oral, written, and electronic means (in English) with faculty members, health care team members, patients, families, and other students in order to elicit, convey, and clarify information; create rapport; and work collaboratively. Students must be able to clearly speak and hear in order to effectively communicate with patients, including individuals from different cultural and social backgrounds; this includes, but is not limited to the ability to establish rapport with patients and effectively communicate judgments and treatment information.

3. Functional Activities

Students must possess sufficient motor, tactile, and sensory functions in order to attend and participate in activities which are part of the curriculum. This includes production of written and oral communication commensurate with the profession. Depending on the health profession, students are expected to assess patients using all appropriate evaluation tools, diagnostic maneuvers and procedures, perform basic laboratory procedures and tests, and provide patient care appropriate to the circumstances. Students are expected to function in a wide variety of patient care settings, including independent and potentially rapid-paced/high demand environments. Motor, tactile, sensory, and proprioceptive abilities are necessary to perform a complete and thorough assessment and intervention plan with the patient. Students must also be able to safely and efficiently utilize equipment and materials necessary to assist patients.

4. Professional and Ethical Behavior

Students must consistently demonstrate the core attributes of professional behavior appropriate to the healthcare field, including commitment to excellence, honesty, integrity, respect for others, empathy, compassion, professional responsibility, social responsibility, and altruism. Students must exhibit the ability to meet the challenges of any medical situation that requires a readiness for immediate and appropriate response without interference of personal or medical problems.

It is the student's responsibility to attend and be able to travel to and from classes and clinical assignments in a timely manner. Students must possess the organizational skills and stamina for performing required tasks and assignments within allotted time frames.

Students must adhere to the policies of the State Board of Higher Education, the University, the School of Medicine and Health Sciences, the health profession program, and the Applied Practice Experience (APEX) sites. This includes matters ranging from professional dress and behavior to attending the program's academic schedule which may differ from the University's academic calendar and be subject to change at any time.

Students need to take the initiative to address and direct their own learning. They are required to work cooperatively and collaboratively with peers on assigned projects, and participate willingly in the supervisory process involving evaluation of abilities and acquisition of skills. The students will take initiative in becoming a contributory member of a health care team as appropriate for their program and level of education.

5. Cognition

Students must demonstrate critical thinking skills so that they can problem solve, understand abstract ideas, and synthesize information presented in the classroom, laboratory and clinical settings. Students must be able to measure, calculate, reason, analyze, process, integrate, synthesize, retain and apply facts, concepts, and data related to the art and science of healthcare. Students must have the cognitive capacity to appropriately utilize technology in the classroom and in the clinical setting. Students must also be able to analyze three-dimensional and spatial relationships. Sound judgment and ethical reasoning as well as clinical reasoning are essential. Students must possess the above abilities to reach diagnostic and therapeutic judgments.

6. Behavioral and Social

Students must demonstrate emotional stability and be capable of developing mature and effective interpersonal relationships with other students, faculty, and healthcare workers. Students must be able to tolerate physically and emotionally taxing workloads and function effectively under stress. Students must be able to adapt to changing environments, display flexibility, accept and integrate constructive criticism, and function in the face of uncertainties inherent in the educational and clinical settings. Students must be able to engage in personal reflection and self-awareness as a mechanism of effective personal growth, development and lifelong learning.

Additional or clarifying technical standards may be required of the individual health profession program. See individual professional program policies for specific details.

Each clinical or APEx site may have additional technical standards that might affect a student's ability to complete clinical placements.

It is the responsibility of the student to request necessary accommodations through university procedures.

If any health profession applicants or enrolled students have a question about whether they can meet these standards due to functional limitations from a disability, they should contact Disability Services for Students (DSS), the campus resource for confidential discussion and support regarding reasonable accommodations:

Disability Services for Students

Room 280 McCannel Hall,

2891 2nd Ave N Stop 9040

Grand Forks, ND 58202 – 9040

UND.dss@UND.edu

701.777.2664

Fax 701.777.4583

More information: <https://und.edu/student-life/disability-services/>

SMHS POLICIES

1. SMHS Room Use and Etiquette

As students in UND School of Medicine & Health Sciences (SMHS) courses and programs, it is expected that you will be respectful during interactions in and around the SMHS building to ensure that it remains a professional, high-quality, and positive learning space. Specifically,

- Clean-up before leaving SMHS rooms. This includes but is not limited to: picking-up garbage and throwing it away, erasing marker boards, shutting down computers/cameras, turning off lights.
- Be aware of room schedules. If someone else has reserved a room that you are in, it is expected that you: Clean-up and leave the room a few minutes before the next person's reservation. If you are unaware of the reservation, quickly and politely clean-up and exit the room once you are informed. Be sure to take all personal belonging with you, as typically it is not appropriate to re-enter the room after the next scheduled group has begun.
- Be cognizant of your conversations in and around the building, which should be kept in a professional tone and avoid disrespectful and/or vulgar comments.
- Follow UND policies regarding children/minors being brought to SMHS:
<https://und.policystat.com/policy/12389550/latest/#autoid-2z9x9>

2. Social Media Policy

REASON for POLICY

The School of Medicine and Health Science faculty recognize the role social media plays in today's society. However, as healthcare professionals in training, SMHS students are held to a high standard when it comes to the presentation of themselves in the community and on social media sites. As students enter their professional careers it is important that they carefully consider what they are posting on social media sites, who they are asking to network with them, and how they respond to others on social media sites. Information placed on social media sites must not violate the University's Code of Conduct.

CONTACTS

General questions about this policy can be answered by your department's administrative office. Specific questions should be directed to the following: Policy clarification, Dean's Office
777.2722/777.2514, judy.solberg@UND.edu

PRINCIPLES

I. The School of Medicine and Health Science faculty recognize the role social media plays in today's society. However, as healthcare professionals in training, SMHS students are held to a high standard when it comes to the presentation of themselves in the community and on social media sites. As students enter their professional careers it is important that they carefully consider what they are posting on social media sites, who they are asking to network with them, and how they respond to others on social media sites. Information placed on social media sites must not violate the University's Code of Conduct.

II. Overview

a. Social network sites should not be considered as “private.” Students should assume that what they post on a social media site is permanent. Archival systems may save information even if someone deletes a post, and search engines can retrieve posts years after the publication date. When using social networks, the lines between public and private, personal and professional are indistinct. Mixing social, academic and professional networking may create problems. Because comments can be forwarded or copied, a person authorized to post on a student’s social media page can pass it on to others. Friends may post something to a student’s site regarding their social life which may prove to be embarrassing to the student’s academic or professional life. Posting media that portrays students or their peers participating in what could be perceived as unprofessional behavior such as inappropriate sexualized behaviors, binge drinking, drug use and illegal activity is not advised. Students are encouraged to check their privacy settings on social media sites to limit who can and cannot read and post to their sites. Students should also consider conducting an Internet search of their name to discover what is in cyberspace that others can see about them. If students have any social media posts that are questionable, they should remove them from their site immediately. Employers, faculty, clinical preceptors and patients may access information on student’s social media sites that may negatively influence them regarding the student’s professionalism. Many potential employers go to these sites to see what students have posted and often determine if they are interested in having that student as an employee. Students have been reprimanded by clinical rotation site supervisors for social networking practices such as becoming electronic “friends” with site co-workers, interns, volunteers or patients. To promote respectful discussion, students should be courteous and productive. With due regard for lawfully protected speech and forms of expression, students should strive to avoid comments that are profane, obscene, defamatory, offensive, harassing, disruptive, sexually explicit, inappropriate, inflammatory or otherwise objectionable. Harassing speech that is severe, persistent, or pervasive, and is objectively offensive, is never permitted.

Students should use their official SMHS e-mail address for all professional correspondence and all academic issues. Student must recognize that they are a representative of their professional program and are expected to act professionally in all correspondence. Students should remember that North Dakota has an open records law which means that all SMHS e-mail is potentially subject to open records. As such, students should consider setting up a private email account with a different provider than the SMHS for personal correspondence.

III. Academic Integrity and Professionalism

a. Discussion or posting information regarding content of examinations, tests, quizzes or assignments could be considered a violation of a department’s policy on Academic Integrity. It is the student’s responsibility to read their student handbook regarding academic integrity and professionalism as defined by their department. The use of social media or personal devices to threaten, intimidate, ridicule, humiliate, insult, or harass someone may constitute cyber-bullying and must be reported to either the Department Head, the Associate Dean for Student Affairs and Admissions, the Associate Dean for Health Sciences or the UND Dean of Students Office.

SMHS students have a responsibility to help maintain public trust and confidence in their professions. Students should refrain from posts that use institutional intellectual property, copyrights, trademarks or logos without explicit written permission. Such care should also extend to the unauthorized dissemination of copyrighted material, such as lecture notes and recordings. Students should not represent themselves as official representatives of the University or clinical facility in public forums. Consent obtained for educational purposes does not extend to consent for public dissemination. Even when appropriate consent is obtained for public posting and the media-containing posts are sufficiently

anonymized, public perception remains an important consideration. An individual viewing a sensitive picture posted online by a SMHS student will not assume consent has been obtained and may therefore come to think less of the student, their profession and the institution. The separation between personal and professional online profiles should be made explicit.

IV. Clinical Experiences

a. Students participating in clinical experiences must consult with the hospital/clinic or agency policies or an appropriate leader within the organization for guidance regarding work related social media postings. Clinical experiences are also frequently governed by a legally binding agreement between the host facility and the University. Unless authorized, students are not allowed to post or speak on behalf of the clinic, hospital or agency. Students must be aware of and comply with clinical affiliation policies regarding use of computers, cameras and other electronic devices and the use of personal devices at the clinical site. Students should not ask their faculty, clinical preceptors, clinical instructors or fieldwork supervisors to “friend” them during their time in the clinical setting. This puts the student, their faculty and their supervisors in an awkward situation by sharing personal information. If students and supervisors mutually decide to do this after the student graduates, that is their personal choice. Students are strongly advised to refrain from posting remarks about faculty or clinical site employees and from making comments that are or may be perceived to be threatening, harassing, profane, obscene, sexually explicit, racially derogatory, homophobic or otherwise offensive. Harassing speech that is severe, persistent, or pervasive, and is objectively offensive, is never permitted.

V. HIPAA and FERPA

a. Students violating HIPAA, FERPA or other university/hospital/clinic policies may be subject to disciplinary action including dismissal from their professional program, criminal and/or civil charges and fines. Students must not present themselves as licensed practitioners, and must be careful about offering medical advice in any non-educational setting, including on social media.

SMHS students must recognize that they have an ethical and legal obligation to maintain patient privacy and confidentiality at all times. Releasing confidential health information is unethical and unlawful and could result in irreparable harm and suffering to the patient as well as fines or imprisonment for the healthcare practitioner. SMHS students must not identify patients by name or post or publish information that may lead to the identification of a patient. Students must not refer to patients in a disparaging manner, even if the patient is not identified.

SMHS students are strictly prohibited from transmitting by way of any electronic media any patient related information or images that may be reasonably anticipated to violate a patient’s rights to confidentiality or privacy. This includes references to family, employment, relatives, conditions, locations of treatment or any circumstances surrounding the patient’s situation. Posting information about, or images of, a research subject is strictly prohibited.

SMHS students must follow SMHS clinical affiliation and UND policies for taking photographs or video of patients for treatment or other legitimate purposes using employer-provided devices. SMHS students must not share, post or otherwise disseminate any information, including images, about a patient or information gained in the student-patient relationship with anyone unless there is a patient care related need to disclose the information or other legal obligation to do so. Online social contact with patients is discouraged, and students must use caution when having online social contact with former patients. The fact that a patient may initiate contact with the student does not permit the student to engage in a personal relationship with the patient. It is unprofessional and inadvisable to form or accept a social

media connection with patients or individuals with whom there is an active therapeutic, supervisory or evaluative relationship.

VI. Documented Examples of Inappropriate Social Media Behavior

a. A PT graduate working in a local hospital noticed a patient name on the new admission sheet and confirmed that the patient is a former professor from her PT program. The student, a frequent user of Facebook, wrote a message on her “wall” about the fact that her former professor has been hospitalized. Within minutes she was chatting with several of her former classmates about the professor. Later in the evening the professor’s daughter read about her mother’s hospitalization on the daughter’s favorite social networking site.

A hospital employee was forced to resign after she tweeted the governor of her state regarding a medical exam he had scheduled after regular hours. The tweet indirectly referenced the governor thus revealing he had received care as a patient at that medical center. Although the employee didn’t believe that she had broken any privacy laws, attorneys for the governor said that just because the governor was a public figure it did not mean that his health information could be considered public knowledge.

A student used a cell phone to take photographs of examination questions from a computer screen. The examination questions were passed on via a social network. Since unauthorized release of examination questions occurred, the action was considered misconduct.

A college sophomore was expelled for comments he posted on Facebook. The action marks the first time that college has expelled a student for a posting on the popular website.

A student took an examination and tweeted the following comments and posted them to Facebook with the caption “Wow! Just finished the exam; it was the hardest exam I have ever taken. Better make sure you study chapter 4 really well!” The student was charged with misconduct.

PROCEDURES

I. Disciplinary Action

a. Violation of the social media policy may result in disciplinary action by the student’s department, the SMHS, UND and/or the clinical facility. Faculty reserve the right to monitor student’s publicly viewable social media sites.

RESPONSIBILITIES

Student	Responsible to monitor their professional behavior on social media sites and report violations of HIPAA or FERPA to the appropriate authority
Department	Provide a copy of the Social Media Policy to all students
Administration	Violations of the Social Media Policy should be reported to one of the following: Department Chairperson Associate Dean Student Affairs and Admissions Associate Dean for Health Sciences UND Dean of Students

3. Drug and Alcohol Screening and Education Program

Introduction

A career in the medical field can be one of the most exciting and rewarding career options today! These rewards do not come without some personal sacrifice and discipline.

Alcohol and drug related violations can destroy a career in the field of medicine or health sciences. Institutions hiring health care professionals do not look favorably upon applicants with a Minor in Possession conviction, Minor in Consumption conviction, DUI conviction, or abuse of prescription medications. Illegal drug use is strictly forbidden. There is no place in the medical community for this type of activity for the safety of yourself and others, including patients. Because of this, almost everyone who has a career as a health care professional is subject to random drug and alcohol testing. With the interest of safety in mind, medical professionals are held to the highest standards.

A person who is seriously considering becoming a health care professional must be ready and willing to live with rules and restrictions. As a student of the School of Medicine and Health Sciences (SMHS), you are learning to become a health care professional right now. Many of the habits and behaviors you will exhibit now will carry over to the “real world,” which includes being on time, prioritization, communicating, along with alcohol and drug use. Think seriously about your actions every day.

The primary purpose of this program is to educate students within the SMHS regarding the dangers of substance abuse and the consequences of current drug problems. This program also has a substance abuse deterrence and detection function by screening covered students for use of prohibited drugs. Drugs prohibited by the SMHS include those banned by federal, state of North Dakota, and local governments, as well as institution policy. These drugs include illegal, prescription, over-the-counter, experimental, recreational, or other drugs that have a significant effect upon an individual’s judgment.

Educational Resources

The University of North Dakota is committed to educating and assisting students with drug and alcohol issues. UND programs such as the Health & Wellness Promotion Team Program and the University Counseling Center (UCC) Student Chemical Assessment and Review Program are intended to increase awareness of issues related to substance abuse and other issues impacting the health, well-being and academic success of students. The UCC functions to assist students by anticipating and intervening in situations where substance use/abuse may negatively influence student performance in the University and surrounding community. Individual and group counseling, alcohol use assessment, referral for further evaluation and treatment, and 2 educational programming are important components of this service. Students who are concerned about their own alcohol or drug use and/or about that of others are encouraged to contact the University Counseling Center. When appropriate, students may be referred to off- campus medical providers. More information regarding these services may be obtained by calling the University Counseling Center (UCC) at 701.777.2127 or visiting the UCC website.

School of Medicine and Health Sciences Policy

The SMHS is committed to the high medical standard of a drug free workplace. UND prohibits the unlawful or unauthorized manufacture, distribution, dispensation, possession, use, or sale of alcoholic beverages, controlled substances, and illegal drugs on campus. The impairment by alcohol or drugs of any student while participating in an academic function, or as an employee when reporting for work or engaging in work – during normal work hours or other times when required to be at work – is also prohibited. UND students are required to abide by all federal and state laws, local ordinances, State Board of Higher Education policies, and other related requirements regarding the consumption or possession of alcoholic beverages, controlled substances, and illegal drugs.

Our goal is to provide a safe and efficient environment for our students, employees, and patients. To achieve this goal, this program's primary objective is to promote safe operations and healthy life styles through education and deterrence, benefitting those directly involved with UND SMHS, as well as the general public. This program is to also serve as a resource for faculty to follow if suspected drug use were to happen during any portion of the education of SMHS students. All students actively involved in an educational program within the SMHS are required to comply with the provisions of this drug screening program.

The students of the SMHS are subject to the rules of this program as well as conditions of their admission or matriculation in the educational program. Students also are subject to the UND alcohol and drug policy.

The SMHS reserves the right to contact proper law enforcement officials and/or state licensing/certifying boards regarding any matter subject to this policy. Violation of this policy may result in disciplinary action, up to and including dismissal from the academic program.

Guidance for Clinical Faculty

Clinical Faculty or institutions that are providing clinical education to the students of the SMHS (hereafter known as faculty/faculty members) may encounter a situation when drug use is suspected, they have a student test positive to drug screening, or they have their own facility drug screening and education program. The clinical education facility should:

- Inform the students that they may be required to undergo a drug test pursuant to the facility's policies and practices, and that the cost of any drug test will be paid by the academic program if it is not paid by the facility. If a facility requires a drug test prior to placement of students for clinical education, it is the student's responsibility for any costs incurred.
- If students participating in clinical education are required by facility to undergo a drug test, the facility shall provide the SMHS with notice and explanation of any positive or unacceptable drug test results. If students are required by facility to undergo a drug test, the academic program shall obtain advance authorization from students permitting Facility to notify and explain to SMHS any positive or unacceptable drug test result.

Types of Testing

The SMHS has identified the following areas where drug testing could occur. Although this list is not totally inclusive, students of the SMHS may be subject to the following types of testing:

- Random – SMHS reserves the right to randomly test for drugs and alcohol. Randomization may include all students within the SMHS or within a single educational program. The randomization process will be completed by a collection agency after being given the names of all the students in the SMHS or within a single educational program. The student must produce a specimen within two (2) hours from the time they are notified of a randomized test.
- Reasonable suspicion – students may be required to undergo testing when reasonable suspicion is present. Reasonable suspicion includes, but is not limited to, the following:
 - a) displaying violent or unusual confrontational, argumentative or other unusual behavior customarily associated with alcohol or drug use (e.g., glassy eyes, slurred speech);
 - b) showing major personality change;
 - c) academic performance has deteriorated;
 - d) excessive or patterned absenteeism or tardiness;
 - e) frequent errors;
 - f) has previously had a positive drug screen in combination with any of the above

- Post-accident or incident including clinic or academic related combination with accident or causing themselves or another student or patient to sustain a personal injury
- Pre-clinical placement
- During clinical rotations
- Return to clinical rotation or educational program

In addition, clinical affiliates of the SMHS may have their own institutional drug screening or testing programs. Students of the SMHS are also subject to those clinical affiliates drug screening programs while participating in a clinical rotation or clinical practice.

Testing protocol

Notification to the student for testing will be the responsibility of the SMHS administration, faculty (clinical or full time), or academic staff. Notification will be done in writing using the SMHS drug screening notification form. The basic test to be used for drug screening is urinalysis. Alcohol testing will be done by Breathalyzer. Other types of tests may be utilized to determine the presence of banned substances. Collection of the samples will be done under the direction of a vendor (Global Safety Network or its successor) chosen by the SMHS. Direct observation of sample donation may or may not be done as part of the initial collection process. Direct observation will be done by a person of the same gender as the student. If a sample is deemed not acceptable to the collection agency, direct observation of the sample will be the protocol for collection. Samples will be sent to a Substance Abuse and Mental Health Services Administration (SAMHSA) certified laboratory selected by the vendor. Drug screens will be completed to test for a 12-panel drug screen.

Positive results

All drug screens will be verified by a Medical Review Officer (MRO). The MRO will communicate with the student when receiving a positive test. The MRO will then seek clarification of the resulting positive test. It is the responsibility of the student to supply the MRO with requested documentation or other information. Positive drug screening results are confidential, except that results will be reported to the SMHS administration and program director of the student's academic program.

A positive drug screen will result in disciplinary action that could include but is not limited to:

- Removal from patient care or access to patients;
- Development of a written remediation plan to address academic, professional, and personal issues of a positive test;
- Mandatory substance abuse evaluation and proper follow up with substance abuse counselor or qualified health care provider agreed upon by the education program and the student involved. The substance abuse counselor and/or qualified health care provider shall determine the length and manner of counseling. This evaluation will be the fiscal responsibility of the student. The student will be allowed to return to the academic program only after documentation of the student's ability to return by the substance abuse counselor;
- Follow up screening tests following a positive result as determined by the program director or faculty of SMHS;
- Dismissal from the educational program.

If the initial screening result is positive, a secondary laboratory test from the same sample may be requested by the student to confirm the results of the first test and can be included as part of the appeal

process. This secondary test will be done at a different laboratory than the first and testing of the second sample will be at the expense of the student.

Failure to report for a random drug screen

If a student fails to report for a drug and alcohol screening test, this will be considered a positive drug test and the student will be subject to discipline up to and including dismissal from the academic program.

Appeal of a positive drug screen

Students have the right to appeal a positive drug test. Students who test positive on a drug screen will have five (5) business days following the day on which the student is notified of the positive confirmatory test result to submit information in writing to explain the test results. The appeal will then be reviewed by the program director/faculty of the academic program and the student will be notified of the decision in writing. If the student does not agree with the decision of the program director/faculty of the academic program, the appeals process would then proceed to the [SMHS Grievance Policy](#).

Appeals to a positive screen should be addressed to:

Associate Dean
Office of Student Affairs and Admissions
UND School of Medicine and Health Sciences Room W101E
1301 N. Columbia Road, Stop 9037
Grand Forks, ND 58202-9037
Tel. 701.777.4214

Approved by FAC 5.4.15

SMHS BLOODBORNE & BIOLOGICAL PATHOGEN EXPOSURE MANAGEMENT

Policy Statement

In the event of a bloodborne or biological pathogen exposure, the SMHS students will follow the SMHS Student Bloodborne and Biological Pathogen Exposure Management Plan. The student's responsibility is to immediately inform their instructor, clinical site supervisor and / or preceptor. Students are required to comply with the reporting requirements, incur the charges of their bloodborne or biological pathogen exposure testing, and complete follow-up recommendations given by their health care provider.

Reason for Policy

To provide a clear and concise guide for managing students exposed to bloodborne or biological pathogens during educational activities administered by the UND SMHS.

Scope of Policy

This policy applies to:

- Deans, Directors, and Department Heads
- Faculty
- Managers and Supervisors
- Staff
- Students
- Others

Web Site References

This policy: <https://med.und.edu/occupational-therapy/files/docs/smhs-exposure-management-policy.pdf>

Policy Office: <http://www.med.und.edu/policies/index.cfm>

Vice President for Health Affairs and Dean: <https://med.und.edu/about/administration.html>

UND Office of Safety: <http://und.edu/public-safety/office-of-safety.cfm>

Related Information

UND Incident Reporting & Investigation Instructions	https://www1.und.edu/public-safety/resources/forms.cfm
SMHS Policy Page	http://www.med.und.edu/policies/index.cfm
The National Clinicians' Post Exposure Prophylaxis Hotline	http://nccc.ucsf.edu/clinician-consultation/pep-post-exposure-prophylaxis/
Occupational Safety & Health Administration	https://www.osha.gov/
Center for Disease Control and Prevention	http://www.cdc.gov/

Contacts

Specific questions should be directed to the following:

Subject	Contact	Telephone/FAX
Policy clarification	Dean's Office judy.solberg@UND.edu	701.777.2514/777.3527
SMHS Student Injury	Dean's Office judy.solberg@UND.edu	701.777.2514/777.3527
Investigation Report	Office of Safety und.safety@UND.edu	701.777.3341
Sample Transportation	Student Health Services und.shslab@UND.edu	701.777.3988

Definitions

Bloodborne Pathogens	Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV).
Exposure Incident	A specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that result from the performance of practice requirements.
Other potentially infectious materials/biological pathogens	Include but are not limited to (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids. (2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV. (4) Airborne pathogens such as tuberculosis (TB).
Contaminated	The presence or the reasonably anticipated presence of blood or other potentially infectious material on an item or surface.
Contaminated Sharps	Any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.

Principles

Overview— The Student Bloodborne & Biological Pathogen Exposure procedure provides management for UND SMHS students with occupational blood exposures according to currently recommended

guidelines by the US Public Health Services. The procedures below describe the action that must be taken in the event that bloodborne or biological pathogen exposure has occurred. In accordance of UND Section 1: General Safety, Incident Reporting policy, incident reporting of all injuries is required within 24 hours. Academic supervisors who witness the incident, or are immediate supervisors for the student, are responsible for completing UND & SMHS incident reporting forms. This allows for complete reporting and appropriate follow up of any occurrence involving the health and safety of University students.

Procedures

Management of Exposure Incidents

- | | |
|--|--------------------------------|
| 1. Immediate Care | Immediately |
| 2. Post-Exposure Risk Determination & Medical Evaluation | Complete within 2 hours |
| 3. Post-Exposure Mandatory Reporting | Complete within 24 |
| 4. Incident Investigation & Report Routing | hours |

In accordance with UND Policy, mandatory reporting of incidents is required within 24 hours.

The student's health and safety is of utmost importance in this circumstance and the student must not return to activities until this is complete.

Protocol

1. Post-Exposure-Immediate Care

If you experienced a needle-stick or sharps injury, or are exposed to the blood or other body fluid of a patient during the course of your work, **immediately follow these steps** (as applicable):

- Wash needle-stick injuries and cuts with soap and water.
- Flush splashes to the nose, mouth, or skin with water for 10 minutes.
- Eyes-remove contact lenses, irrigate eyes with clean water, saline, or sterile irrigants (be aware of the nearest eyewash station).
- Report the incident to your supervisor.
- Immediately seek medical treatment for evaluation and recommended follow up procedures.

2. Post-Exposure - Risk Determination & Medical Evaluation

- Contact the immediate supervisor (or clinical site education coordinator) to obtain the procedure and forms for appropriate risk assessment and reporting.
- UND SMHS Program of enrollment must also be contacted as soon as feasible to oversee this evaluation process.
- The student and immediate supervisor must complete the UND SMHS Bloodborne & Biological Exposure "Student Quick Form 1" & "UND Incident Reporting Form 2" within 24 hours. These forms must include signatures of the student, immediate supervisor, and medical provider.

The following information is required for risk determination; document **"Student Quick Form 1"**.

- Type and amount of fluid (e.g., blood, visibly bloody fluid, other potentially infectious fluid or tissue, and concentrated virus).
- Type of device causing injury, if applicable.
- Type and description of exposure (percutaneous, splash, non-intact skin, and bites etc.).

Incident Occurrence on the UND Campus

Medical Evaluation: UND Student Health Hours: Mon-Fri 8am-4:30pm, Tuesday 8am-6pm

After Hours: Altru Emergency Department or Urgent Care

Incident Occurrence at Clinical Affiliation Site

Note: Students must also follow the individual clinical sites guidelines, and the appropriate clinical personnel should be informed of the injury. All follow-up documentation is required.

Medical Evaluation by Primary Care Provider or Emergency Facility

Step One - Evaluate Exposure Source

The student's immediate supervisor where the incident occurred will take the necessary action to request a source patient (donor of the blood or body fluid exposure) lab test workup for bloodborne or biological pathogens.

Bloodborne Pathogen

- Assess exposure source status, if applicable.
- Obtain consent to test blood. If deceased, no consent necessary.
- Order an exposure work-up in accordance with state statutes, to include but not limited to rapid HIV, Hepatitis B surface

Airborne Pathogen

- Antigen (HBsAg), and antibodies to HCV (anti-HCV).
- Unknown Source: assess risk of exposed student to HBV, HCV and HIV infection.
 - Assess exposure source status for tuberculosis (TB) or other potential biological pathogen, if applicable.

Step Two - Evaluate Exposed Person

Bloodborne Pathogen

- Assess current immunization status.
- Assess Hepatitis B vaccine and vaccine response status.
- Assess HBV, HCV, and HIV immune status.
- Order baseline testing for HIV, HCV, anti-HBs (if applicable).
- *Draw a 10 mL clot tube of blood, spun and separated. Transport serum on ice to UND Student Health Services for storage. (Address available on Quick Form 1)*

Airborne Pathogen

- Assess current immunization status.
- Assess for Tetanus-Diphtheria vaccination (Td) or other airborne pathogen, if applicable.
- Assess for current tuberculosis screening status, if applicable.
- Order TB testing, if applicable.

Step Three - Determine Need for Post Exposure Prophylaxis

Bloodborne Pathogen

- Factors to consider for post exposure prophylaxis include the type of exposure, type and amount of fluid/tissue, infectious state of the source, and susceptibility of the exposed student.
- Prophylaxis should be started as soon as possible after HIV exposure, **preferably within the first hour.**
- **Hotline for Medical Providers**

Airborne Pathogen

The National Clinicians' Post Exposure Prophylaxis Hotline.

PEpline: 1.888.448.4911 (9am-2am EST)
Warmline: 1.800.933.3413
Perinatal HIV Hotline:
1.888.448.8765

Website: <http://nccc.ucsf.edu/clinician-consultation/pep-post-exposure-prophylaxis/>

- Follow appropriate prophylactic treatment, if applicable.

Step Four – Follow-up Care

The student is responsible for obtaining follow-up care from their personal physician as recommended during their evaluation.

3. Post-Exposure Mandatory Reporting

Completion and routing of SMHS Bloodborne & Biological Pathogen Exposure Incident Evaluation & Reporting (Form 1 & 2) are required within **24 hours** of the exposure event.

Report Routing

<p><u>Student Quick Form 1</u> SMHS Deans Office</p> <p>judy.solberg@UND.edu</p>
<p><u>UND Incident Reporting Form 2</u> The student’s immediate supervisor must electronically submit this form within 24 hours.</p> <p>Form 2 is located at UND Campus Safety website: https://und.edu/public-safety/resources/forms.cfm.</p> <p>Click the [SMHS only] button on the bottom of the form to notify appropriate UND contacts.</p>

4. Incident Investigation & Report Routing

The SMHS Program Directors will be required to:

- Investigate the incident (UND Incident Investigation Form 3), verify completion of Forms 1 & 2, verify Student Health has received the student’s blood sample, and route appropriate incident reports to UND Environmental Health & Safety.
- UND SMHS Programs are required to retain a record of the exposure incident for 30 years post-graduation.

Responsibilities

Student	<ul style="list-style-type: none"> ▪ Report the exposure incident. ▪ Seek immediate and follow-up care. ▪ Complete required reports. ▪ Route to appropriate contacts.
Clinical Affiliation/UND Instructor	<p>Provide assistance to the exposed student to:</p> <ul style="list-style-type: none"> ▪ Obtain immediate care and medical evaluation. ▪ Complete reports within 24 hours.

	<ul style="list-style-type: none"> ▪ Transport the student’s blood sample to UND Student Health Services.
Program Director	<ul style="list-style-type: none"> ▪ Investigate the exposure incident. ▪ Verify completion of reports and appropriate routing. ▪ Verify blood sample arrival at UND Student Health. ▪ Retain record of the incident.
Chief of Staff, SMHS	<ul style="list-style-type: none"> ▪ Notify appropriate program directors of incident exposure. ▪ Forward reports to the appropriate program director for the incident investigation.
Student Health Services	<ul style="list-style-type: none"> ▪ Receive exposed student’s sample and store for 90 days.

Forms

SMHS Bloodborne & Biological Pathogen Exposure Student Quick Form (Form 1)	http://med.und.edu/policies/_files/docs/quick-form-1.pdf
UND Incident Reporting Form (Form 2)	https://campus.und.edu/safety/_files/docs/incident-reporting-form-persons.pdf
UND Incident Investigation Form (Form 3)	https://campus.und.edu/safety/_files/docs/incident-investigation-form-part-one.pdf https://campus.und.edu/safety/_files/docs/incident-investigation-form-part-two.pdf
Student Bloodborne & Biological Pathogen Exposure Release Form (Refusal of Care) (Form 4)	http://med.und.edu/policies/_files/docs/refusal-of-care-form.pdf

Student Bloodborne & Biological Pathogen Exposure

Quick Form 1

Page 1 of 2

Step One – Immediate Care (within 1 hour of incident)

- Exposure through a puncture/wound, cleaned with soap and water for 10 minutes.
- Exposure through eye or mucous membrane, flushed with water or saline for 10 minutes.
- Student reports incident to immediate student supervisor.
- Student obtains a copy of “Bloodborne & Biological Pathogen Exposure Quick Form 1”.
- Transport to appropriate health care provider is discussed and facilitated with the student’s immediate supervisor.

Exposed Student Name and Contact information	
Source Patient Name or Identification	
Incident Description Include type and amount of fluid, type of device if puncture or wound, type and severity of exposure.	
Geographical Location of the Exposure Incident	
Immediate Student Supervisor where incident occurred. Contact Information	

Upon Completion of Page 1
Route to SMHS Dean’s Office, Judy Solberg, judy.solberg@UND.edu

Student Bloodborne & Biological Pathogen Exposure

Quick Form 1

Page 2 of 2

Step Two- Post Exposure Risk Determination & Medical Evaluation within 2 hours

- Student has obtained a medical evaluation.
- Exposure incident has been communicated to UND SMHS.

Step Three- Mandatory Reporting within 24 hours

- UND Incident Reporting Form (Form 2) completed and electronically submitted by the immediate teaching supervisor.
Link to Form 2 (Click [SMHS only] button)
UND Campus Safety Incident Report:
<https://und.edu/public-safety/resources/forms.cfm>
- Lab testing/workup of source patient ordered by immediate teaching supervisor.
 - Lab tests ordered on source: HBsAg, HCV, rapid HIV, or TB.
- Testing/workup results on source serum reported to the student’s health care provider.
- Bloodborne Exposure:
 - Sample of student serum is drawn, separated, frozen and shipped by the student’s health care provider for storage at UND Student Health Services for 90 days.
 - Address: UND Student Health
 Attention: Laboratory Supervisor
 100 McCannel Hall
 2891 2nd Ave. N Stop 9038
 Grand Forks, ND 58202
- SMHS Bloodborne & Biological Pathogen Exposure Release Form (Refusal of Care) (Form 5) completed by the student, if applicable.

Date of Exposure _____
 Time of Exposure _____

Student requires restrictions.

Immediate Instructor Signature/Date

 (Verifying the Incident)

Student can assume normal tasks.

Student unable to assume normal tasks.

Student Signature/Date

 (Verifying the Incident)

Specify:
 Health Care Provider Signature/Date

 (Verifying the Consult)

Upon completion of Page 2, Route to SMHS Dean’s Office, Judy Solberg, judy.solberg@med.und.edu

**Student Bloodborne & Biological Pathogen Exposure Release Form
(Refusal of Care) Form 4**

I understand that due to my bloodborne or other potential infectious material exposure I may be at risk of acquiring HIV, HBV, and HCV, or other potential infectious pathogens.

I have been informed that it is the standard procedure after a bloodborne exposure incident to be tested for HIV, HBV, and HCV infection immediately. However, I decline to be tested for HIV, HBV, and HCV. I am signing this release form in full recognition and appreciation of the dangers, hazards and risks of not being tested for bloodborne pathogens or other biological infections.

I understand by signing this release, I am releasing and holding harmless the clinical affiliation site _____ and the University of North Dakota, their governing boards, officers, employees and agents from any and all liability, claims and actions arising out of this incident.

I recognize that this release means that I am giving up, among other things, the right to take legal action against the clinical affiliation site _____ or the University of North Dakota, their governing boards, officers, employees and agents for injuries, damages or losses I may incur. I also understand that this release bind my heirs, executors, administrator, and assigns, as well as myself.

I understand that I may be potentially exposed to a communicable pathogen, I may be a potential hazard to patients, and I may be suspended from a clinical affiliation and/or program.

Student Signature _____ Date

Student Name (print)

Witness Signature _____ Date

Witness Name (print)

Route to SMHS Dean's Office, Judy Solberg, judy.solberg@UND.edu

ACADEMIC HONESTY AND PLAGIARISM

Students are expected to maintain academic honesty. Scholastic dishonesty includes but is not limited to cheating on a test, plagiarism, and collusion. For detailed policy statements regarding scholastic dishonesty, see the University of North Dakota *Code of Student Life*, Appendix B: Academic Concerns (see <http://und.edu/code-of-student-life/appendix-b.cfm>)

Plagiarism includes (a) copying and pasting information from a web site or another source, and then revising it so it sounds like your original idea, (b) doing an assignment/essay/take home test with a friend and then handing in separate assignments that contain the same ideas, language, phrases, etc., (c) Quoting a passage without quotation marks or citations, so it looks like your own, (d) paraphrasing a passage without citing it, so it looks like your own, and (e) hiring another person to do your work for you, or purchasing a paper through any of the on- or off-line sources. Plagiarism also includes self-plagiarism, which means the repeated submission of all or part of work that you have previously submitted elsewhere.

OTHER IMPORTANT POLICIES

Emergency, Evacuation, and University Closures

If UND is closed due to severe weather or other reasons, the MPH Program will be closed. This information is communicated to students, staff, faculty, and the public through a variety of methods including the UND website, email system, NotiFind, and mass media radio and television stations. Additional information regarding emergency preparedness can be found by calling 701.777.3341 or on the following website: <http://und.edu/public-safety/emergencies/>.

Non-discrimination

No University employee or student will discriminate on the basis of race, religion, age, color, sex, disability, sexual orientation, gender identity, genetic information, national origin, marital status, veterans' status, political belief or affiliation, the receipt of public assistance, or any other class for which discrimination is prohibited by law or policy. Further, no University employee or student shall: (a) conceal any discrimination prohibited by law or University policy; (b) aid, abet, compel, coerce, incite, or induce a person to discriminate in violation of law or University policy; or (c) retaliate in any way against a person for making a complaint, testifying, assisting, or participating in any manner in an investigation or proceeding having to do with a claim of discrimination. Retaliatory actions which are prohibited include intimidation, threats, coercion, or discrimination against any such person.

ACKNOWLEDGEMENT

I have read the 2023-2024 MPH Student Policy Handbook and MPH Bulletin and agree to abide by the Policies and Procedures contained therein. I understand that policies and procedures may change throughout the duration of my program of study and that I will be made aware of these changes by Program Faculty and held accountable to these policy and procedural changes.

Student Name (print)

Student Signature

Date