**SULLIVAN UNIVERSITY**
**COLLEGE OF PHARMACY AND HEALTH SCIENCES**
**STUDENT HANDBOOK**
**2023-2024**

**SULLIVAN UNIVERSITY**
**COLLEGE OF PHARMACY AND HEALTH SCIENCES**
**2100 GARDINER LANE**
**LOUISVILLE, KY 40205**
**(502) 413-8640**

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Glossary of terms:

| | |
|---|---|
| ADSA | Associate Dean of Student Affairs |
| ADAA | Associate Dean of Academic Affairs and Assessment |
| APPE | Advanced Pharmacy Practice Experiences |
| COPHS | College of Pharmacy and Health Sciences\ |
| DC | Department Chair(s) |
| DDE | Director of Didactic Education |
| DCE | Director of Clinical Education |
| EOR | End of Rotation |
| IPPE | Introductory Pharmacy Practice Experiences |
| OAcA | Office of Academic Affairs and Assessment |
| OCEE | Office of Clinical and Experiential Education |
| OSA | Office of Student Affairs |
| PA1 | First Year Physician Assistant Student |
| PA2 | Second Year Physician Assistant Student |
| P1 | First Year Pharmacy Student |
| P2 | Second Year Pharmacy Student |
| P3 | Third Year Pharmacy Student |
| PDP | Professional Development Plan |
| SCPE | Supervised Clinical Practice Experiences |
| SU COPHS | Sullivan University College of Pharmacy and Health Sciences |

**INTRODUCTION**

Purpose and Scope of the Student Handbook

The College of Pharmacy and Health Sciences (COPHS) Student Handbook is prepared for use by students enrolled in any program of study of the College. The Sullivan University College of Pharmacy and Health Sciences (SU COPHS) operates on an academic calendar year defined as July 1st – June 30th. The Student Handbook is a resource of information relating to the organization of the COPHS, and is the students' guide to academic policies, the academic calendar, student life and professional activities and student support services. The student handbook is reviewed and updated on a regular basis. This edition of the Student Handbook supersedes all previous editions. The COPHS reserves the right to rescind or otherwise modify the provisions of this Student Handbook with or without notice. Neither the COPHS nor Sullivan University is responsible for any misrepresentations of its requirements or situations that might arise because of errors in the preparation of this Student Handbook.

Expectations of Students

Each student enrolled in the COPHS programs is individually responsible for knowledge of the current academic regulations, the general and specific requirements for successful completion of their program of study, and the operational policies as contained in this Student Handbook as well as other official documents or announcements of the COPHS.

We are dedicated to excellence in healthcare education and research as well as the highest standards of patient care. Our educational programs and eligibility for licensure, if applicable, as a healthcare practitioner demand that our students demonstrate excellent cognitive, behavioral, and technical skills, and abilities that prepare them to practice as safe, competent, and ethical practitioners in any setting.

These abilities and skills include communication skills that enable the student to effectively communicate in oral and written English with patients, health professionals, and/or the public. The student must also develop the proper use and recognition of non-verbal communication skills. In addition, the student must demonstrate a fundamental and continuing ability to use analytical reasoning and critical thinking skills both independently and in collaboration with others on the health care team to synthesize knowledge, engage in problem-solving and explain situations affecting health care delivery. The student must exercise good judgment and ethical reasoning in patient care and assessment as well as be prepared to incorporate new knowledge or changing information obtained from the practice environment.

It is important that the student possesses the motor skills (with accommodation, if necessary) to participate in both patient and non-patient care related activities as required by their program of study.

Finally, the student must always maintain conduct that is always of the highest professional and ethical standards as well as be willing to modify behaviors that may fall below the high standards expected of healthcare practitioners. The student must demonstrate compassion and concern for others whether they are patients, caregivers, or colleagues. As a healthcare practitioner, a student takes complete responsibility for their actions and must have the emotional stability to function under stressful conditions.

**OFFICE CONTACT INFORMATION**

College of Pharmacy and Health Sciences (COPHS)

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|---|---|
| Office of the Dean | (502) 413-8640 |
| Office of the Associate Dean of Academic Affairs and Assessment | (502) 413- |
| Office of Student Affairs | (502) 413-8645 |
| Office of the Associate Dean of Student Affairs | (502) 413-8657 |
| Office of Clinical and Experiential Education | (502) 413-8634 |
| Office of Financial Planning | (502) 413-8589 |
| Office of Research | (502) 413-8955 |
| Practice Experience Coordinator | (502) 413-8944 |
| The Hub for Academic Resources and Technology | (502) 413-8377 |
| Student Counseling Program | (502) 451-8262 |

Doctor of Pharmacy Program

| | |
|---|---|
| Department of Pharmacy Practice | (502) 413-8955 |
| Department of Pharmaceutical Sciences | (502) 413-8955 |
| Office of the Director of Experiential Education | (502) 413-8637 |

Master of Science in Physician Assistant Program

| | |
|---|---|
| Office of the Physician Assistant (PA) Program | (502) 413-8659 |
| Office of the Program Director of PA Program | (502) 413-8648 |
| Office of Director of Didactic Education for PA Program | (502) 413-8941 |
| Office of Director of Clinical Education for PA Program | (502) 213-8309 |

Pharmacy Technician Program

| | |
|---|---|
| Office of the Pharmacy Technician Program | (502) 413-8996 |

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**MISSION, VISION, AND GOALS**

Sullivan University Mission Statement

See Sullivan University Catalog – "Mission Statement".

Sullivan University College of Pharmacy and Health Sciences Mission/Goals

**Mission**: Educational excellence to improve the health of communities.

**Goals**:

- Promote innovation
- Advance a culture of diversity and inclusion
- Foster collaborative relationships
- Develop professional lifelong learners, practitioners, and scholars
- Advocate for our professions and the patients we serve

Doctor of Pharmacy Program Mission/Goals

**Mission**: To provide equitable and inclusive education to develop diverse and innovative pharmacists who serve communities and improve health

**Goals**:

- Provide innovative pharmacy education and clinical services
- Advance a culture of diversity, equity, and inclusion in pharmacy education, the profession, and patient care
- Foster collaborative relationships with all healthcare professionals
- Develop lifelong learners, professionals, and scholars
- Advocate for the profession of pharmacy and the patients we serve

Master of Science in Physician Assistant Program Mission/Goals

**Mission**: To educate future Physician Assistants to provide ethical, quality, and compassionate healthcare as part of an interprofessional team.

**Goals**:

- Promote innovation in PA education and professional practice
- Foster a culture of diversity, equity, and inclusion in PA education, the profession, and in patient care
- Facilitate collaborative relationship both within the PA profession and interprofessionally
- Develop PA professional lifelong learners, providers, and scholars
- Advocate for the PA profession and the patients we serve

Pharmacy Technician Program Mission/Goals

**Mission**: Elevate pharmacy practice through education and preparation of pharmacy technicians who confidently partner with other healthcare providers to serve communities, improve health, and advocate for the evolving role of pharmacy technicians.

**Goals**:

- Provide innovative pharmacy technician education
- Advance a culture of diversity, equity, and inclusion in pharmacy technician education, the profession, and patient care
- Foster collaborative relationships with all healthcare professionals
- Develop lifelong learners and professionals
- Advocate for the role of the pharmacy technician and the patients we serve

## ACCREDITATION

Sullivan University

See Sullivan University Catalog – "Accreditations & Approvals".

Sullivan University and College of Pharmacy and Health Sciences Accreditation and Approvals

See Sullivan University Catalog – "Accreditations & Approvals".

Sullivan University Doctor of Pharmacy Program

See Sullivan University Catalog – "Accreditations & Approvals".

Sullivan University Master of Science in Physician Assistant Program

See Sullivan University Catalog – "Accreditations & Approvals".

Pharmacy Technician Program

See Sullivan University Catalog – "Accreditations & Approvals".

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## GENERAL INFORMATION

Sullivan University Catalog

https://www.sullivan.edu/academic-catalogs

Bookstore

See Sullivan University Catalog – "Bookstore".

Equal Education and Employment Opportunity Institution

All applicants for the COPHS programs of study meeting the educational requirements and professional standards of the degree being sought will be considered for admission, regardless of race, color, national origin, religion, gender, sexual orientation, marital status, age, or disability. The University is an Equal Opportunity Employer, and no applicant or employee will be discriminated against because of race, color, religion, gender, sexual orientation, marital status, age, disability, or national origin.

Family Educational Rights and Privacy Act (FERPA)

See Sullivan University Catalog – "Family Educational Rights and Privacy Act (FERPA)".

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. These include the right to consent to disclosures of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent. One exception which permits disclosure without consent is disclosure to school officials with legitimate educational interests. A school official is a person employed by the University in an administrative, supervisory, academic or research, or support staff position (including law enforcement unit personnel and health staff); a person or company with whom the University has contracted (such as an attorney, auditor, or collection agent); a person serving on the Board of Trustees; or a student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks. A school official has a legitimate educational interest if the official needs to review an education record to fulfill his or her professional responsibility.

Grievance/Official Complaint Procedure (*University-level*)

See Sullivan University Catalog – "Grievance/Official Complaint Procedure".

General Statement of Liability

See Sullivan University Catalog – "General Statement of Liability".

Imminent Danger

See Sullivan University Catalog – "Imminent Danger".

Injury/Illness Expense Policy

Sullivan University and the COPHS are committed to operating a reasonably safe and secure educational facility on behalf of faculty, staff, students, and guests. This includes taking precautions to minimize exposure to injury and/or illness. However, from time to time, accidents do

happen and, therefore, this policy and explanation of procedures has been developed to clarify the institution's responsibility and response to occasions of injury or illness.

***Students must always maintain their own private health insurance and carry their health insurance identification card with them***.

Neither Sullivan University nor the COPHS act as an insurer and generally do not provide medical coverage for illness or injury sustained while at Sullivan University or the COPHS or while engaged in curricular and/or extra-curricular events. In no instance will Sullivan University or the COPHS guarantee payment to any third-party provider for any type of medical care.

Emergency services provided on-site by Public Safety staff is offered to faculty, staff, and students at no charge. The Public Safety staff, when seeing an individual presenting for emergency medical assistance, is required, however, to gather information and complete forms related to one's personal medical insurance. This information may be furnished to other insurance agencies, as required, when the agency is directly involved and/or considering an individual's claim. In addition, this information may be provided to third party healthcare providers who treat an individual referred for further treatment by Public Safety staff.

The "Health Office Incident Report" that is completed by the Public Safety staff is a form specifically used to document an individual's injury or illness. In addition, it serves as a record of treatment, a statement in support of HIPAA regulations, consent for treatment by Public Safety staff and a disclosure of the routing of the information contained in the report. Finally, the form contains billing information, continued care recommendations and a release of liability/refusal for treatment section used only when immediate care by Public Safety staff is refused. Individuals who do not want the University to keep medical information should, upon the need for treatment, immediately refuse treatment and request an ambulance or arrange for other transportation to a medical facility. Unconscious individuals and/or individuals unable to give consent at the time of the assessment will be treated on an emergency basis until an ambulance or other medical authority arrives and assumes care for the infirmed or unless an individual regains consciousness and refuses further treatment by Public Safety staff.

While on Sullivan University System owned or controlled property, or, while attending any event sponsored, co-sponsored or endorsed by the University or the COPHS, University officials may summon an ambulance and/or other community emergency resources if an individual is injured or ill and, in the judgment of Public Safety staff, medical attention is required. Conscious individuals may subsequently refuse treatment and/or transportation by the ambulance service upon their arrival. However, the Public Safety staff of the institution will want, in each situation so indicated, to meet the requirement of due diligence in safeguarding the health, life and safety of people on University property or at University or College sponsored events. In no instance will medical charges, as a result of illness or injury, be provided by the Sullivan University while any student or other participant is engaged in an athletic exercise, sports activity or other extra-curricular activity regardless of the institution's sponsorship of the activity.

For clarification and/or information regarding the University's policies relating to insurance and/or medical payments, questions should be directed to the Public Safety staff or the Sullivan University System Accounting Department.

All safety and security incidents involving a student on experiential (Introductory Pharmacy Practice (IPPE) or Advanced Pharmacy Practice Experiences (APPE) for student pharmacists), clinical (shadowing or SCPEs for student physician assistants), or externship (for student pharmacy technicians) experiences must be reported to the Office of Clinical and Experiential

Education (OCEE). Examples of such incidents include but are not limited to assaults, car break-ins, accidents to and from a site.

Students experiencing a medical emergency during the period of authorized presence on experiential, clinical, or externship experiences should use initial medical treatment offered at site for injuries or illness. The experiential, clinical, or externship site shall not be liable for costs of treatment. Students are to notify their preceptor and the OCEE of the site related injury or illness. Students should follow the policy and procedures outlined by the sites. The OCEE will complete a Health Office Incident Report and obtain a copy of the site incident report to be maintained in the student's academic file. SU COPHS assumes responsibility for cost associated with Post-Exposure Prophylaxis.

Printing/Paper Usage

See Sullivan University Catalog – "Printing/Paper Usage".

COPHS students may see the Office of the Dean to place more money on their print card.

Public Safety/Security

See Sullivan University Catalog – "Public Safety/Security".

Identification

Each student receives a photo ID which identifies them as a student of Sullivan University and the COPHS. This identification is used to gain access to the COPHS building by use of the Card Reader mechanism located at the front door of the College and at the corridor doors located on each floor of the College. The ID must always be visible while a student is in the building. Students who need a replacement card should contact the Office of the Dean. There is a ten-dollar ($10.00) replacement charge.

Register to Vote

See Sullivan University Catalog – "Register to Vote".

Harassment Policy and Procedure

See Sullivan University Catalog - "Behavior and Responsibilities" for definition of harassment.

See Sullivan University Catalog – "Sexual Offense Policy" for Title IX procedures and definitions of sexual offense.

Complaints of harassment are to follow the University policies (noted above). The SU COPHS Office of Student Affairs (OSA) is the appropriate department and the COPHS Associate Dean of Student Affairs or their representative is the designated University official, mentioned in the policies above, for the COPHS. Once reported, allegations of harassment are investigated, and appropriate actions taken. Should a report of discrimination or harassment be alleged by the student at a clinical site, procedure and policy will follow University policies stated in the Sexual Misconduct/Harassment noted above.

Smoking/Tobacco Use Policy

See Sullivan University Catalog - "Smoking/Tobacco Use Policy".

In addition, there is NO vaping, smoking or tobacco use permitted ANYWHERE on the COPHS property. When students are on their clinical practice experiences, they must follow the rules concerning smoking and tobacco use at those institutions and facilities.

Student Behavior and Responsibilities

See Sullivan University Catalog – "Student Behavior and Responsibilities".

Student Rights

See Sullivan University Catalog – "Rights".

Technology Use in the Learning Environment

See Sullivan University Catalog. Students must be aware that use of technology for reasons not related to a student's learning (didactic and/or practice experience) is NOT permitted in the learning environment (e.g., classroom or practice experiences) SEE BELOW. Recording devices and/or cameras are NOT permitted to be used during any classroom activities, assessments, or practice experiences without permission. Inappropriate use of technology while in the learning environment is in violation of the Student Honor Code and the student will be referred to the OSA and/or the OCEE for appropriate action.

Smart Phones and Tablets:

Smart phones and tablets may be utilized for accessing resources and in place of paper materials provided the instructor (faculty and/or preceptor) is aware of the use and has given the student permission.

Texting:

Communication by text may ONLY be used if determined by the instructor (faculty and/or preceptor).

Social Media:

Engaging in social media (e.g., Facebook, Instagram, Twitter, etc.) is NOT permitted during student participation in the learning environment. Students should not post remarks or comments referencing anything related to specific instructors (faculty and/or preceptors) or experiences in the learning environment. Misuse of social media is a violation of the Student Honor Code and will be reported to OSA for appropriate action.

Campus Vehicle Traffic and Parking Regulations

Parking on Sullivan University System owned, or controlled property is a privilege – not a right. That privilege can be revoked at any time by any member of the University or College administration or Public Safety staff. When parking privileges are revoked because of a violation or series of violations, no refund will be provided for the cost of the campus parking permit. Students are encouraged to carpool.

The following statements apply to University parking:

*Purchasing Permit*: COPHS parking permits are provided annually to campus based (didactic years) P.A. and PharmD students through the OSA.

*Parking Permit*: All students who utilize the University / COPHS parking areas must have a valid parking permit. Any car without a valid permit found on campus will be ticketed and/or towed at the owner's expense.

*Placement of Permit*: All hanging permits should be hung on your rearview mirror. If you do not have a rearview mirror, place the permit where it is visible from the outside of the vehicle. Permits in the form of "stickers" should be placed as indicated at the time of purchase.

*Lost/Stolen Permits*: If you lose or have your permit stolen, report it to the Public Safety Department immediately. If it is found on another vehicle, that vehicle will be towed and/or a substantial fine may be assessed. There is a $10.00 replacement fee for lost parking permits.

*Changing your car*: If you start driving a different car, you must inform Public Safety of the new license plate and vehicle information.

*Physical Placement of Vehicle*: For maintenance of the parking areas by security staff on campus, students are required to pull into parking spaces. Do not back in or pull through a parking space. Two reasons exist for this policy: first, it simplifies the checking of parking permits to prevent unauthorized parking and second, the fumes from exhaust systems of cars damage the shrubs and other greenery on campus. Vehicles should also be positioned between the parking spaces. Overlapping or double parking is considered a parking violation.

*Tow-Away Policy*: Any car without a valid permit parked at Sullivan University will be towed at the owner's expense. Any car belonging to a student, with or without a valid permit, which is parked in one of the following areas will also be ticketed and may be towed: handicap areas, the visitor's area, future student spaces, a fire lane, on the grass or on any non-paved area of the University grounds, in an area blocking a drive or another car, in a space marked Staff, Reserved or "W".

*Towing Costs*: If a vehicle is towed, the owner will be charged to retrieve it from impoundment. Questions regarding the towing policy should be directed to the Department of Public Safety at (502) 413-8888.

*Violations*: Students with unpaid parking fines will not receive their grades at the end of the quarter and will not receive a schedule for the following quarter. In addition, students with unpaid violations may not receive copies of transcripts.

*Disabled Parking*: All students, faculty, staff, and visitors who have disabled permits issued to them and properly displayed in their vehicles are eligible to park in any parking space designated as a disabled space regardless of the parking lot classification.

*Immobilization Devices*: At the discretion of Public Safety, a vehicle parked in violation of University regulations may be immobilized instead of being towed. Immobilization of a vehicle ensures direct contact with the offender so the violation may be addressed.

*Traffic Control*: While operating a motor vehicle on any Sullivan University System owned or controlled properties, drivers are required to obey the speed limit of 10 miles per hour and to yield, stop and/or provide the right of way to any emergency vehicle utilizing flashing or rotating red or

blue lights or any combination thereof. Failure to do so will be considered a violation, which may result in disciplinary action against the offending student(s).

*Safe Vehicle Operation*: While on University owned or controlled property, all vehicles must be operated in a safe manner at or below the 10 miles per hour speed limit. Unsafe starts that exhibit rapid acceleration, tire squealing or driving the wrong way down a one-way area of the property is strictly prohibited.

*Vehicular Noise*: Any vehicle that is in poor repair and makes excessive noise will be prohibited from operating on University owned or controlled property until proper repairs are made. In addition, playing a vehicle's sound system loud enough to be heard outside of the vehicle will be considered a violation of this section and disciplinary action may be taken.

*Parking for SU COPHS*: There are two parking areas for COPHS students. The southwest parking area adjacent to the Nolan Building and the assigned parking area in front of the COPHS Building.

Emergency or Event Notifications

In the event of an emergency or event that results in class changes, new schedules will be sent out from the Office of Academic Affairs and Assessment (OAcA). Students must download the Sullivan University Mobile App to receive current information on delays, closings, or emergencies. To do so, visit https://sullivan.edu/mobileapp and follow the instructions to receive notifications. Students will need their student ID to complete registration. We highly encourage you to download the Sullivan University Mobile App to receive all university level notifications on delays, closings, or emergencies.

Students must contact their preceptor regarding attendance at practice sites in the event of inclement weather. Mandatory make-up sessions may be required for missed days. While class changes and cancellations may occur on campus, students on clinical or practice experiences must contact their preceptor to determine the expectation for the day. All hours must be made up at the convenience of the preceptor.

In the event of a state of emergency, students will be expected to follow the recommendations of their site, local, and federal guidelines. If the student is unsure of whether attendance is required, they should contact their preceptor for information. Days missed due to emergency status may be required to be made up unless otherwise directed by preceptor and the Office of Clinical and Experiential Education.

Emergency Evacuation Plan

In the event of a fire or other emergency that requires an immediate evacuation of the COPHS, a faculty member, staff member, student or guest will pull the nearest fire alarm to activate the audible and visual alarms. All occupants of the building will immediately evacuate the building except for those employees as described below.

The COPHS's main office will:
- Immediately call 911 and extension 8888 to notify Sullivan University's Department of Public Safety.
- Contact the COPHS Building Maintenance Supervisor to go to the enunciator panel to determine the location of the alarm.
- Direct faculty and staff who are not engaged in teaching activities at the time of the alarm to clear the building in teams of two; reminding team members to check all restrooms, storage

closets, mechanical rooms, etc. Individuals on each floor have been designated to lead in clearing the building.

Faculty who are actively engaged in teaching activities at the time of the alarm will instruct all students to evacuate the building via the following exit routes and meet at the designated locations:

- Auditorium A and Dean's Office – Front Door of the COPHS Building; Congregate by light post straight across from the front door in the median of the second row of parking.
- Auditorium B, Skills Lab, and OCEE – Back Exit Door of the COPHS building immediately outside Auditorium B; Congregate to the furthest row of parking on the right.
- Auditorium C – Wooden door to Nolan Building exit stairs; Congregate at the Shuttle Parking Structure.
- Research Labs and Recipere Café – Straight across from the labs and up the stairs; Congregate at the Shuttle Parking Structure.
- First floor Study Rooms (A, B, C, and D) – Left out of Study Rooms (A, B, C, and D) door, then left out of the Nolan Building; Congregate at the Shuttle Parking Structure.
- All other area not listed above – Through wooden doors on all three COPHS floors through the Nolan Building side door into the Nolan Building parking lot; Congregate across from the large, canopied entrance.

The Dean will position themselves at the front entrance of the COPHS to act as a central collection point for information and will provide information to responding emergency personnel. If faculty determine any student(s) are missing, they will notify the Public Safety Officer from Sullivan University or Fire Chief in charge. The Public Safety Officer will provide to the Dean of the COPHS instructions during the evacuation and give a full report after the situation has been cleared.

No one will be permitted to re-enter the COPHS until the "all clear" is given by University Public Safety staff, the Fire Department, or Senior Administrator. Once the "all clear" is given, all students, faculty and staff will return to their duties and restore normal operations as soon as possible.

In the event of absence or unavailability of the Dean, the Dean's responsibilities will be assumed by their designee.

Library, Learning Resource Center, and Health Sciences Resource Portal

The Sullivan University Library and Learning Resource Center opened in January 1999 and contains approximately 30,000 volumes, 200-plus journal subscriptions and 50-plus electronic databases comprising 18,000-plus e-journals.

Library hours along with further information on the facilities, holdings, and resources can be found at https://libguides.sullivan.edu/website/?b=g&d=a&group_id=13813.

Additionally, the SU COPHS has a health sciences resource portal that can be found at the following hyperlink.

http://libguides.sullivan.edu/SUCOPDIC/home

ACPE Policies Related to Complaints – Doctor of Pharmacy Program

The following are procedures regarding student complaints in general and those relating to the standards of the Accreditation Council for Pharmacy Education (ACPE).

General Concerns/Complaints:

Students who have concerns or complaints about any aspect of their education in the Doctor of Pharmacy program are strongly encouraged to bring them to the attention of the proper persons at the College, i.e., the Department Chairs, the Associate Dean of Student Affairs and/or the Dean of the College or the individual faculty member or course director of the course(s) for which there may be concerns. They may do so themselves or through their class representatives. Input is requested directly from each student through course evaluations at the end of each quarter, year-end assessments, and program assessments near graduation. All suggestions, complaints, or concerns are carefully considered.

Complaints Related to ACPE Standards:

The Doctor of Pharmacy program undergoes the accreditation process against a set of standards, policies, and procedures published by the Accreditation Council for Pharmacy Education and available at https://www.acpe-accredit.org/. Any student may lodge a complaint against the College, or the Doctor of Pharmacy program related to those standards, policies, and procedures. Complaints should be in writing and sent directly to the Dean of the College. The student shall have the right to meet with the Dean to discuss their complaint within fifteen (15) working days.

The Dean will consider the complaint, may discuss it with the appropriate individual or office and may request a meeting with the student. The Dean will respond to the student within fifteen (15) working days of receipt of the complaint or personal meeting, which ever comes later. If a student is not satisfied with the response from the Dean, they may address the complaint to the entire faculty through the Faculty Secretary in writing and additionally in person if they choose, within fifteen (15) working days of receiving the response from the Dean. The faculty will hear the student and/or consider the complaint within thirty (30) working days of receipt and respond through the Faculty Secretary within ten (10) working days of consideration. A complainant may request of the Dean and/or the Faculty Secretary that their identity is kept confidential. This request will be honored as much as possible within the constraints of resolving the complaint itself.

Protection of the Complainant:

All complaints, concerns, and suggestions made by students and the reaction to them by the College and Doctor of Pharmacy program are handled in the spirit of continuous quality improvement. No retribution against any individual complainant may be taken by any faculty member, staff member, College committee or the faculty as a whole because of the complaint. A file will be maintained for inspection by ACPE of all complaints and responses related to ACPE standards and the procedures involved to ensure the complainant's fundamental procedural due process.

ARC-PA Policies Related to Complaints – Master of Science in Physician Assistant Program

The following are procedures regarding student complaints in general and those relating to the standards of the Accreditation Review Commission on Education for Physician Assistant, Inc. (ARC-PA).

Concerns about Program Compliance with Policies and/or Standards:
The ARC-PA will investigate, according to its procedures, concerns regarding PA programs only if the concern contains facts or allegations that, if substantiated, may indicate that the program is not following established ARC-PA policies or does not comply with accreditation Standards.

The ARC-PA will only consider concerns submitted in writing and signed. The ARC-PA procedures provide programs with an opportunity to respond to the nature of the concern.
These procedures also protect the confidentiality of individuals, information, and results of the investigation of concerns.

The ARC-PA will not take any action based on an anonymous concern or concerns in litigation through the legal system. The ARC-PA will not intervene on behalf of an individual concerned about program or institutional issues unrelated to the Standards, will not serve to mediate or determine the results of disputes between program applicants, students or faculty and the PA program or institution.

Procedure:

To receive formal consideration, all concerns shall be submitted in writing and signed. The ARC-PA will not take any action based on an anonymous concern. The concern should demonstrate that reasonable efforts have been made to resolve the concern, or alternatively that such efforts would be unavailing.

In consultation with the Executive Director, the Chair of the ARC-PA will determine whether a concern raises issues relating to compliance with the Standards or ARC-PA policy. If the Chair determines that the concern does not raise such issues, the Executive Director will notify the complainant, within 20 working days that the concern is beyond the purview of the ARC-PA.

If it is determined that the concern raises issues relating to compliance with the Standards or ARC-PA policy, the Program Director will be notified and will be provided with a summary of the allegations. The Program Director will be requested to respond in writing within 30 days. The Program Director also may be requested to answer specific questions or provide other information, documentation, or materials.

The complainant will be informed that an ARC-PA investigation has been initiated, but the result(s) of any ARC-PA investigation will be treated as confidential and will be entered into the Program's confidential accreditation file.

The ARC-PA will conduct a confidential investigation of the concern indicating that a program may not be in compliance with the Standards or ARC-PA policy. Such an investigation will typically be conducted by one or two members of the ARC-PA, appointed by the Chair to conduct the investigation, who will review the concern and its supporting evidence. The ARC-PA may request further information or material relative to the concern from the complaining party, the institution, or other relevant sources. The findings of the investigation, which may or may not include recommendations for action, will be presented at the next regularly scheduled ARC-PA meeting occurring not less than 60 days after the written, signed, concern and any requested corroboration are received by the ARC-PA. If the investigation has not been completed by the time of such meeting, a required report will be presented.

Concerns received in such a manner that they cannot be considered at a regular ARC-PA meeting may be handled by presentation to the Executive Committee or via conference call meeting, and vote if action is required, of the entire commission, at the discretion of the ARC-PA chair.

If the ARC-PA, in its sole discretion, determines that sufficient evidence does not exist to indicate that the program is not in compliance with the Standards or ARC-PA policy, it will close the matter and report the same in a timely manner to the Program Director.

If the ARC-PA, in its sole discretion, determines that sufficient evidence exists to indicate that the program may not be in compliance with the Standards, it may request additional information or a required report, or schedule a limited site visit to further investigate the matter. The cost of such a visit, if needed, will be borne by the program. The Program's accreditation status may be affected by the results of the evidence. The Program Director will be notified in a timely manner of the ARC-PA's action.

ASHP Policies Related to Complaints – Pharmacy Technician Program

The following are procedures regarding student complaints in general and those relating to the standards of the Accreditation Council for Pharmacy Education (ACPE).

The American Society of Health-System Pharmacists (ASHP) will investigate formal complaints related to noncompliance with accreditation standards if the formal complaint procedures are followed and substantial evidence determines the program/organization is not meeting the accreditation standards.

The process may begin with an anonymous inquiry to the Vice President of Accreditation Services. The name of the complainant remains confidential until the point that a formal complaint has been filed.

ASHP will not intervene on behalf of an individual complainant regarding matters that are not related to ASHP accreditation standards and regulations (e.g., dismissal of a resident or pharmacy technician education and training student from a program, or to resolve individual disputes between individuals and accredited training program personnel). ASHP will not intervene on behalf of individuals for preceptors, program directors, faculty members, students, or residents regarding human resource issues (e.g., retention, appointment, promotion or dismissal).

ASHP accredited residency or pharmacy education and technician training program staff (or programs in the process of being accredited) must comply with ASHP accreditation standards and regulations. Program staff must provide an environment in which individuals (e.g., residents, students, and preceptors) may discuss matters in a manner that encourages cooperative resolution of issue(s). Note: anyone having evidence of non-compliance with ASHP accreditation standards may submit a formal complaint to ASHP, provided attempts to resolve the issue have occurred prior to contacting ASHP. Any complaint must be submitted in writing and relate directly to issues of non-compliance with accreditation standards or regulation. Anonymous complaints or complaints solely by email will not be considered as a formal complaint.

Submitting a Formal Complaint:

If the complainant is a resident, student, preceptor, teacher, or other person affiliated with the program or organization in question, the following steps should be taken before submitting a complaint to ASHP.

Steps on Submitting a Formal Complaint:

- Start by addressing your concern with your program director. Make sure you are aware of the organization's official policies and procedures and process for filing a complaint or grievance. Follow their processes.
- If the efforts above do not resolve the issue, follow the organization's formal grievance or complaint process to raise the complaint to the next level at the organization. (e.g., the director of the pharmacy, school administrator, or human resources department).

- If the efforts in a and b above do not resolve the issue, you may contact the Vice President of Accreditation Services Office at ASHP to discuss submitting a formal complaint. The complaint must directly relate to a specific accreditation requirement (please be prepared to explain which part of the accreditation standard or regulation that is relevant to the complaint).
- The name of the complainant shall remain confidential, until the point that a formal complaint has been received by ASHP.
- If the complainant has threatened or filed legal action against the program involved, ASHP will not investigate complaints until resolution of the legal action has occurred, after that time the complainant can file the formal complaint with ASHP.
- If a decision is made to file a formal complaint, review the information for content of the formal complaint letter below.
- If the complainant is someone outside of an ASHP-accredited program, they may contact the Vice President of Accreditation Services at ASHP as the first step in the process.

Content of the Formal Complaint:

When submitting a complaint that alleges non-compliance with ASHP accreditation standards or regulations, the complaint must be in the form of a written letter complete with signature and date (i.e., not an email) and include the following:

- A description of the alleged specific non-compliance with the accreditation requirements (e.g., what part of the ASHP- accreditation standard or regulation is in non-compliance)
- Related circumstances that are the reason for the unresolved complaint that relate directly to the violation of the ASHP-accreditation standard or regulation.
- Include related dates and timelines, names of individuals, and programs involved.
- Specify steps that were taken to try to resolve the issues within the program or organization.
- Copies of any documents that support your complaint.
- A statement of the action you are looking for from ASHP.
- The name of the program, organization, and address with alleged violation.
- Your name, relationship to the program in question, and contact information (phone, email, and address)
- Signature and Date of your letter

**Complaints should be addressed to**:
Janet Silvester, PharmD, MBA, FASHP
Vice President, Accreditation Services Office
American Society of Health-System Pharmacists
4500 East West Highway, Suite 900
Bethesda, MD 20814

ASHP Procedures for Processing a Formal Complaint:

- The individual sending a formal complaint will receive notification of receipt of the complaint from ASHP Accreditation Services Office within 15 business days of receiving the complaint at ASHP.
- The Vice President of Accreditation Services Office shall determine if additional information from the complainant is required.

- When sufficient information has been provided, the Vice President of Accreditation Services Office or designee shall review the information to determine if the complaint is related to a specific accreditation standard or regulation.
- If the complaint is determined to not be related to specific ASHP-accreditation standard or regulation requirements and therefore outside the authority of the ASHP Commission on Credentialing, the complainant will receive written notification of that decision.
- If the complaint is related to a specific ASHP standard(s) or regulation(s), ASHP will contact the program director and the organization's administrator of the accredited or accreditation-pending training program in question, requesting a written response to the allegation(s) within 30 days. The response must be signed by the program director and the organization's administrator.
- Failure of the program director to respond within the established timelines will be considered an indication that the complaint has merit unless the program director has requested an extension on the deadline.
- Information from the complainant and the program's response will be provided to the Commission on Credentialing or Pharmacy Technician Accreditation Commission Complaint Review Committee for further action.
- Individuals filing official complaints must understand that once the complaint has become formal the information will be shared with the site. Training program staff will then need to respond with any documentation they have related to the situation.

Complaint Review Committee Action:

A complaint review committee of the ASHP Commission on Credentialing* or Pharmacy Technician Accreditation Commission* will review both the complaint and the program's response to the complaint, and may determine that:

- The response satisfactorily addressed the allegations, and no further action is required.
- There is validity to the complaint and a subsequent report on correction beyond what the program has provided, is still needed.
- There is validity to the complaint and the onsite-surveyors shall be directed to investigate the matter at the time of the next (regularly scheduled) site-visit.
- The matter is sufficiently serious to warrant a site-visit before the next scheduled visit and will be at the program's expense.
- The matter is sufficiently serious act at the next ASHP Commission on Credentialing (COC) or Pharmacy Technician Accreditation Commission (PTAC) meeting that can change the program's accreditation status.
- The matter is sufficiently serious to take action to revoke and reject the application for accreditation any program in pre-candidate and candidate phase of accreditation. Reapplication for accreditation will be determined by the COC or PTAC.

Following consideration by a complaint review committee, the program director and complainant shall be informed in writing of the COC or PTAC complaint review committee's decision on the complaint. The COC or PTAC complaint review committee's decision on the complaint is final and may not be appealed by either the complainant or the program director.

Confidentiality:

The name of the complainant will remain confidential, until a formal written report is received in the ASHP office. At this time the information may be provided to the site to gather more information regarding the situation. A copy of the site's response will be provided to the complainant unless the

site provides compelling reasons for maintaining the confidentiality of its response. In such case, the site shall provide two versions of the response to ASHP. The second version shall be the response with any confidential information redacted. The site shall additionally indicate the reasons for any proposed redaction. The final decision as to whether and to what extent the proposed redacted version is provided to the complainant shall be solely that of ASHP.

<u>Complaint File</u>:

During the period when the complaint is being processed, the Vice President of Accreditation Services shall maintain the relevant correspondence in a case file that is separate from the official program file. When the case has been closed, the file shall be referred to the on-site surveyors for review at the next scheduled accreditation survey.

*The complaint review committee of the ASHP Commission on Credentialing or Pharmacy Technician Accreditation Committee will consist of a minimum of (but not limited to) three individuals, the Chair of the COC or PTAC, the Past Chair, or Vice Chair: the respective accreditation services director (or designee); and a lead surveyor. Reviews may occur through conference calls to expedite decisions.

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## STUDENT SERVICES

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Criminal Background Checks

Criminal background checks (CBCs) are commonplace as requirements for employment and/or for granting of certain permits or licenses. As part of the admissions process, The COPHS conducts routine CBCs on its applicants and matriculated students. Students who provide false or misleading information relating to criminal offenses in any documents relating to their admission to the COPHS are subject to immediate dismissal. Failure to disclose correct information at any time on the part of matriculated students may be the basis for disciplinary action.

The COPHS will only accept and retain students who meet the COPHS's Expectations of its students. All matriculated students to the COPHS programs will be required to undergo a Criminal Background Check (CBC). Applicants will report on their application whether they have ever been charged with or convicted of a misdemeanor or a felony or if a violation has been expunged.

All applications for the Doctor of Pharmacy program are submitted through the PharmCAS system. PharmCAS will initiate the CBC when the OSA notifies the agency that an offer of admission has been made to a student. Additionally, each student grants the COPHS permission to complete a CBC upon completion of the Supplemental Application. All matriculated students for any other program in the COPHS, requiring a CBC, will initiate their CBC when the OSA notifies them. When it is necessary to update a student's CBC, the COPHS will contract with an appropriate agency to perform this activity.

After matriculation the COPHS requires and will contract for the performance of CBCs of all students enrolled in the COPHS. This policy is adopted in response to requirements in the healthcare practice environment. When a CBC is warranted, the student will receive an email requesting permission to run the report. This email will be sent to the student's Sullivan email account (@my.sullivan.edu) and the request should be completed immediately.

Upon receipt of the results of a CBC, students may be given the opportunity to respond or comment on any adverse report.

After social security number validation, each State of residence showing any activity for that social security number will be checked. The review will include criminal records including arrests and convictions for all offenses of any type, and a review of the registries and reports of child and/or dependent adult abuse of any nature. The OSA will maintain all CBC data as part of the student's academic file in accordance with applicable laws and University policy.

Upon request to the OSA, a copy of a student's CBC will be provided to the OCEE. The OCEE will provide this information, upon request, to the requesting practice sites. The practice site will decide whether the student may participate in that setting. Such a determination will be independent from any determination made by the COPHS. Upon request, the OSA may provide a copy of the results of a CBC to an inquiring official licensure or certification body.

If a site requires a more detailed CBC than available through the COPHS's contracted service provider, the student may be responsible for scheduling and payment prior to the assigned experience. Requests for CBCs should be made at least two (2) weeks in advance of the experience to avoid delay in receiving and processing. Occasionally a site may not have notified the COPHS of changes to site requirements and the student must take responsibility to notify the OCEE if a CBC is needed and to provide the requesting party's contact information.

Should the CBC disclose adverse information, the OSA will present all findings of criminal activity on a CBC to the Office of the Dean and Program Director, if applicable. The student will be notified

if it appears, they will not meet the COPHS expectations of its students or the expectations of the site. The matter may be referred to the Academic Progression and Professionalism Committee, which will make a recommendation to the Office of the Dean and Program Director, if applicable on whether to continue enrollment.

Procedure in the Event of Felony or Misdemeanor Activity

During the Application/Admissions Process:

Applicants will be notified if it appears that, due to the information on their application, they will not meet the COPHS expectations of its students or other University policies. In such cases, the applicants may be given an opportunity to provide additional information that explains their history. The decision to continue the application process will be made by the Office of the Dean and Program Director, if applicable in consultation with the OSA and the applicant as needed.

After Matriculation of a Student:

To maintain confidentiality, the OSA will present all findings of criminal activity on a CBC to the Office of the Dean and Program Director, if applicable. The student will be notified if it appears, they will not meet the COPHS expectations of its students or the expectations of the site. The matter may be referred to the Academic Progression and Professionalism Committee, which will make a recommendation to the Office of Student Affairs who will work with the Office of the Dean and Program Director, if applicable on whether to continue enrollment.

Drug Screening of Students, Substance Abuse, and Impaired Students

See Sullivan University Catalog – "Alcoholic Beverages and Illegal Drugs".

Any student found in violation of this policy or any student who refuses or fails to submit to a drug screen is subject to disciplinary action up to and including suspension or dismissal from the COPHS. Students may be required to submit to a drug screen at any time.

Students, enrolled in the COPHS, testing positive for any illegal drug(s)/substance(s) will be required to have an evaluation completed for substance use disorder and meet with the appropriate recovery network to discuss the services they can provide to individuals. Additionally, a Professionalism Concern Note will be completed, and the Academic Progression and Professionalism Committee will meet with the student to provide their recommendation for possible suspension or dismissal from the COPHS.

Drug Screening for Clinical or Experiential Education

Students may be required to submit to a drug screen as a condition for participation in experiential or clinical education activities at practice sites that have partnered with the University. The cost of the drug screen is included in the student's tuition/fees.

As the Office of Clinical and Experiential Education (OCEE) assigns students to practice sites, the provider may be notified of students who will require a drug screen prior to participation. The provider will coordinate scheduling, if necessary. Testing will be conducted by the provider.

The provider will report the results of all drug screens directly to the OSA. OSA will forward results of drug screenings to OCEE as necessary. Documentation of all screening results will be maintained by the necessary parties in accordance with all local, state, and federal regulations.

In case of any confirmed positive drug screening the ADSA will be notified by the provider. The ADSA, with appropriate parties, will collaborate on meeting with the affected student as well as determining appropriate next steps.

Policy for Off-Site Drug Screening:

In cases of drug screens for off-site locations (>60 miles from SU COPHS), students are required to follow the institution or site policies for drug screening. In these instances, students should contact the OCEE to evaluate if it is possible for a drug screening to be done through a Sullivan University partner facility. Once all options have been exhausted, any costs incurred in these situations are the responsibility of the student.

Substance Abuse

The COPHS has a duty to protect the safety of and promote the well-being of its students. A student with a substance abuse or addiction problem may have impaired judgment and skills and be unable to provide safe and competent patient care. Therefore, all members of the COPHS community must address the problem of substance abuse and addiction as it affects students in the COPHS. The following assumptions are made:

- Students impaired by substance abuse or addiction compromise their educational experience, the safety of patients and the integrity of the profession.
- Students who are impaired by abuse or addiction compromise their health but can be successfully treated and return to a productive level of functioning.
- The COPHS is committed to referral of affected individuals for treatment.
- Impaired students should receive an opportunity for treatment in lieu of, before, or in concert with disciplinary measures.

The responsibility of the COPHS is to refer students with abuse or addiction problems to appropriate agencies for intervention, assessment, and treatment.

- Student Pharmacists, Student Pharmacy Technicians, Pharmacy Technicians, Pharmacists:
    - Kentucky Professionals Recovery Network (www.kyprn.com)
    - Contact: Emily Caporal
    - Office Phone: 502-230-8442
    - Email: emily@kyprn.com

- Physician Assistant Students
    - AAPA Twelve Step Recovery Group (https://www.aapa.org/advocacy-central/constituent-organizations/special-interest-groups/group/810480034/) 162 Harrison Avenue, Glenside, PA 19038-4009
    - Contact: Bernard Stuetz
    - Phone: 215-884-6220
    - Email: bjspaethic@aol.com

Each case will be addressed with the utmost confidentiality and compassion by the OSA and other college administrators. An appropriate plan in the student's best interest will be proposed relating to their academic progression. Impaired students who choose to decline or terminate enrollment in a recovery network/group will be considered for administrative dismissal from their respective program and the COPHS.

Students with Disabilities

See Sullivan University Catalog – "Requests for Accommodation".

In addition, the procedure and documentation that must be completed can be found in the learning management system (i.e., Blackboard) under "Organizations" > "PA Students" or "PharmD Students" (depending on your program of study) > "Student Forms" > "Disability-related Accommodations Procedure". Any questions about this procedure should be discussed directly with the Associate Dean of Student Affairs.

Service and Emotional Support Animals

See Sullivan University Catalog – "Service and Emotional Support Animals".

Assisting Students with English as a Second Language

Sullivan University COPHS has developed a plan to work with students who have English as their second language (ESL students). Faculty members who identify an ESL student who may be having trouble with English should notify the OSA who will arrange to meet with the student. ESL students may also self-identify their need for assistance by contacting the OSA to arrange a meeting.

Policy Relating to Student Issues and Concerns

If students are having an issue or concern, they are expected to follow the chain of command. If the issue is in the classroom, the student should begin with consulting the course coordinator. If the issue is not resolved the student can then go to the following individuals depending on their program of study:

Doctor of Pharmacy
- Department Chair
- Director of Clinical/Experiential Education

Physician Assistant Program
- Director of Didactic Education
- Director of Clinical Education

Pharmacy Technician Program
- Program Director

If a student is unsure as to where to start, they should consult their class representatives/officers, advisor, the OSA, or the OAcA. Learning to follow the chain of command is part of being a professional. Students who do not follow the chain of command will be directed to do so.

If the student has a class issue, they would like their class representatives/officers to address, they should speak directly with their class representatives/officers concerning the matter. If a student has an issue of sensitive matter that they do not wish to share with their class representatives/officers or course coordinator, they should come directly to the OSA in order to provide a clear plan of action and protect the confidentiality of student matters. The OSA will help the student make an appropriate plan of action.

Any student issues and/or concerns that may be deemed related to professionalism may be brought to the Academic Progression and Professionalism Committee for their evaluation, input, and recommendation(s).

Address and Name Changes

The OSA should be notified whenever a student has a change of address (permanent or mailing), change of phone number, or change of emergency contact. The student will complete a Student Contact Information Change form online:

https://tinyurl.com/SUCOPHSStudentContactChange

The OSA will handle all changes with the University Records Office and CampusNexus. It is the student's responsibility to ensure correct contact information continually updated in the program's practice education software platform (e.g., CORE ELMS). The COPHS is not responsible for any miscommunications sent to students who have not provided correct contact information to the OSA.

**Please note**: If a student wishes to change their name, they must contact the College of Pharmacy and Health Science's Financial Planning Coordinator (FPC) as well as the OSA. Once the name change is cleared through the FPC the OSA will complete this change within CampusNexus.

All campus systems (e.g., LMS, exam testing, etc.) will not be updated until the CampusNexus change has been approved and may not be completed until the beginning of the following quarter. Email addresses will not be updated with name changes.

Student Technology Requirements

Hardware:

PLEASE NOTE: A laptop computer (Windows or Mac operating system) is required for all students entering COPHS professional programs as of July 1, 2020.

| Windows | OS |
|---|---|
| Processor: Dual Core i5 or greater (2Ghz or greater) | Processor: Dual Core i5 or greater (2Ghz or greater) |
| Screen resolution of 1024 by 768+ | Screen resolution of 1024 by 768+ |
| 8 GB RAM | 8 GB RAM |
| Storage 256GB | Storage 256GB |
| 1GB or higher of available space | 1GB or higher of available space |

Operating Systems:

| Windows | OS |
|---|---|
| 64-bit versions of Windows 11 or later (only genuine, U.S. – English versions of Windows Operating Systems) | OS X 12.3 (Monterey) or later |
| Administrator account permissions | Administrator account permissions |

Internet Browsers:

Google Chrome (current version) – preferred internet browser
Mozilla Firefox (curent version)
Safari (current version)

Software:

Adobe Reader (version 11 or later)
JavaScript enabled

Please note: COPHS students will have access to Office 365, which includes Microsoft Word, Excel, PowerPoint, etc.

Power:

Continuous power source or extra batteries

Video/Audio:

Video camera and audio capabilities may be required for instruction and/or meetings.

Things to consider
Camera (built-in or external)
Microphone (may be included in some headsets/headphones)
Speakers/headphones

Preferred Devices:

MacBook Air, MacBook Pro, PC Laptops that meet or exceed technology requirement above.

Non-compatible Devices:

iPads, Android-based tablets, Chromebooks, and jailbroken devices

Policy on Copier Use and Printing

There are designated copiers / printers available for student use in the COPHS. Students are not to use copiers in the Administrative or Faculty Office areas. Copiers are also available in the University Library for student use.

Student Work Hours

Doctor of Pharmacy Program:

The Doctor of Pharmacy program encourages students to maintain their academic endeavors as the primary focus before taking on any outside employment. Any student who is employed or who plans to be employed regardless of internship hours accruement, must complete the form below requesting authorization from the OSA and OAcA prior to accepting employment.

https://tinyurl.com/SUCOPHSStudentEmployment

This policy exists to prevent a student from falling into academic difficulty. If a student who is employed is not performing satisfactorily academically, the COPHS reserves the right to review the student's work schedule and direct the student to make necessary changes to ensure their satisfactory academic performance. Students are not to work more than 8-10 hours per week. OCEE must be aware of all pharmacy employment to ensure appropriate site placement.

Outside employment is never an excuse for missing or altering any didactic or clinical activities. Didactic or clinical activities may include evening or weekends and always take priority.

Master of Science in Physician Assistant Program:

The Master of Science in Physician Assistant program encourages students to maintain their academic endeavors as the primary focus. In order to prevent a student from falling into academic difficulty students should refrain from outside employment during the full 24 months of the PA program.

Outside employment is never an excuse for missing or altering any didactic or clinical activities. Didactic or clinical activities may include evening or weekends and always take priority.

Registration as a Pharmacist Intern

All Doctor of Pharmacy students must be registered as pharmacist interns to receive internship credit for experiential coursework and must be obtained before the coursework begins. All students must possess and maintain an active Kentucky and Indiana Pharmacy Internship License during their time in the Doctor of Pharmacy curriculum. Students will not be permitted to participate in IPPE or APPE without active intern licenses in BOTH states. Penalty may be delay or dismissal from the Doctor of Pharmacy program and any action mandated by the respective State Board of Pharmacy. Record of Intern licenses will be maintained by the student in the program's practice education software platform and will be audited annually for compliance.

Internship registration is limited to those persons who are actively engaged in the academic or practical experience requirements for licensure examination as a pharmacist. No person who terminated the educational requisites is entitled to the privileges of internship registration, apart from any hardship case given written approval by the Board of Pharmacy. If you are not registered with the Board as a pharmacist intern, you cannot use or exhibit the title pharmacist intern, pharmacy apprentice, pharmacy extern or any term of a similar nature.

The Office of Clinical and Experiential Education (OCEE) will report all intern hours acquired for credit in the Doctor of Pharmacy program at Sullivan University COPHS to the Kentucky Board of Pharmacy and to the Indiana Board of Pharmacy upon request. These hours will fulfill the 1500-hour minimum. If a student would like to report any additional hours acquired outside of the Doctor of Pharmacy program, they may do so by submitting an Internship Report by October 1st of each year to the Kentucky Board of Pharmacy.

A pharmacist intern who performs work or research related to the practice of pharmacy that was performed under the supervision of a non-pharmacist preceptor for a government body, college or university, pharmaceutical business, or other entity may not be eligible for intern credit. The OCEE will advise the student regarding these hours.

Please note, if the plan is to obtain licensure in a jurisdiction beyond Kentucky or Indiana, it is the student's responsibility to determine what additional requirements may be needed within that jurisdiction and work with OCEE on a plan to meet these requirements.

Healthcare and Immunization Documentation

Sullivan University and the COPHS maintain that student health and well-being is a vital part of everyday college life. To that end, if a student needs health-related services or mental health services, they are encouraged to meet with the OSA to discuss their need, who will refer the student to the appropriate service and/or agency.

The COPHS follows the recommendations and/or requirements of the Centers for Disease Control and Prevention (CDC), the local health departments, and our contracted practice experience sites for immunizations/medical tests of healthcare personnel.

All students enrolled in the COPHS must provide evidence of immunizations for the protection of the students and patients with whom they may come into contact. This documentation shall be submitted to the program's practice education software platform upon a student's acceptance into their respective program or no later than the first day of classes.

Students will upload their documentation of the required immunizations and health-related materials to the appropriate database as directed by OCEE. OCEE is responsible for verifying and maintaining all student immunization records as well as reporting this information to OSA and the Office of the Dean as requested. If the student wishes to access their health information, or has any questions regarding their personal documentation, they should contact OCEE.

The required immunizations/screenings are:

- The MMR (mumps, measles, and rubella): Two (2) doses or titer
- Tetanus/Diphtheria/Pertussis: Tdap/Td, if > 10 years since last booster
- Hepatitis A series
- Varicella: Two (2) doses or a positive titer
- Hepatitis B series AND surface antibody titer
- COVID-19: Up to date based on CDC Recommendations
- Tuberculosis Screening: Negative PPD results OR negative equivalent IGRA blood test within the past three (3) months prior to entrance to SU COPHS
  - Students with a history/presumed exposure to BCG vaccination or positive PPD must follow appropriate procedures as outlined by the appropriate service and/or agency.

The following immunizations/screenings are required annually.

- Influenza vaccine: Must be immunized by October 1st of each year as determined by OCEE.
- Tuberculosis screening

Students that are not up to date with immunizations, screenings, and tests will NOT be permitted to participate in any clinical or practice experiences. Students going on international experiences will be required to do an additional tuberculosis screening within 8 to 10 weeks of their return to the US. The OCEE is responsible for enforcing adherence to this policy. The OCEE will maintain copies of all records pertaining to immunizations, screenings, and medical tests.

Students will be required to submit proof of all immunizations and health compliance documentation to OCEE, which will maintain all student health records. Students must maintain personal health insurance throughout the time in their specific program. PA Program faculty,

including but not limited to, the Program Director, Medical Director, principal and adjunct faculty, and preceptors may NOT serve as health care providers for students.

The College will provide the following annually required screenings with no out-of-pocket costs to students:

- Annual tuberculosis screening
- Urine Drug Screens as required by practice sites or by the COPHS.

Occupational Blood Borne Pathogen Protocol

Upon exposure to a Blood Borne Pathogen, the student is to follow the Occupational Blood Borne Pathogen protocol as directed by Sullivan University.

- Wash the exposed site with soap and water, remove any contaminated articles of clothing, and flush the eyes if exposure was to the eyes.
- Report the incident to the Preceptor/Supervisor/Office manager immediately. Follow the site's protocol for their documentation of BBP exposure. (Documentation will also be needed for Sullivan University, as outlined below.)
- Obtain the patient's name (source of exposure) date of birth, and medical record (if in a hospital/office setting) to report the incident.
- Obtain the patient's (source of exposure) past medical history, which would also include history of IV drug use, HIV, and Hepatitis status, if known.
- Ensure that a blood draw will be completed on the source if the source consents. If the blood cannot be drawn at the site, or testing cannot be performed there, the source may need to accompany the student to the ER. If the source does not consent, the student must still obtain further medical evaluation.
- Obtain medical evaluation immediately; within 2-4 hours of exposure at the closest Emergency Room. If prophylactic medications are needed, the shorter the time frame, after exposure, has better outcomes.
- Lab testing will include a rapid HIV and Hepatitis panel for the source patient. The exposed student will need a baseline HIV and Hepatitis panel.
- The Rapid HIV results will be disclosed to the student at the Emergency Room. The results from the Hepatitis Panel will be discussed at the follow up appointment. (see below)
- The healthcare provider at the ER must fill out the "Physician Treatment for BBP exposure form" which the student will take with them to their follow up appointment. This form should be obtained by the student calling their Program Director or Director of Clinical/Experiential Education to report this incident.
- The student must call the health service coordinator/public safety supervisor for Sullivan University at: (502) 413-8618 to report the BBP exposure within 24 hours of the incident. The "Exposure Incident Investigation Form" will also need to be submitted to the health service coordinator/public safety supervisor, the next business day.
- The student is to call their Program Director or Director of Clinical/ Experiential Education to report the incident within 24 hours.
- Follow up with a Baptist Health Occupational Medicine facility the next business day or within 48 hours of exposure. All paperwork and the "physician treatment for BBP exposure form" from the ER, will need to be presented at that time. If you are out of the Louisville area, follow up with the closest Baptist Health Occupational Medicine facility or return to the Louisville area.

It is the student's responsibility to follow the post exposure treatment and associated appointment schedule as directed by Baptist Health Occupational Medicine.

**** REFER TO THE TABLE BELOW FOR PROGRAM SPECIFIC CONTACT INFORMATION. ****

| Sullivan University COPHS | Title | Number | E-Mail |
|---|---|---|---|
| Melissa Edds, MS, PA-C | Director of Clinical Education (Physician Assistant Program) | (502) 213-8309 | medds@sullivan.edu |
| Vinh Nguyen, PharmD | Director of Experiential Education (Doctor of Pharmacy Program) | (502) 413-8637 | vnguyen@sullivan.edu |

Student Professional Liability Insurance

Students are required to have professional liability/malpractice insurance and have it throughout their educational experiences in the COPHS. Student's professional liability/malpractice insurance will be coordinated and paid by the COPHS. Students will not be permitted to engage in practice experiences without professional liability/malpractice insurance. Proof of professional liability/malpractice insurance will be uploaded to the program's practice experience education software platform.

CPR Certification Requirements for SU COPHS Students

All students at SU COPHS are required to maintain an active CPR certification. The specific requirements vary by program of study. All students must have active CPR certification before they begin their APPEs/SCPEs. Students who do not maintain active certification may not be eligible for APPEs/SCPEs, which could delay their graduation.

- Physician Assistant Program: Students in the Physician Assistant Program must obtain their initial CPR certification through an outside provider. Outside certification must be American Heart Association (AHA) Basic Life Support for Providers (BLS). It is recommended that initial certification be completed after June 15th. Advanced Cardiovascular Life Support (ACLS) training will be provided by the program.

- Doctor of Pharmacy Program: Students in the Doctor of Pharmacy Program must obtain their initial CPR certification through an outside provider. Outside certification must be for Basic Life Support for Providers (BLS). BLS recertification training will be provided by the program before students begin APPEs.

- Pharmacy Technician Program: Students in the Pharmacy Technician Program will obtain their CPR certification through a required course.

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## STUDENT AFFAIRS INFORMATION

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Legal Responsibilities of the Student

It is the student's responsibility to be aware of and follow all state and federal laws relating to the practice of their academic program. If the student is unsure about the regulations regarding their practice site, they should confer with the preceptor. Students practicing outside the Commonwealth of Kentucky or Indiana are responsible for following the laws pertaining to the state in which they are practicing. Ignorance of the law is not an excuse for an illegal act. Students must always carry their licensure card during all clinical or experiential activities, if required by state and/or federal laws.

Professional Conduct and Protocols

Students in a COPHS program are expected to maintain a sense of decorum and professionalism in all their undertakings within the college community. To advance student professional behavior, the following protocols are enacted:

Protocol for E-Mail Communications:

Students are always expected to address Administrators, Faculty and Staff of the COPHS using their proper titles (e.g., Dean, Dr., Prof., etc.). In addition, it is imperative that the subject line is filled in with the reason for the email. Students must always use their Sullivan email account for this purpose. If a student uses their personal email account, the COPHS is not responsible for the loss or breach of confidential information. Students must utilize the Microsoft Outlook program or Outlook for Office 365 website (outlook.office365.com) for all COPHS email communications. Common courtesy dictates emails are ended with a proper closing such as 'thank you', 'regards', or other suitable statement. The sender should always close by signing their complete name, class year, and if an officer of a student organization, their title. Emails are not text messages and should therefore ALWAYS include proper titles, closings, and signatures.

*Students are REQUIRED to check their Sullivan email (...@my.sullivan.edu) every day*.

Principles and Actions of Professionalism

The concept of professionalism is at the core of the practice of providing patient care. It is an expectation of coworkers, classmates, patients, and family members that healthcare providers uphold a standard of excellence and act as an inspiration for others to follow. Students who do not abide by and adhere to the "Principles and Actions of Professionalism" may be referred to the Academic Progression and Professionalism Committee for review and recommendation.

Expectations of our students:

*Attend class* – Missing class is equivalent to missing a day of work. The "pay" you lose when you are absent is the opportunity to learn something of value to you in life and work.

*Be punctual* – Tardiness is a sign of not caring enough about your education to make attendance a top priority. Your tardiness is disrespectful to your classmates and instructors (Refer to course syllabi for specifics).

*Be prepared* – Since our shared objective is learning, do what it takes to learn. If you don't read the text, do the assignments, or participate in discussions, you put your grade and your progression in jeopardy.

***Dress appropriately*** – A career in health care requires you to be presentable to patients, clients, vendors, coworkers, and the public (Refer to Standards for Professional Appearance).

***Communicate effectively*** – Focus on succinctness and efficiency. Exercise control over thoughts and actions to minimize emotional decision-making. Understand expectations and welcome and incorporate productive feedback.

***Be respectful*** – Be attentive in classes, meetings, or other activities. Also remember to address all faculty/staff by their appropriate title and last name (e.g., Dr., Prof, Mr./Mrs.). Silence cell phones, electronic devices during class. Utilization of cell phones for personal use should be limited only to daily breaks or before and after class. Maintain a positive and helpful attitude when handling all situations. Avoid interrupting others while they are communicating.

***Apply knowledge and experience*** – Apply education and practice to daily encounters. Demonstrate an attitude of empathy and understanding for the perspectives of others.

***Manage conflict effectively*** – Respect the emotions and intentions of those involved. Uphold an internalized code of conduct based on the expectations of the setting.

***Be ethical and honest*** – Apply these principles in dealing with others and completing activities.

Honor Code

Doctor of Pharmacy Program:

Students in the Doctor of Pharmacy Program recognize they are always expected to exercise good judgement and conduct their affairs with integrity and honesty. They understand that pharmacists subscribe to a set of ethical and moral standards which acknowledges their primary duty is to the patient; that they have a responsibility to society, to other healthcare professionals and to themselves to maintain the highest standards of patient care and personal conduct. Further, they recognize the great trust that society places upon pharmacists as they provide for the health care needs of their patients. Given this duty and trust, the students of the Doctor of Pharmacy program affirm and undertake to live within the parameters accorded them by this Code of Conduct.

All members of the academic community are obligated to take action to stop academic or professional misconduct and/or prevent its recurrence. Suspected violations are reported to the OSA or through the Professionalism Concern Reporting Form (https://tinyurl.com/SUCOPHSProfessionalismConcern) which will manage this issue appropriately. If an allegation is deemed credible, the OSA may refer the matter to the Academic Progression and Professionalism Committee for review.

It is the duty of the Academic Progression and Professionalism Committee to review all credible allegations of academic and/or professional misconduct presented to it by the OSA. During its inquiry, the Committee may consider all relevant evidence and statements, written or oral, from the alleged violator(s) and the complainant(s). If the Committee determines that a violation has occurred, it will recommend to the OSA a suitable penalty for the violation(s). The OSA may sustain the recommendation, reduce the penalty, or dismiss the violation(s) entirely.
In the most egregious cases, suspension or expulsion from the Doctor of Pharmacy program could be imposed. If a violation is found to have taken place, a record of the proceedings shall be kept in the student's academic file.

Master of Science in Physician Assistant:

The physician assistant Honor Code is created by each individual cohort (Class of …) and can be found in the learning management system (e.g., Blackboard) in the PA Students Organization section.

All members of the academic community are obligated to take action to stop academic or professional misconduct and/or prevent its recurrence. Suspected violations are reported to the OSA or through the Professionalism Concern Reporting Form (https://tinyurl.com/SUCOPHSProfessionalismConcern) which will manage this issue appropriately. If an allegation is deemed credible, the OSA may refer the matter to the Academic Progression and Professionalism Committee for review.

It is the duty of the Academic Progression and Professionalism Committee to review all credible allegations of academic and/or professional misconduct presented to it by the OSA. During its inquiry, the Committee may consider all relevant evidence and statements, written or oral, from the alleged violator(s) and the complainant(s). If the Committee determines that a violation has occurred, it will recommend to the OSA a suitable penalty for the violation(s). The OSA may sustain the recommendation, reduce the penalty, or dismiss the violation(s) entirely.

In the most egregious cases, suspension, or expulsion from the Master of Science in Physician Assistant program could be imposed. If a violation is found to have taken place, a record of the proceedings shall be kept in the student's academic file.

Academic and Professional Misconduct

Violations of the Honor Code include, but are not limited to:

*Lying*: A student must not deliberately misrepresent the truth. Lying includes gross disregard for the truth or intentional misrepresentation within the academic setting. Students must expose those deficient in character or competence or who engage in fraud or deception.

*Cheating*: is defined, but is not limited to, the wrongful giving, taking or presenting of any information or material by a student with the intent of aiding the student or another in any academic work. There are instances that will require teamwork and cooperation in completing assignments. These instances will be clearly identified by the course director and will not be considered cheating. Cheating on examinations can take various forms. These include talking about an examination with someone who has not taken the examination; soliciting, giving or receiving unauthorized assistance during an examination or make-up exam; using materials not specifically authorized by the course director; violating any rules a course director has established for an examination.

*Plagiarism* (the act of plagiarizing): By Webster's definition, to plagiarize is to use one or more person's ideas or expressions in your writing without acknowledging the source. Plagiarism also includes the practice of employing or allowing another person to alter or revise the work that a student submits as their own. Students may discuss assignments among themselves or with an instructor or tutor, but when the work is done, it must be done by the student alone.

For additional information on plagiarism please see the following resources.
- https://libguides.sullivan.edu/plagiarism
- See Sullivan University Catalog – "Academic Integrity".

**Stealing**: A student must not intentionally take or acquire any property of another without permission. Stealing includes theft or conversion of property belonging to the College or another person and misappropriation or destruction of property needed by other students for a specified academic endeavor.

**Fraud**: By Webster's definition, fraud is an act of deceiving or misrepresenting. Fraud includes but is not limited to:

- Tampering with grades or any other part of a student's academic record
- Furnishing to a College official a document based on information that is known to be false or which has been tampered with
- Changing a grade in a faculty member's records, on an exam or on other work for which a grade has been given.

Other forms of academic or professional misconduct include but are not limited to:
- Unauthorized downloading, recording, photographing, or copying of lecture material or examinations or use of unauthorized equipment
- Buying, stealing, or otherwise obtaining all or part of an un-administered examination or the unauthorized usage of a previously administered examination
- Use of electronic information resources in violation of the "Accepted Use Policy for Computer Usage"
- Failure to comply with the requests of University or College officials in the performance of their duties
- Violations of the laws of the city, state, or nation, including countries outside the United States of America
- Conduct which would demean the ethics and/or integrity of your chosen profession or cause injury to the reputation of the University or COPHS
- Conduct which fails to observe common etiquette and courtesy whether to peers, college staff, or faculty
- Misuse of any media source that results in derogatory, negative, and/or inappropriate comments
- Misrepresenting and/or aiding another student to misrepresent one's physical presence (attendance) in the classroom or online in a virtual classroom setting with any classroom attendance procedure, electronic or otherwise (e.g., sharing of an electronic attendance code, personally signing for another individual who is not present, etc.)

Disciplinary Sanctions

The following sanctions comprise a range of official University actions which may be taken as the result of a policy violation or disciplinary issue. Academic Progression and Professionalism Committee may elect to recommend one or more of the penalties below for any offense.

**Warning and/or Reprimand**: Official notice to a student that their conduct or actions are in violation. The continuation of such conduct or actions may result in further disciplinary action.

**Disciplinary Agreement**: Behavior contract between the College/University and the student whereby the student agrees in writing to correct their inappropriate behavior. This may also take the form of a creative discipline.

***Restitution***: Reimbursement by payment or service to the College/University or a member of the College/University community in an amount not more than the damage or loss incurred. Reimbursement may be accompanied by other disciplinary action.

***Suspension***: Removal from the College/University for a period generally from one term to one year.

***Deferred Suspension***: Suspension from the College/University for a period, generally from one term to one year, but a term beyond the current term in which the incident has occurred.

***Probated Suspension***: Suspension from the College/University for a period but suspension being set aside due to mitigating circumstances.

***Expulsion***: Dismissal from the College/University for an indefinite period. Any student expelled may not, thereafter, be readmitted to the College/University except upon application to the Dean of COPHS. Unfavorable decisions regarding re-entry may be appealed to the C.E.O of the University.

***Wellness Advising***: Students may be required to meet with the COPHS Associate Dean of Student Affairs and/or the Student Counseling and Mental Health Center for personal wellness advising.

In extreme cases of student misconduct, the College/University reserves the right to suspend, expel or otherwise separate a student from the College/University without any type of internal due process.

Disciplinary Sanction Appeal Process

Students who feel that inequitable sanctions were issued as an institutional response to a policy violation or inappropriate behavior may utilize the Disciplinary Sanction Appeal Process. To avail oneself of the process, the student must submit their appeal in writing to the Dean of the COPHS stating all facts relating to the situation. The letter must be submitted by the student to the Dean of the COPHS within five (5) business days of the notification of a sanction. The decision regarding whether the appeal will be heard is made by the Dean of the COPHS and will be available normally within five (5) business days following submission of the appeal. If the student does not agree with the decision of the Dean, they may appeal through the University.

Grievance Procedure

Students are required to follow the grievance policies for the COPHS programs as stated in the Student Handbook. If the Dean should sustain the adverse decision, the student may submit a request for further review by a University Official by following the procedure at Step 2 of the University "Grievance/Official Complaint Procedure" in the University Catalog.

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## ABSENCE POLICY

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Census Policy

SU COPHS requires that students attend and engage in their courses. **Attendance is required at all classes, programmatic activities, and practice experiences**. Just as showing up for work is critically important to job security, professionalism, and work effectiveness; attendance and punctuality is critically important for mastering the career skills and concepts necessary to obtain, maintain, and be promoted as a healthcare professional. A student's lack of attendance and punctuality (professionalism) **may** result in disciplinary measures including, but not limited to, probation, suspension, or dismissal. Every effort should be made to attend and academically engage in every class, laboratory session, programmatic activity, and practice experience. If it becomes necessary for a student to drop a course, or to withdraw from their program of study entirely, an official withdrawal form must be completed in the COPHS's OAcA. All students who withdraw or are withdrawn from the COPHS are required to complete a Financial Aid Exit Interview with the Financial Planning Coordinator in the COPHS.

At the beginning of each term through a Census Poll, Academic Services will verify student engagement on Friday of the second week of each main campus term. Census is based on student engagement in defined academic engagement activities. One or more engagement activities in each scheduled course must occur by Thursday of the first week for a student to be made active in a course. **Faculty may impose course-level engagement policies that will be described in each course syllabus**. Course-level attendance policies imposed by faculty do not impact the University's Census Policy.

Quarterly charges and all federal, state, and institutional aid will be based upon the post-census poll enrollment status, and recalculations will occur as needed in the Financial Planning Department for federal, state, and institutional aid.

Note: Census events that fall on an observed holiday will take place the next business day.

If the University is delayed or closed due to inclement weather or other emergency, courses that do not meet will not be counted against the student. However, the University reserves the right to require a make-up of course time to ensure appropriate instructional time. Failure to attend a scheduled make-up session could be counted as an absence.

The following absences will be deemed to be approved by the OSA with appropriate documentation.

- Illness of the student or immediate family member (requires documentation from a healthcare provider).
- Death of a family member
- Military leave of absence
- Legal obligations (e.g., Jury duty, Mandated court attendance, etc.)
- Students are permitted to select any two (2) religious' holidays at the beginning of a quarter and notify, in writing, the OSA of anticipated absences for personal religious holidays. The student will need to notify the course coordinator(s) of the anticipated absences.
- Travel to attendance at professional meetings. Requests for travel to and attendance at professional meetings shall be submitted to the OSA via the "Absences" form as far in advance as possible but at least 10 days prior to the scheduled meeting. Students should not make travel arrangements until they have submitted a "Absences" form and approval has been granted. Granting of approval will occur through the OSA in conjunction with college/program administrators. **Travel to and attendance at professional meetings MUST be approved**.

*Please note: Students are highly encouraged to work with the ADSA, college/program administrators, as well as all affected course coordinators and faculty as far in advance as possible.*

*All supporting documentation for any "Absences" must be submitted by uploading the healthcare provider or other appropriate documentation as soon as possible to the OCEE database (e.g., CORE ELMS) on the day the student returns to classes.* Late documentation may not be considered when reviewing absences upon a student being dropped from a class. All absence documentation is subject to verification by the OSA in conjunction with college/program administrators. *Upon receiving confirmation of the approval of an absence request, the student must personally share this confirmation email directly with all course coordinators affected by the absence.* It is the sole responsibility of the student to share the confirmation of all absence requests with all course coordinators.

Missed attendance due to tardiness or early departure will not be approved. Tardiness is defined as greater than 10 minutes past the normal start time for class. Early departure is defined as leaving 10 minutes prior to the end of the class. Students with approved absences will be allowed to make up assessments missed in accordance with the course syllabi. **Faculty may impose course-level attendance, tardiness, and/or early departure policies that will be described in each course syllabus**.

Students who are parents should plan schedules and childcare arrangements well in advance of classes and practice experiences. Students' children are not permitted to be present in classrooms, laboratories, programmatic activities, or at practice experience sites.

Unapproved Absences

An unapproved absence is an absence that is not approved. Unapproved absences may also be for discretionary personal use of unforeseen scenarios that are not deemed "approvable" by the program. Examples of these include attendance at family functions or other unplanned personal responsibilities that may arise. It should be noted that an absence can also be considered unapproved due to student failure to follow the outlined procedures for obtaining an approved absence. The didactic year provides students with a conservative amount of time that can be used for these discretionary matters. The College highly recommends students avoid using this time unless absolutely necessary.

**Please note**: Vacations should be taken during scheduled breaks and not interfere with class activities, exams, remediation, etc. Vacation requests made during scheduled activities, including remediation, will be considered unapproved absences.

When a student is dropped from or withdraws from a course, this is reflected in the student's satisfactory academic progress (SAP). If the student does not become and remain active in all courses for which they are registered, the student's enrollment status will be adjusted which may have an impact on the amount of financial assistance for which the student is eligible. Last dates of attendance in courses determined by this attendance policy will be used in calculating when and to what extent funds must be returned to financial aid funding sources. See the Financial Planning Office for more information or refer to the "Financial Information" section of the Sullivan University Catalog for policy details.

Protocol for Absences from a Class, Programmatic Activity, or Laboratory

In the event that a student is unable to attend a class, programmatic activity, or laboratory, they are required to immediately notify the OSA as well as their instructor(s) and/or the course coordinator(s) of the class(es) that will be missed. Please remember that all absences require healthcare provider or other appropriate documentation and approval of the appropriate college administration. (**See COPHS "Census Policy"**).

Notification Process

- Email sucoposa@sullivan.edu, and/or call 502-413-8640; if necessary, the student may leave a voicemail.
- Complete the online SU COPHS "Absences" form found in the OCEE database (e.g., CORE ELMS)
- Email and/or call instructor(s) and/or the course coordinator(s) of the class(es) that will be missed. **Please see COPHS "Census Policy"**
- Upon receiving confirmation of the approval of an absence request, the student must personally share this confirmation email directly with all course coordinators affected by the absence. It is the sole responsibility of the student to ensure the confirmation of all absence requests with all course coordinators.

Absence Policy for Clinical and Experiential Education

Background

Practice experiences (IPPE, APPE, and SCPE) are a critical part of the curriculum at SU COPHS. They provide students with the opportunity to apply what they have learned in the classroom to real-world settings. This hands-on experience is essential for becoming a practicing physician assistant or pharmacist.

Students are expected to attend all practice experiences. Absences should be avoided, as they can impact the student's ability to learn and meet the objectives of the experience. If an absence is unavoidable, students must submit a request for approval through the appropriate channels.

Absence Policy

- Students are allowed the following absences:
    - A total of 10 absences during their practice experiences. This includes personal illness and emergencies.
    - No more than 2 days of absences during any one IPPE course.
    - No more than 2 days of absences during any one SCPE course.
    - No more than 3 days of absences during any one APPE course.
- Exceptions to these requirements may be granted by the Office of Clinical and Experiential Education (OCEE).
- Exceeding the maximum number of days per experience or total days may result in the following:
    - Delayed graduation due to making up an experience.
    - Withdrawal from the practice experience
    - Failure of the practice experience

- Students who miss any practice experience time are still expected to maintain the responsibilities of the practice experience, complete all objectives/assignments, and make up any missed time, if applicable.

## EOR Session Attendance

Attendance is required of all P3/PA2 students at EOR sessions. EOR sessions may include EOR exams, evaluations, case presentations, class and/or advisor meetings, practical examinations, and lectures.

Students with an unapproved absence from any portion of the EOR sessions will be subject to specific program consequences.

- PA students: Ten (10) percentage points will be deducted from their final grade for that SCPE. If this results in a grade below 74.5%, the student will be considered to have failed the SCPE and will be required to repeat the entire SCPE.
- PharmD students: Ten (10) percentage points will be deducted from their final grade for that APPE. If this results in a grade below 69.5%, the student will be considered to have failed the APPE and will be required to repeat the entire APPE.

## Additional Requirements

Students with an absence, approved or unapproved, during any EOR session may also be required to do an extra presentation and/or paper depending on the number of EOR/Block 8 activities/days missed.

## Note for PA Students

For PA students, if an unapproved absence occurs on a required day prior to the next SCPE (typically the Monday and Tuesday before the next SCPE starts), the percentage is taken off the next SCPE.

## Practice Experience Attendance

Attendance is mandatory for all practice experiences. Students are expected to be present for the entire scheduled time, including any clinic, conferences, rounds, or other learning events.
- If PA students have already met the minimum hours/patients for the week and are absent a day when the site is open and preceptor is working, they will still need to notify the PA Program's OCEE contacts and submit an Absence request form.
- PharmD students are to adhere to the schedule that is agreed upon by both the student and preceptor, aiming for a minimum 40-hour week and minimum 240-hour total for the experience.

PA students are required to follow the full-time working schedule of the preceptor. If the preceptor or site cannot provide full-time hours, it is the student's responsibility to notify the Course Coordinator as soon as possible. Students that are expected to work more than 60 hours in one week should notify the PA Program's OCEE contacts as soon as possible to discuss with preceptor and student proposed workload expectations.

Absences

Students must immediately notify the preceptor, OCEE, and Course Coordinator(s), if applicable, regarding time missed for any reason. Absences of a half-day or half-shift (or longer) require completion of the Absence request form and submission of appropriate documentation which will be reviewed by the ADSA and the respective program OCEE administrators to determine if approved. Preceptor approval alone does not constitute an approved absence, as program administrators will determine this decision in consultation with all stakeholders.

The Absence request form is to be submitted to the program within 24 hours of an unplanned absence. In the case of a planned absence (medical appointment etc.), the form should be submitted at least 72 hours prior to the anticipated absence and further out if this request is for professional conference attendance. The student must notify the preceptor of any absence, although the respective program OCEE personnel (not the preceptor) grants approval for absences. Once reviewed by respective program, OSA, and preceptor, students will receive an electronic (email) notification on whether the absence is approved or not. In all cases, it is ultimately the student's responsibility to follow up with the program to ensure the form has been received and status of approval.

*In all cases of an absence, attempts should be made to make up hours, assignments, and activities missed.*

Process for Emergent Absence

Under specified circumstances, an approved absence will be granted. The COPHS has determined specific situations to be deemed approvable. For a complete list of approvable absences see COPHS "Census Policy".

In these instances, the student must follow the process outlined below to qualify as an approved absence. Failure to meet these criteria will result in an unapproved absence.

- Student must email the program's OCEE administration and Course Coordinator(s) (if different than OCEE administration). Notifications must occur as soon as possible, unless extenuating circumstances exist which prevent the student from making such notifications.
- An Absences form must be completed by the student and submitted as soon as possible and within 24 hours of the student's return to the practice experience site.
- An absence on the day of a scheduled event such as an exam or presentation will require a note from a healthcare provider or other appropriate documentation.
- Family-related emergencies and absences for illness, that are supported by appropriate medical/dental provider documentation (when appropriate), or deemed approvable by program administrators, are also approvable.

Process for Absences

Approved absences are considered for reasons other than emergent situations in certain circumstances, including attendance at professional meetings, healthcare provider appointments, legal appearances, and military leave. These requests will be considered on a case-by-case basis. The student must follow the procedure outlined below for all absences. Failure to follow these procedures will result in an unapproved absence.

Student must complete and submit the Absence request form as early as possible prior to the requested absence date. Requests will be reviewed and either approved or denied by the ADSA

through consultation with the OCEE Program Administrators (including course coordinators), PA Clinical Education Director and/or PA program director when necessary.

Once approved by the above-mentioned parties, the absence is considered approved, and students should work with all course coordinators affected by this absence to make up missed coursework according to and consistent with course syllabi. If the request is denied, the student is expected to attend all classes, clinical experiences, and program activities as scheduled.

Note: Healthcare provider appointments require a note verifying the student was a patient.

Requested absences require pre-approval from the ADSA and program. A list of absences that are deemed approvable with appropriate documentation are listed in other sections of this handbook. Examples include the following.

- Military leave of absence
- Legal obligations (e.g., Jury duty, Mandated court attendance, etc.)
- Healthcare provider appointments
- Travel to and attendance at professional meetings

Unapproved absences and/or insufficient hours will result in failure of the practice experience. This may delay graduation, as the practice experience will need to be repeated, if progression is permitted.

Personal excursions (e.g., vacations, weddings, honeymoons, etc.) must not occur during any time other than the one-week break between quarters (Monday through Friday of scheduled break week). These activities must be avoided during the practice experience year as well as during scheduled APPE/IPPE/SCPE time including but not limited to any scheduled OCEE events/requirements.

Students will not be excused from a site for student employment. Working during the clinical year is strongly discouraged. **Students are NOT PERMITTED to leave practice experience sites for outside employment**. Leaving a site early, not performing clinical duties due to outside employment, or asking the preceptor for permission to leave due to outside employment is considered unprofessional conduct. This is also considered an unapproved absence.

Unapproved Absences:

An unapproved absence is an absence not approved and has a status of "unapproved". Cause for absence can be illness or other valid reasons but are deemed "unapproved" due to student failure to follow the outlined procedures. An unapproved absence will be recorded if a site visit is made, and a student is not at the site as scheduled. This may result in failure of the APPE/IPPE/SCPE and will be reported to the Academic Progression and Professionalism Committee.

Holidays and Inclement Weather:

The final practice experience year (P3 and PA2) does not follow the same holiday and closure schedules as the earlier years. During this practice experience, students may be asked to work holiday, weekend, or a shift other than normal business hours. Students are expected to comply with shifts that their site and primary preceptor work. Closures, due to holidays or inclement weather, are site-dictated. Students are to discuss any assigned schedule concerns with respective OCEE program personnel prior to the start of practice experience.

If the practice experience site is delayed or closed due to inclement weather or other emergency, the minimum hour per week requirement will not be held against students. However, the program reserves the right to require a makeup of site time to ensure appropriate instructional time and objectives and competencies are being met. Additionally, students are expected to make up as many hours as possible during the course of the practice experience to gain all required hours.

Students are expected to be on time for assigned events, including but not limited to clinic, conferences, rounds, and other learning events throughout the course of the experience. Preceptors are asked to notify the OCEE with concerns regarding tardiness or absences.

Tardiness is defined as greater than 10 minutes past the normal start time for the site. More than 3 episodes of tardiness is considered excessive and may result in lowering of the final evaluation grade or failure of the APPE/IPPE/SCPE.

Early departure is defined as leaving 10 minutes prior to the end of the day as designated by the preceptor. More than 3 episodes of early departure is considered excessive and may result in lowering of the final evaluation grade or failure of the APPE/IPPE/SCPE.

Pharmacy Technician Program

See Sullivan University Catalog – "Census Policy".

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## PROFESSIONAL DEVELOPMENT

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Standards for Professional Appearance

Students in the COPHS programs are always expected to present a professional appearance and demeanor. Although these standards and expectations may not satisfy every individual's desire for personal dress freedom, the COPHS believes appropriate dress is important to present an overall professional image and is a constructive part of one's professional development.

Students MUST always utilize their identification (ID) badges to gain access to the COPHS building and wear their ID badges while in the COPHS building on campus as well as at their practice sites.

In consideration of others, especially patients with allergies, students are to avoid the use of strong-smelling perfumes, colognes, or aftershave lotions. Students may not demonstrate or maintain body piercing of any type on any part of the human body apart from wearing earrings for pierced ears. In addition, students who choose to have tattoos must always keep them covered and not visible.

Each Doctor of Pharmacy and Master of Science in Physician Assistant student will receive a short white coat. Students will be required to wear their white coat in the laboratory and at practice sites. Coats must always be clean and neat with all appropriate name badges, pins, and COPHS program patches appropriately displayed.

Caps, hats, or hoods (unless customary and recognized religious headdress) are NEVER permitted to be worn in classrooms, laboratories or at practice sites. Closed toed shoes are required for laboratories and at practice experience sites.

Dress Guidelines

Given the professional nature of COPHS programs, business casual is the recommended dress. At minimum students are expected, when attending normal classroom activities to dress in a manner that is not distracting or distasteful for a classroom environment. A few simple guidelines are to be followed:

- Clothes must be clean and appropriate for the classroom.
- Pants must not be allowed to sag and/or expose one's undergarments.
- Tops must minimize chest/stomach exposure.
- If applicable, students are required to wear appropriate safety equipment as required by the instructor and/or classroom/laboratory safety rules.

Students who are not appropriately dressed will not be permitted to attend class and/or program activity. Any class or program activity missed due to dress code issues will be deemed an unapproved absence.

The COPHS or individual program reserves the right to require professional dress attire as is deemed necessary to fulfill the objectives of a particular class, program activity, or announced event.

Dress code violations should be reported immediately to the ADSA, or another COPHS administrator (assistant/associate dean, department chair, program director, etc.). Individuals found to be in violation of the dress code may be referred to the Academic Progression and Professionalism Committee for possible disciplinary action.

Students are to follow the "Standards for Professional Appearance" as well as the dress guidelines of the practice site unless given specific instructions for different dress (e.g., medical scrubs). Student ID badges and short lab coats must always be worn unless otherwise directed by the preceptor. Students are reminded that specific requirements for the practice site may be required by preceptors and students are to follow such guidelines. Nonadherence may result in dismissal from the site and failure of the practice experience.

Involvement

Student Professional Organizations and Activities:

The Administration and Faculty of the COPHS encourage student participation in professional organizations within the COPHS as a means of furthering student professional development and initiating contacts that will be beneficial as the student enters professional practice. In addition, student professional organizations serve as means to network and earn professional development hours while building future professional relationships. Currently, SU COPHS has student chapters of the following organizations.

- Student Academy of American Academy of Physician Assistants (SAAAPA)
- Academy of Managed Care Pharmacy (AMCP)
- American Pharmacists Association-Academy of Student Pharmacists (APhA-ASP) / The Kentucky Pharmacists Association (KPhA)
- American Society of Health System Pharmacists (ASHP) / Student Society of Health System Pharmacists (SSHP)
- Christian Pharmacists Fellowship International (CPFI)
- National Community Pharmacist Association (NCPA)
- Kappa Psi Pharmaceutical Fraternity, Epsilon Theta Chapter
- Lambda Kappa Sigma Pharmacy Fraternity for Women, Alpha Omega Chapter
- Phi Lambda Sigma Pharmacy Leadership Society, Delta Xi Chapter
- The Rho Chi Pharmaceutical Honor Society, Delta Kappa Chapter

PA students are reminded that officers of student organizations must maintain a minimum cumulative grade point average of 3.0. PharmD students are reminded that officers of student organizations must maintain a minimum cumulative grade point average of 2.50. If a PharmD student holds 2 or more offices in student organizations, they must maintain a minimum cumulative grade point average of 2.80. All students must not have any professionalism issues.

If a student officer is unable to maintain the academic goals specified above, they will meet with the chapter advisor and/or the OSA to determine the appropriate plan of action which may include suspension from the office for a period of time, reduced duties, complete removal, etc.

The advertising and/or selling of any items or services by COPHS professional organizations or students must be approved through the Office of Student Affairs and/or the Office of the Dean. The use of any Sullivan University, College of Pharmacy and Health Sciences, and/or program wording, logos, letterhead, or other likeness is strictly prohibited without prior approval of the OSA and/or the Office of the Dean. Any violation of this policy will be submitted as a professionalism concern.

Class Representatives/Officers

Each class for each graduate program will have a set of class representatives/officers that will plan/oversee activities and help to resolve issues within the class. The class

representatives/officers will also oversee the student Committee Representatives. If students are having an issue, they would like their class representatives/officers to address, they may speak to them directly or with the ADSA.

Student Committee Representatives

At SU COPHS we want our students to have a voice on the college's standing committees. As outlined in the College bylaws, specific programs of study and classes/cohorts will have a representative and an alternate on the following committees:

- Admissions Committee
- Curriculum Committee
- Planning and Assessment Committee
- Student Professional Development Committee
- Scholarship and Awards Committee

The OSA in conjunction with the class representatives/officers will conduct the solicitation for all those wishing to be a committee representative. The class representatives/officers in conjunction with the ADSA, will assist in the election or Dean's appointment to each of the committees outlined above according to the College bylaws. For more information on the responsibilities of Student Committee Representatives, please see the OSA.

Student Professional Honors and Awards

SU COPHS has several opportunities for students to earn honors and awards. Available honors and awards will be housed on the COPHS's website, and the Scholarship and Awards Committee will update the student body annually on current opportunities.

Professional Development Plan – Doctor of Pharmacy

The Professional Development Plan (PDP) is a multifaceted approach to help students develop their professional skills utilizing activities outside the classroom. These activities include advising sessions, the professionalism series, and professional development ("co-curriculum" – ACPE terminology) activities which include, but is not limited to, the speaker series and professional development hours. These activities are not a part of the curriculum but are purposeful and are requirements to complete the Doctor of Pharmacy program. Failure to meet these expectations may result in delayed graduation.

The full description and expectations of the PDP can be found on the SU COPHS learning management system (e.g., Blackboard). Any questions about the PDP should be directed to the OSA.

Academic and Professional Advising

Doctor of Pharmacy Program:

A schedule of Doctor of Pharmacy classes is published each quarter by the OAcA. Courses in the Doctor of Pharmacy program are taken in block fashion, that is, all students in a professional year will take the same classes at the same designated time each quarter. The exception to this is selective and elective courses taken in the second professional year or students who are on a modified schedule.

Each student is assigned a Faculty Advisor who will remain the student's advisor throughout the student's tenure in the PharmD program. Requests for reassignment of a student to another Faculty Advisor will be reviewed by the OSA. Students will meet with their advisor at least quarterly in accordance with the PDP.

If a student's academic and/or professional performance is less than satisfactory, the Faculty Advisor is to refer the matter to the OSA for follow-up. If an advisee's performance on an assessment is less than satisfactory, the OAcA will notify the Faculty Advisor. As one means to provide early intervention Faculty Advisors will notify students to come meet with them to ensure the provision of appropriate college and/or university resources. In cases of multiple assessment failures, the OAcA will notify the OSA for additional follow-up with the student.

Master of Science in Physician Assistant Program:

Each student will be assigned a Faculty Advisor who is a member of the principal faculty. Students will meet with their advisor at least once per quarter, either in a group or individually. Advising forms are filled out during these meetings. Advising sessions may occur in person or electronically. Advisees will be responsible for letting the advisor know if they will need electronic accommodations. Advisors are responsible for scheduling meetings with their advisees.

Clinical year advisees that are not in the area are expected to participate in group/individual advising sessions via remote teleconference. Requests for reassignment of a student to another Faculty Advisor will be reviewed by the Program Director. Advisors should inform the OSA if they feel there is a student issue that requires additional counseling or guidance.

Pharmacy Technician Program:

A schedule of classes is published each quarter by the Director of the Pharmacy Technician Program. Courses in the Pharmacy Technician program may include a mixture of general education classes and pharmacy technician classes. They are taken in sequence and culminate in a certificate or diploma program (depending upon which the student has enrolled) upon successful completion of the pharmacy technician curriculum.

Each student is assigned a Faculty Advisor who will remain the student's advisor throughout the curriculum. The Faculty Advisor meets with the student regularly to monitor the student's academic progress and recommend courses for the upcoming quarter. If a student's academic and/or professional performance is less than satisfactory, the Faculty Advisor will defer to the Director of the Pharmacy Technician Program.

Assessment Proctoring Policy

Students may not communicate in any way (verbal, nonverbal, electronic, written, etc.) with anyone apart from the proctor(s) within or outside the assessment room(s) during the assessment. Students MUST promptly leave the room as well as the immediate area outside of the assessment room once they have completed their assessment.

No assessment content related questions will be permitted during an assessment. If the student has a question, they may leave a comment in the "question feedback" section if enabled on their ExamSoft assessment, write the question on provided paper, or contact the course coordinator after the assessment to discuss the question. No questions will be answered during the assessment regarding the content of the assessment.

Proctors may address technology concerns, environment concerns (e.g., noise), scrap paper. Proctors may permit restroom breaks, one student at a time. The student may not take anything into the restroom with them including but not limited to coats, book bags, purses, etc.

Only the items clearly designated by the proctor(s) (e.g., computer, device electrical cord, pencil, program approved calculator, charts, whiteboards, dry erase marker, and scrap paper) are permitted at the student's seat. Books, notebooks, papers, handouts, and class-related materials, as well as personal items such as coats, purses, and book bags are only permitted to be placed in the FRONT or other specifically designated area of the assessment room to ensure the ability for emergency exit.

Students that arrive after the assessment has been started may only be permitted to sit for the exam if no other student has completed the exam. If the student is permitted to sit for the exam they MUST sit in the front row or at the end of a row, if available, in the assessment room. Any tardy student(s) will forfeit the amount of time missed due to their tardiness. For students with ADA accommodations, the student will complete the exam within the original scheduled time frame offered for that student.

Cellular phones, watches, activity trackers, pagers, recording devices of any kind, and any other 2-way communication devices are NOT permitted to be in the immediate possession of a student in the assessment room.

Students MUST provide the proctor(s) with verification of completion and/or closure of the assessment prior to exiting the assessment room.

Students should inform outside parties (e.g., spouses, children, etc.) before the assessment that if there is an emergency during the assessment to contact the Office of the Dean via telephone at 502-413-8640.

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## ACADEMIC POLICIES

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Annual Compliance Courses

In preparation for practice experiences and as part of the SU COPHS curricula, students are assigned annual compliance course work, by the OCEE, to be completed based on their program of study (e.g., HIPPA, Bloodborne Pathogens, etc. Students will be given a deadline by which all assigned compliance course work must be completed. Upon completion of a course, the student will be permitted to generate a certificate of completion for that course. All related course certificates are to be updated in the appropriate electronic database annually. Please review the appendix for a guide on uploading documents. Failure to complete course work by the deadline will result in a delay in progression, which may affect the student's graduation date.

Based on your program of study, the following courses must be completed prior to participating on practice experiences. These courses have been specifically assigned and ONLY these courses will count toward completion requirements.

- HIPAA Privacy Essentials
- Bloodborne Pathogen Awareness
- TB: Prevention and Control
- Hazard Communications: An Employee's Right to Know
- Personal Protective Equipment: Body Protection
- Portable Fire Extinguisher Training
- Sexual Harassment Prevention for Employees
- Emergency and Disaster Preparedness
- Communicating with Professionalism and Etiquette
- Professionalism, Business Etiquette and Accountability

College of Pharmacy and Health Sciences Satisfactory Academic Progress Policy

Satisfactory Academic Progress Policy for PharmD and PA Programs

The COPHS programs covered in this policy are the Doctor of Pharmacy (PharmD) program and Master of Science in Physician Assistant (PA) program. Students covered in this policy must meet the following minimum standards of academic achievement in terms of cumulative GPA and successful course completion in terms of credits earned versus credits attempted within a maximum time frame while enrolled. Failure to meet the requirements of this Satisfactory Academic Progress Policy (SAP) may result in punitive actions up to and including the possible loss of federal Title-IV HEA and/or state financial aid and suspension or termination from the COPHS. This policy applies to all students whether they participate in Title IV HEA or Kentucky state financial aid programs. It is important for students to read and understand the COPHS's SAP standards.

Grade Application Chart

| Grade | Definition | Included in Credits Earned | Included in Credits Attempted | Included in Cumulative GPA Calculation |
|-------|-----------|-----------|-----------|-----------|
| A | Excellent | YES | YES | YES |
| AU | Audit | NO | NO | NO |
| B | Above Average | YES | YES | YES |
| C | Average | YES | YES | YES |
| F | Failing | NO | YES | YES |
| I | Incomplete | NO | YES | YES |
| NF | Failing – Lack of Engagement | NO | YES | YES |
| S | Satisfactory | YES | YES | NO |
| T | Transfer | YES | YES | NO |
| U | Unsatisfactory | NO | YES | NO |
| W | Withdrawal up through week #7 | NO | YES | NO |
| WF | Withdrawal after week #7 | NO | YES | YES |

The following criteria are utilized when evaluating student satisfactory academic progress:

- Credits will be applied to the COPHS's Satisfactory Academic Progress Policy as defined in the Grade Application Chart shown in this policy.
- Attempted credits as defined in this policy will be counted in SAP calculations, whether financial aid was received, or the credits earned.
- Incompletes (I), instructor drops (NF), and failures (F, WF, NF) are considered as credits attempted and not earned; but are included in cumulative GPA calculations with zero quality points.
- W grades are considered as credits attempted and not earned; but are not included in cumulative GPA calculations.
- Grade changes to previously unsatisfactory grades may be considered in satisfying completion rate and CGPA deficiencies.
- Credits earned with a passing grade in courses attempted on a Pass(S)/Fail(U) basis are considered as both attempted and earned credits; those failed are considered as attempted credits only. Pass(S)/Fail(U) grades are not included in cumulative GPA (CGPA) calculations.
- Transfer (T) credits, including credit received from consortium study, are considered as both attempted and earned credits, but are not included in cumulative GPA calculations.
- Courses repeated to raise the CGPA are considered as credits attempted when taken and as credits earned when a satisfactory grade is earned. However, only the most recent grade is used in calculating the cumulative GPA. Courses may only be repeated with approval of the SU COPHS.
- Courses audited (AU) for no grade are not included in cumulative GPA calculations and are not considered as attempted or earned credits.

- Upon the change of a student's major, only those credits previously taken that apply to the new program will be calculated into both the cumulative GPA (qualitative review) and completion rate (quantitative review).
- Satisfactory academic progress (both qualitatively and quantitatively) will be reviewed upon the conclusion of each academic quarter for all students.

Qualitative Standards (Cumulative Grade Point Average)

Qualitative satisfactory academic progress is defined as maintaining a minimum acceptable cumulative grade point average (CGPA) on a 4.0 scale. Students must meet or exceed the following minimum CGPA to be considered as making qualitative satisfactory academic progress:

SAP evaluation and processes for COPHS students are the same as for all University students with the exceptions of the following:

Doctor of Pharmacy program

- Minimum GPA of 2.0 at the end of each quarter
- Minimum cumulative GPA of 2.0 is required at each quarterly evaluation point
- Minimum CGPA of 2.0 is required for graduation
-
Master of Science in Physician Assistant program

- Minimum cumulative GPA of 3.0 is required at each quarterly evaluation point
- Minimum cumulative GPA of 3.0 is required for graduation

A student will be considered as not making satisfactory academic progress if at any evaluation point the student's cumulative grade point average is less than the prescribed minimums listed above. Students must also meet the academic requirements as noted in the COPHS Student Handbook.

Quantitative Standards (Completion/Pace Rate)

The quantitative measure is defined as the total number of credit hours successfully earned (passed) divided by the total number of credit hours attempted. The quantitative satisfactory academic progress measure requires a student to complete their program of study within one and one-half times (150%) the academic program assigned credit hours. Students must meet or exceed the following minimum quantitative progress measures to be considered as making satisfactory academic progress:

Upon completion of 1 to 23 credit hours attempted:          25.00% cumulative completion rate
Upon completion of 24 to 35 credit hours attempted:         50.00% cumulative completion rate
Upon completion of 36 or more credit hours attempted:       66.67% cumulative completion rate

A student will be considered as not making satisfactory academic progress if at any evaluation point the student's overall quantitative completion rate is less than the prescribed minimums listed above.

Maximum Time Frame: (e.g., Doctor of Pharmacy program)

No student will be eligible to receive Title IV HEA or Kentucky state financial aid after attempting more than 150% of the normal credits required for their program of study. For example, students in the Class of 2021 Doctor of Pharmacy program are required to have 176 credits and may attempt a maximum of 264 (176 x 150%) credit hours. Once an SAP review determines that a student cannot mathematically finish the student's program of study within the maximum time frame the student becomes ineligible for Title IV HEA and Kentucky state financial aid. Students MUST complete the Doctor of Pharmacy in a maximum of 5 years.

Student Status Definitions

*Active*: The student is in good standing with the University with no punitive action status.

*Financial Aid Warning*: A previous "Active" status student who is receiving Title IV HEA and/or Kentucky state financial aid and is not now achieving SAP standards will be placed on "Financial Aid Warning". The student may continue to attend classes and receive Title IV HEA and/or Kentucky state financial aid for one additional quarter of attendance while on Financial Aid Warning status. In addition, a "Financial Aid Warning" status is notice to the student that continued failure to achieve SAP standards will result in further punitive action by the University and the loss of the availability of Title IV HEA and/or Kentucky state financial aid.

*Academic Warning*: A previous "Active" status student who is not receiving Title IV HEA and/or Kentucky state financial aid and is not now achieving SAP standards will be placed on "Academic Warning" status. The student may continue to attend classes while on "Academic Warning" status for one additional quarter. In addition, an "Academic Warning" status is a notice to the student that continued failure to achieve SAP standards will result in further punitive action by the University.

*Financial Aid Probation by Appeal*: A previous "Suspension" status student who has successfully appealed for reentry due to extenuating or special circumstances as outlined in the appeal processes stated below may be placed on Financial Aid Probation by Appeal status. The Financial Aid Probation by Appeal student may be eligible for Title IV HEA and/or Kentucky state financial aid due to extenuating and/or special circumstances. The Financial Aid Probation by Appeal status allows the student to continue classes with a goal of achieving SAP standards by the end of the Financial Aid Probation quarter or by a specified period established in an Academic Recovery Plan.

*Academic Probation by Appeal*: A previous "Suspension" status student who has successfully appealed for reentry may be placed on Academic Probation by Appeal status. The Academic Probation by Appeal student does not receive Title IV HEA and/or Kentucky state financial aid. The Academic Probation by Appeal status allows the student to continue to attend classes with a goal of achieving SAP standards by the end of the Academic Probation quarter or by a specified period established in an Academic Recovery Plan.

*Suspension*: A previous "Warning" or "Probation" status student will be suspended if the student fails to meet SAP standards and/or fulfill the terms of the Academic Recovery Plan (ARP) at the end of the warning or probation term. A suspended student may not continue in school nor receive Title IV HEA and/or Kentucky state financial aid unless reinstated through the SAP appeal process. The student is not eligible for Title IV HEA and/or Kentucky state financial aid while suspended.

*Terminated*: The student has been permanently withdrawn from the University. The student is not eligible for Title IV HEA and/or Kentucky state financial aid.

Failure to Meet Satisfactory Academic Progress (SAP) Standards

A previous "Active" student for whom it has been determined is currently not meeting the minimum SAP standards will be placed on "Financial Aid Warning" or "Academic Warning" status for one additional quarter of attendance.

Financial Aid Warning status allows a student who currently utilizes Title IV HEA or Kentucky state financial aid to continue to attend class(es) for one additional quarter and utilize these funds while attempting to achieve SAP standards. A Financial Aid Warning status also places a student on notice that they will be suspended from the University and lose Title IV HEA and Kentucky state financial aid eligibility if all academic progress standards are not met by the end of the Financial Aid Warning quarter.

Academic Warning status allows a student to continue to attend class(es) for one additional quarter while attempting to achieve SAP standards. A student on Academic Warning status does not receive Title IV HEA or Kentucky state financial aid. An Academic Warning status also places a student on notice that they will be suspended from the University if all academic progress standards are not met by the end of the Academic Warning quarter.

If at any evaluation point a Financial Aid Warning or Academic Warning status student fails to satisfy all SAP requirements, they will be suspended from the University and the student status will become "Suspension". Re-admittance to the school and re-establishment of financial aid eligibility is only possible through the Satisfactory Academic Progress Appeal process.

Upon any evaluation that affects a student's eligibility for Title IV HEA and/or State financial aid funds, a notification letter will be mailed via the United States Postal Service to the student at the address on file with the University. The letter will be sent, depending on the student's campus location/division of enrollment, by the Coordinator of Academic Progress (Louisville), the Associate Dean of Academic Affairs (Lexington), the Director of Education (Ft. Knox), the e-Learning Registrar (e-Learning), Assistant Dean of Academic Affairs and Assessment of the COPHS, or other designated school official.

A student who believes they have encountered a special circumstance(s) that has impeded their satisfactory academic progress resulting in a punitive action by the University and/or loss of Title IV HEA or Kentucky state financial aid may utilize the appeal process as outlined in this policy.

Satisfactory Academic Progress Appeal Policy

A student who believes they have encountered an extenuating and/or special circumstance(s) which has impeded their academic progress may submit a written appeal to the appropriate campus academic services office. The appeal process provides a student who has not met the University's satisfactory academic progress standards the opportunity to formally request to remain enrolled and/or reenroll at the University to rectify any SAP deficiencies and/or to re-establish eligibility for Title IV HEA and/or Kentucky state financial aid. More information is available at http://sullivan.edu/appeals.

The student wishing to appeal their SAP status and/or request re-entry to the University must complete the Satisfactory Academic Progress form and attach any supporting documentation explaining the special circumstance(s) beyond the student's control resulting in their unsatisfactory academic performance. Furthermore, the form requires an indication of what has changed in their situation that will allow the student to succeed and achieve SAP standards.

The COPHS OAcA, in consultation with other programmatic committees, will review the appeal to determine if the student can reasonably be expected to achieve all measures of SAP and any other requirements for continued enrollment and/or reentry at the COPHS. If the student is granted a successful appeal by the Academic Progression and Professionalism Committee, the student's appeal will be forwarded to the Financial Aid Appeal Committee for its review and consideration.

The Financial Aid Appeal Committee will determine if the student's financial aid is to be reinstated based on federal and state financial aid guidelines, the student's special and/or extenuating circumstance(s) as stated in the appeal, and any supporting documentation that may have been provided.

Each appeal committee has the independent discretion to accept or decline the student's appeal. The approval of reentry by the Academic Progression and Professionalism Committee does not automatically guarantee the student's approval for re-establishment of financial aid by the Financial Aid Appeal Committee. Students wishing to appeal both their SAP status and financial aid eligibility must submit information and documentation to satisfy both committees' requirements. While the appeal process serves multiple purposes, if it is determined that a student cannot mathematically achieve SAP within the policy limitations the appeal will be denied.

The student has the burden of validating the reasons why they could not meet SAP requirements and justifying the reason(s) the committee(s) should grant the appeal.

The student may submit an appeal for academic and/or financial aid eligibility based on one or more of the following special and/or extenuating circumstances:

- Work related;
- Medical condition;
- Fire/Flood;
- Military;
- Other special extenuating circumstance(s) warranting consideration.

To appeal an SAP-related suspension or other punitive action the student must submit a clear and concise appeal form with the following elements.

1. Student's name and student signature;
2. Reason for the loss of financial aid eligibility;
3. Special Circumstances that contributed to poor performance that led to the loss of financial aid eligibility;
4. A request to reinstate financial aid eligibility, if applicable;
5. Reasons for not meeting satisfactory academic progress for applicable terms;
6. How the student's circumstances have changed;
7. Plan of action to meet satisfactory academic progress moving forward;
8. Educational goals;
9. Supporting documentation.

Any supporting documentation to substantiate these special circumstances; examples of such documentation may include, but not necessarily limited to:

| Extenuating Circumstance | Event | Documentation |
|---|---|---|
| Work Related | • Layoff / Job loss<br>• Required overtime / excessive work hours | • Timecards<br>• Letter from employer or termination paperwork<br>• Timecard statements/paycheck subs |
| Medical Condition | • Personal injury or illness<br>• Hospitalization, surgery, or other medical procedure<br>• Mental health issues<br>• Dental emergency<br>• Serious illness of a child or loved one | • Medical records<br>• Medical record appointments<br>• Letter from doctor, therapist, or counselor.<br>• Dental records containing emergency visit<br>• Medical records for loved one or child |
| Fire / Flood | • Loss of home or significant loss of property | • Insurance records showing loss<br>• Police reports detailing fire |
| Other Circumstances | • Death of a relative or close loved one<br>• Domestic violence<br>• Home eviction | • Obituary (dates should be included)<br>• Letter from counselor detailing event/s<br>• Police report<br>• Court documentation<br>• Eviction notice |
| Military | • Involuntary military orders | • Military orders with dates |

If the Financial Aid Appeal Committee approves the student's appeal, the student may be approved for the re-establishment of Title IV HEA and Kentucky state financial aid and will be placed on Financial Aid Probation by Appeal status while attempting to achieve SAP policy requirements and will be expected to meet the requirements of an Academic Recovery Plan. Upon the conclusion of the quarter of Financial Aid Probation by Appeal the student will be reviewed for SAP progress and meeting the requirements of their Academic Recovery Plan.

If the student is granted reentry or continued enrollment by the Academic Appeal process, but eligibility for financial aid is not re-established through the Financial Aid Appeal process, the student will be ineligible to receive Title IV HEA and/or Kentucky state financial aid, and the student will be placed on Academic Probation by Appeal status. If a student is otherwise eligible to remain enrolled at the University, the Academic Probation by Appeal student may pay for college expenses by personal funds (out of pocket) or with other non-Title-IV HEA or non-state financial aid while attempting to achieve SAP policy requirements and will be expected to meet the requirements of an Academic Recovery Plan. Upon the conclusion of the quarter of Academic Probation by Appeal, the student will be reviewed for SAP progress and whether they met the Academic Recovery Plan requirements.

A student on Financial Aid or Academic Probation by Appeal status will be required to adhere to an Academic Recovery Plan (ARP) as developed and prescribed by an appropriate academic school official. Any student on an Academic Recovery Plan will remain on the assigned student status if the requirements of the Academic Recovery Plan are being met. Once minimum SAP standards are met, the student will be returned to "Active" status, and eligibility for use of Title IV funds will be restored per appropriate guidelines and regulations.  (Note: The requirements of an Academic Recovery Plan can only be changed by submission of an appeal explaining what has happened to make the change necessary and how the student will be able to make academic progress.)

If at any evaluation point a Financial Aid Probation by Appeal or Academic Probation by Appeal student fails to maintain the requirements of their Academic Recovery Plan, they will be suspended, and the student status will become "Suspension". Re-entry to the University and/or reestablishment of financial aid is possible only through the Satisfactory Academic Progress Appeal process.

Any applicable transfer credit earned from another qualified institution (accredited by an accrediting agency that is recognized by the U.S. Department of Education) during the financial aid suspension period may be used to satisfy SAP criteria as outlined in the Grade Application Chart. Thus, transferred grades will be applied to completion rate deficiencies but not CGPA deficiencies.

Re-entry After Suspension

A suspended student may appeal for reentry to the COPHS. The student will follow the guidelines outlined in the appeal process(es) stated above to apply for reentry. The appeal process and committee(s) will determine the student's eligibility for reentry and re-establishment of Title IV HEA and Kentucky state financial aid.

An inactive student not in good standing with SAP policies requesting to reenter the COPHS following a period of absence and/or suspension should contact the COPHS Office of the Dean. Exact dates of appeal hearings, due dates for written appeals and related documentation (if appropriate) can be obtained by contacting the respective campus office. The student may be requested to appear before the appeal committee(s). Absences or periods of suspension from the COPHS and/or ineligibility of financial aid for a period are not considered mitigating circumstances for reestablishment of SAP progress and/or financial aid. More information is available at http://sullivan.edu/appeals.

If the student is permitted to reenter the COPHS, failure to demonstrate sufficient progress toward achieving SAP may result in additional punitive action up to and including loss of financial aid, possible suspension and/or permanent dismissal.

Satisfactory Academic Progress Policy – Pharmacy Technician Program:

See Sullivan University Catalog – "Satisfactory Academic Progress Policy".

Tutoring Plan

Doctor of Pharmacy Program:

Doctor of Pharmacy Program Students that are struggling with the concepts, material, and/or assessments in a course, may contact the course coordinator(s) and/or their respective course faculty to set up an individual tutoring appointment. Individual tutoring sessions may occur during course faculty's office hours or scheduled appointments. Walk-in tutoring sessions during office

hours will occur if there is not a previously scheduled student for that time. Groups of 2 to 3 students may also schedule a group tutoring session during office hours if all students in attendance want to review the same/similar concepts.

Students may request tutoring sessions for groups of 4 or more students. Large group tutoring sessions may be scheduled outside of office hours and as needed. Large group tutoring sessions may be facilitated by any combination of the following individuals:

- course coordinator
- faculty
- pharmacy residents
- students

Additionally, students may request individual tutoring sessions that may be provided by student pharmacists that have been vetted by the OSA and the OAcA with an appropriate level of knowledge in the course subject matter. These requests can be made by contact the Associate Dean of Student Affairs. Course faculty may also identify students who will benefit from tutoring sessions and recommend their participation. If course remediation is a consideration, your attendance and participation in tutoring sessions will be noted by the SU COPHS Academic Progression and Professionalism Committee.

Master of Science in Physician Assistant Program:

Students who are struggling with the concepts, material, and/or assessments in the course, may contact the course coordinator to set up an individual appointment. Tutoring can be provided by second year PA students or alumni who have been vetted by PA faculty. Second year students or alumni are available for private or group sessions at their discretion and according to their schedules.

Individual appointments with course coordinators can occur at any time agreed upon by the student and professor. Groups of 2 to 3 students may also schedule a group session with the course coordinator during business hours if all students in attendance want to review the same/similar concepts.

Faculty may identify students who will benefit from tutoring sessions and recommend their participation. If course remediation is a consideration, a student's attendance and participation in tutoring sessions will be noted by the Academic Progression and Professionalism Committee.

Remediation Policy

Doctor of Pharmacy Program:

Didactic course remediation is a privilege not an inherent right of a Doctor of Pharmacy (PharmD) student. Permission to remediate a didactic course is reviewed by the Academic Progression and Professionalism Committee. PharmD students on Introductory or Advanced Pharmacy Practice Experiences (IPPE or APPE) who fail a pharmacy practice experience will be evaluated according to the policies and procedures outlined later in this policy under the heading **"FAILURE DURING IPPE AND APPE"**.

The Academic Progression and Professionalism Committee will review the following factors as well as all other relevant information before making a recommendation to the Office of Academic Affairs

and Assessment regarding a student's remediation status. Information to be reviewed includes but is not limited to the following.

- The performance on each examination in the course to determine the trend for competency in the course, e.g., one poorly performed examination that causes a student to fail a course
- The student's engagement in the course
- Professionalism concerns related to the student
- Input from the student's Faculty Advisor, Instructors, and the Course Coordinator(s)

The following provisions apply to didactic course remediation depending on the number of courses failed per quarter and/or professional year. Students who undergo course remediation may have their academic status in the Doctor of Pharmacy program changed as defined in the Satisfactory Academic Progress' (SAP) policy.

- Remediation activities will be handled by the Course coordinator and respective Department Chair.
- Remediation assessments should be completed by end of day Thursday of the second week of the given break unless alternate plans have been arranged between student, course coordinator, and department chair in collaboration with Office of Academic Affairs and Assessment and Office of Student Affairs. If the student has requested an early remediation assessment, they must provide a written statement they are aware that taking an assessment early may forfeit needed study time and the grade earned will stand as final.
- Students may need to alter personal plans during any break period if remediation is necessary to progress.
- If the student passes remediation with a score of 69.5% or greater, then a grade of "C" will be recorded for the course in CampusNexus. If a passing score is NOT received a grade of "F" will be recorded for the course. If the student does NOT complete remediation a grade of "F" will be recorded for the course.
- If the student fails or does NOT complete remediation, they will be required to repeat the course the next time it is offered.
- ***Remediation is a privilege, not an inherent right***.

Remediation Rules – Doctor of Pharmacy Program:

Rules are independent of student's current SAP status. Students may not take more than TWO (2) calendar years to complete one professional year. All PharmD professional degree requirements must be completed within FIVE (5) calendar years of initial matriculation to the program.

| Number of Didactic Courses Failed Per QUARTER | Remediation Specifics |
|---|---|
| 1 course ∞ | If cumulative grade is between 59.5-69.4% and no pending remediation from a previous quarter exists. * |
| 2 courses ∞ | Student may remediate one (1) course during the 2-week break (see rules for 1 course) and the other course during a subsequent break unless the course(s) are pre-requisites for the next quarter. (See "Course Pre-requisites – Doctor of Pharmacy Program")<br><br>If a student fails another course prior to completing remediation of the second course, they will not be allowed to remediate and will be delayed one (1) year unless they have already been delayed for that professional year. (See statement above table) |
| 3 courses ∞ | Student will be required to repeat courses when the courses are offered again in the next year (course grades will be recorded as "F") unless they have already been delayed for that professional year. (See statement above table)<br><br>Upon returning to coursework, the student will be placed on a progression plan to ensure their adequate progress in the program. |
| 4 courses | Student will be dismissed from the Doctor of Pharmacy program. *** |

| Number of courses failed per PROFESSIONAL YEAR (Not within a single quarter) ** | Consequence |
|---|---|
| 5 courses | Student will be dismissed from the Doctor of Pharmacy program. *** |

| Overall number of course failures | Consequence |
|---|---|
| 8 courses (including IPPEs and/or APPEs) | Student will be dismissed from the Doctor of Pharmacy program. *** |

∞ Assumes student has not met cumulative professional year limits listed in table below.

* If a student scores <59.5% in the course, then the Academic Progression and Professionalism Committee may recommend the student for remediation depending on other student concerns. The

student may also be required to wait and repeat the course when the course is offered again in the next academic year (the course grade will be recorded as an "F").

** Courses that have been failed and remediated will count towards a student's total number of courses failed. A student's yearly total will start over each professional year.

*** Student may appeal the dismissal to the Dean of the COPHS within 3 business days of the date of the dismissal letter.

Once the Academic Progression and Professionalism Committee recommendations have been approved by the OAcA, the OAcA will inform the student, the OSA, Department Chairs, and the student's faculty advisor of the decision. A copy of the approved recommendation will also be kept in the students file in the OSA.

Failure During IPPE and APPE:

IPPEs and APPEs cannot be remediated. Failure of an IPPE and/or APPE will lead to the need to repeat the experiences thus leading to a potential delay in graduation. Failure of two (2) IPPES, two (2) APPEs, or a combination of two (2) experiential experiences (e.g., one (1) IPPE and one (1) APPE) will lead to dismissal from the Doctor of Pharmacy program.

Didactic Year Remediation Policy – Master of Science in Physician Assistant:

**Remediation** is "the program defined and applied process for addressing deficiencies in a student's knowledge and skills, such that the correction of these deficiencies is measurable and can be documented." (ARC-PA Accreditation Standards Manual, fifth edition: Definitions). ***Note that remediation is a privilege, not a right***.

Students who are struggling with the concepts, material, and/or assessments in the course, may contact the course coordinator to set up an individual appointment. Tutoring can be provided by second year PA students who have been vetted by PA faculty. Second year students are available for private or group sessions at their discretion and according to their schedules. Individual appointments with course coordinators can occur at any time agreed upon by the student and professor. Groups of 2 to 3 students may also schedule a group session with the course coordinator during business hours if all students in attendance want to review the same/similar concepts. Faculty may identify students who will benefit from tutoring sessions and recommend their participation. The PA Program also utilizes a Remediation Specialist. The Remediation Specialist meets with students who fail assessments and may be used for tutoring purposes at the discretion of the course coordinator.

Deficiencies in didactic year activities related to the students' Medical Knowledge, Clinical Reasoning, Patient Care Skills, Interpersonal Skills, and knowledge of Systems-Based Practice are closely monitored, assessed, and documented by faculty members and the Program Director.

Students can be identified for remediation by one or more of the following criteria:
- Failure of a course
- Failure of the Didactic Comprehensive Exam
- Failing a course at mid-term
- Failure of a practical exam

<u>Remediation in the Event of Failing a Course at Mid-Term</u>:

If a student is identified to be failing a course at mid-term, the course coordinator may contact the student and institute an individualized Remediation Plan based on the content areas in which the student does not demonstrate competence.

<u>Remediation of a Failed Course</u>:

A student who earns a numerical average of less than 74.5% in a course may be eligible for course remediation upon review and recommendation of the Academic Progression and Professionalism Committee. If course remediation is a consideration, a student's attendance and participation in tutoring sessions will be noted by the Academic Progression and Professionalism Committee. The student will be permitted to take and pass one Comprehensive Course Re-Examination. Students granted permission for course remediation will begin remediation the week following final exams and will continue in the 2-week break. The Remediation Plan will be determined by the course coordinator and Program Director or designee. The remediation plan must be signed prior to beginning remediation. Students may need to alter personal plans during the 2-week break period if remediation is necessary to progress to the next quarter. **Remediation is a privilege, not a right.** The student will be permitted to take and pass one Comprehensive Course Re-Examination (CCR). This examination will cover all material taught in the course over the entire quarter.

- If the student receives a grade of 74.5% or higher on the CCR, the student will receive a C for the course and may continue to the next quarter in the Program.
- If the student fails the CCR, they will be referred to the Academic Progression and Professionalism Committee and may be subject to dismissal from the Physician Assistant Program. Notification of referral to the Academic Progression and Professionalism Committee will be sent to the Program Director, the OSA and the OAcA by the course coordinator.

A student is only eligible to take ONE Comprehensive Course Examination (CCR) per quarter; thus, a student may only fail one course per quarter. If a student earns a numerical average of less than 74.5% in more than one course per quarter, they will be referred to the Academic Progression and Professionalism Committee and may be subject to dismissal from the Physician Assistant Program. Notification of referral to the Academic Progression and Professionalism Committee will be sent to the Program Director, the OSA and the OAcA by the course coordinator.

<u>Remediation of the Didactic Comprehensive Exam</u>:

The Didactic Comprehensive Exam (DCE) contains questions that cover all courses taken during the entire didactic year and is given at the conclusion of the didactic year to progress to the clinical year. These exams will be administered at the end of the fourth quarter, prior to the start of SCPEs. A student is only eligible to take the exam if all didactic year courses have been completed successfully. Students must achieve a passing score to pass this exam. If a passing score is not achieved, the student may take only one Individualized Core Exam focusing on the areas that the student performed lowest in, as determined by the didactic faculty. If the Individualized Core Exam is not passed, they will be referred to the COPHS Academic Progression and Professionalism Committee and may be subject to dismissal from the Physician Assistant Program. Notification of referral to the Academic Progression and Professionalism Committee will be sent to the Program Director, the OSA and the OAcA by the course coordinator.

Successful completion of the didactic curriculum and comprehensive evaluations, as well as any remediation of the didactic year, is required prior to entering the clinical year.

Assessment of Remediation in System-based Practice or Interpersonal Skills:

This area is primarily identified by demonstration of poor professionalism and continued disruption in the classroom or clinical site despite mandated formal remediation whether through professional counseling or regular meetings with a mentor or advisor.

Objective means for measurement of remediation of these areas does not exist and is based solely upon the evidence of the student's improved behavior through observation by staff, faculty, Program Director, preceptors, and colleagues.

A student who fails to improve their performance in these areas will be referred to the Academic Progression and Professionalism Committee and may be subject to dismissal from the Physician Assistant Program. Notification of referral to the Academic Progression and Professionalism Committee will be sent to the Program Director, the OSA and the OAcA by the course coordinator.

Assessment of Remediation:

Recognizing that any of the areas of weakness in the skills of Knowledge for Practice, Clinical Reasoning, Person-Centered Care, Interpersonal and Communication, and Practice-Based Learning and Quality Improvement can overlap with each other, final testing of these skills can be attained by multiple methods. Hence, possible methods to test the knowledge gained through formal Remediation include but are not limited to any previously mentioned means.

Failure of Remediation:

If a student fails the assessment of remediation, they will be referred to the Academic Progression and Professionalism Committee and may be subject to dismissal from the Physician Assistant Program. Notification of referral to the Academic Progression and Professionalism Committee will be sent to the Program Director, the OSA and the OAcA by the course coordinator.

Students Subject to Dismissal:

A student may be subject to dismissal if:

- The student earns a cumulative GPA of less than 3.0 in any two consecutive quarters
- The student earns a grade of less than 74.5% in a course while on Satisfactory Academic Progress (see SAP Policy) warning
- The student fails to pass a Remedial Didactic Comprehensive Exam or Remedial Comprehensive Practical Exam at the end of the didactic year
- The student fails to comply with the key elements of professionalism as outlined in the SU COPHS Student Handbook.

Student Appeal:

A student who believes that an individual assessment or final course grade is inaccurate or inappropriate has the right to appeal as outlined in the SU COPHS Student Handbook. (See "Grading Policy")

Re-Entry after Dismissal:

Students who are academically dismissed from the Physician Assistant Program may apply for readmission into the next didactic year class. Reapplication does not guarantee re-entry into the Physician Assistant Program.

Deceleration:

Deceleration is the loss of a student from their entering cohort while the student remains matriculated in the Physician Assistant Program. Deceleration is considered only on a case-by-case basis and is not an option regularly offered by the Sullivan University COPHS Physician Assistant Program.

Course Pre-requisites – Doctor of Pharmacy Program

Pre-requisites are either sequential, time-specific, or block pre-requisites. Sequential pre-requisites are required to be finished before progressing on to the next linked course (table X). Time-specific pre-requisites are courses that must be taken immediately preceding (with no time gap) the next year of education (table Y).  Blocked pre-requisites are courses that must be completed together, therefore unsuccessful completion in one course in the block delays moving forward to the other courses in the block (Table Z).

If a student fails a course in column 1 then they cannot progress on to the course(s) in column 2.

| Table X:  Sequential Pre-requisites: | |
| --- | --- |
| Column 1 | Column 2 |
| PHR 5603: Sterile Lab | PHR 5600: IPPE Institutional |
| PHR 6003: Biopharmaceutics and Pharmacokinetics I | PHR 6203: Biopharmaceutics and Pharmacokinetics pharmaceutics II |

For students who are placed on modified schedules, the following courses will be taken on the second attempt of that specific professional year (unless already successfully completed).

| Table Y:  Time-Specific Pre-requisites | |
| --- | --- |
| These courses must be completed in the year immediately prior to P2 year: | PHR 5608: Pharmacology/Medicinal Chemistry (PMC) Foundations<br>PHR 5610: Pathophysiology |
| These courses must be completed in the year immediately prior to P3/APPE year | Pharmacotherapeutics, Pharmacology/Medicinal Chemistry, Patient Care Lab, Clinical Problem Solving |

Students must pass all P1 didactic courses prior to the start of the P2 required courses. Students must pass all P1 and P2 didactic courses prior to the start of the Advanced Pharmacy Practice Experience (APPE).

Block pre-requisites:

| Table Z:  Blocked Pre-requisites | |
|---|---|
| P1 year | None |
| P2 year | Pharmacotherapeutics, Pharmacology/Medicinal Chemistry, Patient Care Lab, Clinical Problem Solving |

Course Pre-requisites – Pharmacy Technician Program:

See Sullivan University Catalog – "Undergraduate Course Descriptions".

Course Surveyance Policy – Doctor of Pharmacy Program

The purpose of this policy is to explain the process for how students are permitted to survey (attend a course for no credit with limited ability to participate in assessments) a course in the Doctor of Pharmacy program and what is expected of the student and faculty when a course is surveyed. Surveyed courses will NOT count towards the Doctor of Pharmacy program graduation requirements. Students will not incur any charges for surveyed courses.

Selection of Students for Surveying:

Academic Progression and Professionalism Committee may recommend to the OAcA that a student survey a course as part of their remediation plan. Any student on a modify schedule may also appeal to the OAcA to be allowed to survey a course or courses. Once the OAcA has approved the recommendation or appeal, the student will be notified of the survey decision.

If a student chooses not to survey the course upon recommendation of the Academic Progression and Professionalism Committee and the OAcA, the student must request permission to NOT survey from the Office of the Dean no later than 2 weeks prior to the start of the quarter.

The Dean of the COPHS will decide if the student will be excused from surveying the course. The decision of the Dean is final and binding.

Student Expectations When Surveying a Course:

Students surveying the course will need to contact the course coordinator no later than one (1) business day after signing their letter from the OAcA to discuss and decide what activities they will participate in during the course (i.e., patient counseling activities, quizzes, etc.) as well as to determine if they will survey the course live or via Panopto.

For graded assignments (except exams) the surveying student needs to clearly communicate with both the course coordinator and group members to determine what they will be participating in, so the group members are aware. This information should be shared in writing with the group members and the course coordinator. The surveying student is still expected to adhere to all SU COPHS policy and procedures.

Faculty Expectation When a Student Surveys a Course:

Course coordinator and respective Department Chair will meet with the student surveying the course no later than 1-2 business days after being contacted by the student to discuss and decide with the student what activities the student will participate in during the course. Surveying students

may elect to participate or not participate in any graded assignments (except exams) but what is being participating in must be agreed upon at this initial meeting with the coordinator. This information will be reduced to writing so the student and coordinator are all clear on the expectations.

***Surveying students may NOT participate in an exam related activity (pre-exam reviews, exam, post-exam reviews).***

The course coordinator will be responsible for notifying all course faculty of the surveying student's participation in the class as needed. The faculty member should give the student feedback on their performance in the course (if the student has participated in graded activities) but no official grade will be reported for the student.

Dean's List, Graduation Honors, & Scholarships

There are two different academic honors that are calculated for students during their tenure in the College of Pharmacy and Health Sciences professional programs, Dean's List and Graduation Honors. The purpose of this policy is to explain how each is calculated and when they are awarded.

Dean's List - Doctor of Pharmacy & Master of Science in Physician Assistant Programs:

The Dean's List is created at the end of each quarter which has eight (8) or more credit hours of letter graded coursework. The list is created by the OAcA (OACA) once all quarter grades have been entered into CampusNexus. Once created, OAcA will forward the list of potential candidates for the Dean's list to the Dean of the COPHS for final approval. The following are criteria to be included on the Dean's List.

- Quarter GPA of 3.7 or higher (elective courses and any other Sullivan University major pursuits used towards elective credit are included in the GPA calculation)
- No current professionalism disciplinary actions*
- Must be registered for at least 8 hours of coursework with the COPHS

Graduation Honors – Doctor of Pharmacy & Master of Science in Physician Assistant Programs:

COPHS awards the following Honors during graduation.

- Summa Cum Laude:        3.80 – 4.00
- Magna Cum Laude:        3.60 – 3.79
- Cum Laude:              3.40 – 3.59
- Valedictorian: Student(s) with the highest cumulative P.A. or PharmD GPA

The following are criteria used to grant these awards.
- No history of modified schedule due to academic disciplinary actions
- No history of professionalism disciplinary actions* during the professional program
- Student must pass all didactic courses.
- Student must pass all IPPEs, APPEs, SCPEs on the first attempt.
- PharmD: Final GPA at the end of the second professional year (P2) and cumulative GPA as well as the following criteria for each award.
- PA: GPA at the end of Winter quarter of the clinical year (PA2) as well as the following criteria for each award.

All PharmD didactic coursework will be included in the final GPA calculation (including electives). Any Sullivan University major pursuit coursework that was taken in place of a PharmD elective will be added into the student's PharmD GPA to determine Graduation Honors.

* Professionalism disciplinary action is defined as a professional action plan that is provided in writing to a student from a college administrator and kept on file with the OSA.

Graduation Honors – Pharmacy Technician Program:

See Sullivan University Catalog – "Graduation Information".

Scholarships

See Sullivan University Catalog – "Scholarships".

See Sullivan University College of Pharmacy and Health Sciences webpage – "Current Students > External Scholarships".

https://sullivan.edu/college-of-pharmacy-and-health-sciences/external-scholarships/

Grading Policy

Doctor of Pharmacy Program:

All courses in the Doctor of Pharmacy Program must be completed with no grade less than "C". The Academic Progression and Professionalism Committee will review all cases in which a student has a grade less than "C" and recommend to the OAcA a plan for remediation. Numeric grades are rounded to one decimal place.

| Grade | Explanation | Numerical Equivalent |
|-------|-------------|----------------------|
| A | Excellent | 89.5% - 100% |
| B | Good | 79.5% - 89.4% |
| C | Satisfactory | 69.5% - 79.4% |
| F | Fail | < 69.5% |

Master of Science in Physician Assistant Program:

All students are expected to pursue the highest standards of academic excellence. At the conclusion of a course/SCPE, a grade will be recorded for each enrolled student on a schedule determined by the Office of the Registrar according to the grading system below.

| Grade | Explanation | Numerical Equivalent |
|-------|-------------|----------------------|
| A | Excellent | 89.5% - 100% |
| B | Good | 79.5% - 89.4% |
| C | Satisfactory | 74.5% - 79.4% |
| F | Fail | < 74.5% |

Pharmacy Technician Program:

All courses in the Pharmacy Technician Program must be completed with no grade less than "C" or 70%.

| Grade | Explanation | Numerical Equivalent |
|-------|-------------|----------------------|
| A | Excellent | 90% - 100% |
| B | Good | 80% - 89% |
| C | Satisfactory | 70% - 79% |
| F | Fail | ≤ 69% |

(For all other grades refer to the Satisfactory Academic Progress Policy)

Students in the PharmD or M.S.P.A program who have an incomplete (listed as a U on the transcript) must finish the incomplete coursework no later than 1 year from the U being submitted.

The student's Grade Point Average (GPA) is calculated by multiplying the numerical equivalent of the grade in each course by the number of credit hours for the course to determine the quality points earned in the course. The total of the quality points is divided by the number of credit hours taken during the quarter. The result is the student's GPA for the quarter. The cumulative grade point average is determined in a similar fashion using the total quality points for all courses taken and the total credit hours taken. A student's IPPE and APPE grades are not included in the calculation of the grade point average in determining academic honors.

Individual Course Assessments and Final Course Grade Appeal Process:

A student who believes that an individual assessment or final course grade is inaccurate or inappropriate must consult with the course coordinator within three (3) working days of the posting of the grade. Assessments are considered posted once the grade has been posted in the COPHS' Learning Management System. Final course grades are considered posted after noon on the Monday following finals. The course coordinator will review the request with the student and determine the accuracy of the grade. If the student is not satisfied with the result of the consultation, they may submit a written appeal to a Department Chair outside the respective course coordinator's department but within the college within three (3) working days. The Department Chair will review the request and render a decision within three (3) working days. If the student is not satisfied with the decision of the Department Chair, they may appeal to the Dean of the College within three (3) working days. The Dean will review and render a decision within five (5) working days. If the student is not satisfied with the decision of the Dean, they may appeal to the main university using the "Academic Sanctions Appeal Process" outlined in the Sullivan University Catalog.

Students on an IPPE, APPE, or SCPE who question a grade on an experience will follow the procedure as outlined in the Experiential Education section of the COPHS Student Handbook.

Graduation Requirements

Doctor of Pharmacy Program:

To qualify for graduation from the SU COPHS Doctor of Pharmacy program, a student must meet all the following criteria.

- Maintain a cumulative grade point average (GPA) of 2.00 on a 4.00 scale

- Complete all Doctor of Pharmacy coursework with a "C" or better or passing for Pass/Fail courses. All course remediation must be completed prior to graduation. Students must also meet all other academic requirements.
- Have completed at least 30% of the SU COPHS Doctor of Pharmacy program's didactic credit hours and all the third professional year. Other coursework must be completed at an ACPE accredited college/school of pharmacy.
- Pass all end of the year assessments as written in the Doctor of Pharmacy program assessment plan.
- Comply with all pre-graduation requirements.
- Have no pending ethical or professional disciplinary actions.
- Student must file an application for degree with the University.
- Students must meet all financial obligations to the University and COPHS.

Master of Science in Physician Assistant Program:

To qualify for graduation from the SU COPHS Master of Science in Physician Assistant program, a student must meet all the following criteria.

- Successfully meet the technical standards of admission, continuation, and graduation.
- Comply with all pre-graduation requirements.
- Maintain a cumulative grade point average (GPA) of 3.00 on a 4.00 scale.
- Complete all Master of Science in Physician Assistant coursework with a "C" or better or passing for Pass/Fail courses. All course remediation must be completed prior to graduation. Students must also meet all other academic requirements.
- Have no pending ethical or professional disciplinary actions.
- Student must file an application for degree with the University.
- Students must meet all financial obligations to the University and COPHS.

Interprofessional Education (IPE)

Interprofessional education (IPE) within SU COPHS is designed to foster an environment where students from two or more healthcare professions can learn about, from, and with one another to enable effective collaboration and to eventually improve patient outcomes. Throughout the curricula students will be exposed to both didactic and practical team-based activities enabling the creation of a culture where students from various healthcare disciplines will work as one cohesive unit in the delivery of patient centered care. Students will learn how each healthcare profession provides unique patient care services. Many interprofessional education opportunities will be provided through events designated as professional development activities, which will count toward students' professional development activities hour requirements.

Requests for Leave of Absence or Withdrawal from SU COPHS

A student who wishes to request a leave of absence or to withdraw from the Doctor of Pharmacy or Master of Science in Physician Assistant program will follow these procedures:

- PharmD and P.A. students should send an official request to the OAcA stating the request and the reason(s) for the request. This request must be dated and signed by the student.
- Upon receipt of the request, OAcA will arrange for the student to meet with the appropriate parties for the purpose of reviewing the decision with the student and to allow the Program to formulate a plan of action to recommend to the Dean/PA Program Director.

- Finally, the student will meet with the Dean of the COPHS and the Dean's designee(s) to review and sign the decision taken and the plan of action. All documentation will be inserted in the student's academic file and remain confidential.

Doctor of Pharmacy Program:

A student who withdraws from the COPHS and returns to complete the Doctor of Pharmacy program within five (5) years of initial matriculation is not required to apply for readmission. However, they must contact the OAcA one (1) quarter prior to the beginning of the quarter in which they plan to return, in order to complete any necessary paperwork to return. The student will be required to complete all Doctor of Pharmacy coursework in accordance with the curriculum of the class to which they are readmitted (some advance standing may be granted).

A student who withdraws from the Doctor of Pharmacy program and who is unable to complete the program within five (5) years of initial matriculation or a dismissed student must reapply should they desire to return to the Doctor of Pharmacy program. The student will be required to complete all Doctor of Pharmacy coursework in accordance with the curriculum of the class to which they are readmitted (no advance standing will be granted).

Master of Science in Physician Assistant Program:

Leave of absence will not be granted to students based exclusively on academic warning status. The didactic year student who requests and receives approved "leave of absence" will join the following cohort at the point of study where their leave commenced.

Pharmacy Technician Program:

See Sullivan University Catalog – "Academic Policies".

Administrative Withdrawals Policy

Students may be administratively withdrawn from a course or quarter. Reasons may include but are not limited to the following.

- Academic progression
- Professionalism concerns
- Situations (e.g., medical) for which a student is unable to complete a quarter and return to campus to complete the voluntary withdrawal paperwork.
- The procedure for an administrative withdrawal is the same as the "Requests for Leave of Absence or Withdrawal from the College of Pharmacy and Health Sciences" with the exception that the process starts with the OAcA, the OSA, the Director of Didactic Education, and/or the Director of Clinical Education.

Requests for Transcripts

A transcript is a permanent and official record of a student's courses and grades earned in the COPHS. Official transcript requests should be submitted electronically by visiting https://secure.sullivan.edu/Forms/transcript_request.aspx. No transcript will be released until all financial obligations are met.

Transfer Students and Advanced Standing

Doctor of Pharmacy Program:

Students requesting transfer/advanced standing must submit

- A letter of request to the Dean of SU COPHS stating the reason(s) for the transfer
- A letter from the Dean of their college/school of pharmacy stating the applicant's academic standing and the Dean's recommendation or other comments
- A transcript, course descriptions, and syllabi of all courses taken at their previous college/school of pharmacy
- PCAT, GRE, MCAT, DAT or other standardized test scores, unless granted an exception by SU COPHS
- All transcripts of Pre-pharmacy coursework
- A copy of the PharmCAS application submitted at the time of application to their previous college/school of pharmacy

Upon receipt of this information, the Associate Dean of Student Affairs and the Associate Dean of Academic Affairs and Assessment will review the transfer request and determine eligibility for transfer. All transfer students must complete at least thirty percent (30%) of Doctor of Pharmacy program's didactic credit hours and all the third professional year. Applicants may be asked for a face-to-face interview and must be eligible for licensure in both Kentucky and Indiana.

Once a student has received an offer of acceptance the following items must be complete prior to matriculation.

- The Doctor of Pharmacy Supplemental Application for Admission
- A Criminal Background Check (CBC)
- All immunization/screening requirements of the SU COPHS

SU COPHS's Doctor of Pharmacy program prefers transfer students who currently have at least a 2.5 cumulative grade point average in previous professional coursework. All transfer students are considered on a case-by-case basis. The decision to accept the transfer applicant and grant advanced standing is made by the Dean of SU COPHS.

Master of Science in Physician Assistant Program:

The Master of Science in Physician Assistant program does not accept transfer students and does not grant advanced standing.

<u>Pharmacy Technician Program</u>:

See Sullivan University Catalog – "Admission to the University".

<u>Waiving of Doctor of Pharmacy Courses</u>

The SU COPHS Doctor of Pharmacy program will NOT waive participation in Doctor of Pharmacy courses due to coursework taken by a student outside of SU COPHS. All students must complete all coursework as noted on the curriculum schedule for the Class in which the student is to graduate.

This policy does not apply to students completing dual program of studies that have been approved by SU COPHS or students transferring from other Colleges/Schools of Pharmacy. These students will be handled on a case-by-case basis in accordance with other SU COPHS policies and procedures.

<u>Academic Information - SU COPHS Curriculum and Course Descriptions</u>

<u>Doctor of Pharmacy</u>:

See Sullivan University Catalog – "College of Pharmacy and Health Sciences" and "Doctor of Pharmacy Course Index".

<u>Master of Science in Physician Assistant</u>:

See Sullivan University Catalog – "College of Pharmacy and Health Sciences" and "Graduate Course Descriptions".

<u>Pharmacy Technician Program</u>:

See Sullivan University Catalog – "College of Pharmacy and Health Sciences".

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SU COPHS Academic Calendar

(*Pharmacy Technician Program Follows Sullivan University Academic Calendar*)

| *Summer Q* | **2023-2024** | **2024-2025** | **2025-2026** |
|---|---|---|---|
| P1s, P2s, & PA1s | Jul 3-Sep 17<br>Holiday: Jul 4 (4th of July), Sep 5 (Labor Day)<br>Break: Sept 18-Oct 1 (2 wks) | Jul 1-Sep 15<br>Holiday: Jul 4 (4th of July), Sep 2 (Labor Day)<br>Break: Sep 16-Sep 29 (2 wks) | Jul 7-Sep 21<br>Holiday: Jul 4 (4th of July), Sep 1 (Labor Day)<br>Break: Sep 22-Oct 5 (2 wks) |
| P3s (APPEs) & PA2s (SCPEs): No Holidays | Jul 3-Sep 24<br>Break: Sep 25-Oct 1 (1 wk)<br>(6 wk Practice Experiences) | Jul 1-Sep 22<br>Break: Sep 23-Sep 29 (1 wk)<br>(6 wk Practice Experiences) | Jul 7-Sep 28<br>Break: Sep 29-Oct 5 (1 wk)<br>(6 wk Practice Experiences) |
| *Fall Q* | | | |
| P1s, P2s, & PA1s | Oct 2-Dec 17<br>Holiday: Nov 10 (Obs Vet Day)<br>Nov 23-24 (Tday)<br>Break: Dec 18-Jan 1 (2 wks) | Sep 30-Dec 15<br>Holiday: Nov 11 (Vet Day)<br>Nov 28-29 (Tday)<br>Break: Dec 16-Jan 5 (3 wks) | Oct 6-Dec 21<br>Holiday: Nov 11 (Vet Day)<br>Nov 27-28 (Tday)<br>Break: Dec 22-Jan 4 (2 wks) |
| P3s (APPEs) & PA2s (SCPEs): No Holidays | Oct 2-Dec 24<br>Break: Dec 24-Jan 1 (1 wk)<br>(6 wk Practice Experiences) | Sep 30-Dec 22<br>Break: Dec 23-Jan 5 (2 wks)<br>(6 wk Practice Experiences) | Oct 6-Dec 28<br>Break: Dec 29-Jan 4 (1 wk)<br>(6 wk Practice Experiences) |
| *Winter Q* | | | |
| P1s, P2s, & PA1s | Jan 2-Mar 17<br>Holiday: Jan 15 (MLK Day)<br>Break: Mar 18-Apr 1 (2 wks) | Jan 6-Mar 23<br>Holiday: Jan 20 (MLK Day)<br>Break: Mar 24-Apr 6 (2 wks) | Jan 5-Mar 22<br>Holiday: Jan 19 (MLK Day)<br>Break: Mar 23-Apr 5 (2 wks) |
| P3s (APPEs) & PA2s (SCPEs): No Holidays | Jan 2-Mar 24<br>Break: Mar 25-Apr 1 (1 wk)<br>(6 wk Practice Experiences) | Jan 6-Mar 30<br>Break: Mar 31-Apr 6 (1 wk)<br>(6 wk Practice Experiences) | Jan 5-Mar 29<br>Break: Mar 30-Apr 5 (1 wk)<br>(6 wk Practice Experiences) |
| *Spring Q* | | | |
| P1s, P2s, & PA1s | Apr 1-Jun 16<br>Holiday: May 27 (Memorial Day)<br>June 19 (Juneteenth)<br>Break: June 17-Jul 1 (2 wks) | Apr 7-Jun 22<br>Holiday: May 26 (Memorial Day)<br>June 19 (Juneteenth)<br>Break: June 23-Jul 6 (2 wks) | Apr 6-Jun 21<br>Holiday: May 25 (Memorial Day)<br>June 19 (Juneteenth)<br>Break: June 22-Jul 5 (2 wks) |
| P3s (APPEs) & PA2s (SCPEs): No Holidays | Apr 1-Jun 23<br>Break: Jun 24-Jul 1 (1 wk)<br>(6 wk Practice Experiences) | Apr 7-Jun 29<br>Break: Jun 30-Jul 6 (1 wk)<br>(6 wk Practice Experiences) | Apr 6-Jun 28<br>Break: Jun 29-Jul 5 (1 wk)<br>(6 wk Practice Experiences) |

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**CLINICAL AND EXPERIENTIAL INFORMATION**
**EXPERIENTIAL EDUCATION – DOCTOR OF PHARMACY PROGRAM**

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Selection Process

Site Selection Criteria:

Experiential sites must provide students with the support needed to practice skills, apply knowledge and attitudes that will allow for transitioning from a didactic learner to a practice ready pharmacist. Ideal sites provide opportunities for collaboration with other healthcare professionals and adequate resources for the student to complete the experiential objectives. The site must foster an environment that is conducive to learning, including but not limited to; sufficient patient interaction or daily census, appropriate staff to allow ample time to achieve all course objectives, and support for preceptor development.  The site must comply with licensing and accreditation requirements. All sites must complete a student affiliation agreement.

Introductory Pharmacy Practice Experiences (IPPE) Assignment Criteria:

Students may be required to relocate to sites distant from the Doctor of Pharmacy program located at 2100 Gardiner Lane, Louisville, KY 40205. The Office of Clinical and Experiential Education (OCEE) will ask students upon entering the program which regions of the designated area the student has access to room and board in both the Louisville/Southern Indiana area, as well as other areas throughout the Commonwealth of Kentucky and bordering states. OCEE will match students with experiences in the areas where they have resources. Students will be responsible for informing OCEE of any change in their resources or any other information that may impact site placement. All students will be treated equally, exceptions will be made only as medically necessary. Students are strongly encouraged to reply to the request for information (via email, survey, etc.) from OCEE when applicable.

In the instance a student is placed in an area they do not have resources, the student should contact the OCEE for further information regarding room and board within the designated area.

Advance Pharmacy Practice Experiences (APPE) Assignment Criteria:

Experiential sites will be assigned by the Office of Clinical and Experiential Education (OCEE). Consideration is made for student selection, but site assignment is determined by availability, program requirements and available resources. Students will complete seven (7) Advance Pharmacy Practice Experiences. All APPEs will consist of six (6) week experiential opportunities. Students are required to complete one of each of the four core experiences: Ambulatory patient care, Hospital/Health systems, Inpatient General Medicine, and Community pharmacy. Core experiences will focus on direct patient care, systems management, interprofessional education (IPE) and professional development. Students will complete two elective experiences providing the opportunity to explore uncommon areas of practice and one selective direct patient care experience (ambulatory patient care or inpatient general medicine patient care). Other requirements include the following.

- Required practice experiences must involve direct patient care.
- Elective experiences may be taken at any level of patient care provided that no more than two of the APPEs are involved in non-patient care activities.
- Student eligibility for site placement is subject to site specific criteria.
- Students may complete no more than 2 APPEs with the same clinical preceptor.
- Students may not be placed at any facility where ownership or direct supervision is performed by a family member or relative.
- Student family members will not be placed together simultaneously at the same practice site for the same experience type.

- Students may not be paid for any experiential course for which academic credit is given.
- Students may complete two elective APPEs outside of the Commonwealth of Kentucky or a 180-mile radius of the College provided completion of all didactic work results in a minimum GPA of 3.25 and the experience is not available within the designated area.

Choosing APPEs:

Experiential opportunities are used to introduce the student to all areas of pharmacy practice. Students are reminded that the practice experiences should be diverse and challenging. Students will rank their preferred APPE sites from a list of available experiential opportunities. The list will be available for the students to review once schedules from preceptors have been finalized.  All selections will be made through the optimization system administered by OCEE. Student APPE schedules will be released to the students during the winter quarter of the P2 year.  Students will be permitted to switch or "trade" experiential sites with each other provided the OCEE approves the "trade" or switches. No "trades" or switches are permitted without the prior approval of the Office of Clinical and Experiential Education. A "trading" day will be designated ahead of time following release of the schedules.

International experiences will be supported by the OCEE to the extent possible. International experiences can expand the horizons of students learning and enhance a global appreciation of the profession. Students, however, are reminded, that hours spent on international experiences do not qualify for internship hours by state boards of pharmacy. Students are responsible for all cost incurred.

Changing Student Experiences (IPPE and APPE):

Once the schedule is finalized, there will be no changes to the schedule unless the preceptor is no longer available, the student is unable to complete the experience due to medical reasons, or other academic concerns arise. In the event a preceptor may find it necessary to cancel an experience after student(s) is(are) assigned, OCEE will re-assign students based on available sites and experiential requirements. Displaced students may be required to travel to distant sites within the designated Kentucky and Southern Indiana area. The determination of the OCEE is final and remains the final arbiter of all pharmacy practice experience placements.

Practice Experience Placement – Out of Area:

Students may be placed in practice experiences outside of the Louisville-Metro area. In some cases, these placements may be greater than 60 miles or one hour of driving time away from the College's address of 2100 Gardiner Lane, Louisville, Kentucky 40205. The practice experience program of the College considers many variables when placing students. Considerations include, but are not limited to the following:

- Housing availability for students
- Quality and types of practice experience offered
- Student practice experience schedule (required practice experience versus elective)

Anytime during the year, a site where a student has been assigned may become unavailable. In these cases, the student will be placed in an available alternate site.

In all placements, students are responsible for transportation to and from the site. The College does not reimburse students for mileage, housing, or living expenses due to placement outside of the Metro area. Students should consult with financial aid for assistance, if needed.

Expectations of Students on Practice Experiences:

It is the responsibility of the student to make initial contact with their preceptor *at least five (5) weeks prior* to the practice experience.

Students should request the following information, at minimum, from the preceptor.

- Schedule
- Dress code
- Meeting place (e.g., first day of experience)
- Parking
- Prerequisites

Students are reminded that sites may require additional criminal background checks (CBCs) and drug screens for which scheduling, and funding are the student's responsibility. Failure to comply with these requirements may result in course failure.

Transportation:

Students are required to have adequate transportation to all assigned practice experiences. The lack of adequate transportation will not be an excuse for reassignment.

Remuneration Policy:

Students cannot be paid for any time spent on practice experiences for which academic credit is given per accreditation standards.

Conflict Resolution:

Students must attempt to resolve any conflicts that may develop. In the event there is a conflict between preceptor and student that cannot be resolved without intervention, OCEE should be notified as soon as possible. If resolution is not a viable alternative, the student may be reassigned to another preceptor or site. The OCEE will investigate and work with the OSA to resolve all conflicts and complaints brought to its attention.

Confidentiality:

Patient confidentiality must always be maintained in accordance with HIPAA, state regulations, and SU COPHS policies. Students should be aware of site-specific policies regarding confidentiality. Students are reminded that no identifying patient information should be given in case presentations or patient discussions or be taken outside the facility. Patient information should NEVER be shared in any type of public forum or social media of any form (e.g., Facebook, Twitter, Instagram, etc.). Any violation of patient confidentiality is a violation of the Student Honor Code and will be referred to OSA for appropriate action.

Ethics:

As a student of the SU COPHS, you represent yourself, the college, and the profession of pharmacy. Ethical and professional behavior is mandated, and unethical behaviors will not be tolerated. Any breach of ethical standards will be referred to OSA for appropriate action.

Course and Grade Information

Evaluation and Assessment:

Student assessment and evaluation is the responsibility of the preceptor and the student. Student assessment is an ongoing process that requires continuous feedback, reflection and demonstrated competency.

Students are required to review and complete the Required Experience Checklist while on the respective required APPE. These required checklists are in the syllabus for the experience. (Ambulatory patient care, Hospital/Health systems, Inpatient General Medicine, and Community pharmacy). The practice experience syllabus represents the minimum course outcomes and objectives. Preceptors can enhance the minimum requirements or require the completion of additional objectives by the student. Preceptors will assess and evaluate students at mid-term and at the end of the experience. More frequent student assessment may be necessary depending on a student's progress.

Preceptors will not be able to review the student's evaluation of the site and preceptor until the preceptor has submitted the student's final evaluation. Evaluations of the preceptor and site will be completed by the student at the end of the experience and must be completed for the student to gain access to view their own final assessment. Final evaluations must be completed in the practice experience education software platform within five (5) business days of the end of the experiential block.

Preceptors will have access to their evaluations completed by students within five (5) days of the end of the experience.

Grading Scale:

69.5% - 100% = Pass
≤ 69.4% = Fail

Grading Policy:

Introductory Pharmacy Practice Experiences (IPPE) and Advance Practice Pharmacy Experiences (APPE) will be graded as **Pass / Fail**. A grade of 69.5% or better is required to pass all IPPE and APPE experiences. Students who fail an IPPE or APPE will not have the opportunity for remediation. All experiential experiences which are failed must be repeated and passed for a student to qualify for graduation from the Doctor of Pharmacy program.

Preceptors may dismiss or request removal of a student from a site for academic, professional, or ethical reasons. Students removed from a site will receive "F" (failing) for that experience and will have to repeat the experience. Failure of two (2) IPPES, two (2) APPEs, or a combination of two (2) experiential experiences (e.g., one (1) IPPE and one (1) APPE) will lead to dismissal from the Doctor of Pharmacy program.

Withdraw Policy:

A student withdrawing *prior* to week 7 of a longitudinal IPPE experience or week 4 of a hospital IPPE or an APPE experience will have earned a "W" (withdraw). The student will repeat the experience, some part of the experience as designated by the preceptor, or a similar experience to ensure the student meets the experiential requirements for graduation.

A student withdrawing *after* week 7 or week 4 (as noted above) of an experience will have earned a "WF". The WF is regarded as a failing grade. The student will be required to repeat the entire experience.

Student Grade Appeals:

A student who believes their grade in an IPPE or APPE is incorrect should first verify its accuracy with the Office of Clinical and Experiential Education. If, after verification, the student still believes the grade is inappropriate, they should submit a written appeal to the OCEE within three (3) working days, outlining the reasons they believe the grade is inappropriate and include such evidence and/or mitigating circumstances as necessary. The OCEE will review the matter, consult with the clinical faculty preceptor and the student as necessary and render an opinion within five (5) business days. The student may then submit a written appeal to the Dean of the College within three (3) business days. The Dean will review and render a decision within five (5) business days. If the student is not satisfied with the decision of the Dean, they may appeal to the University using the "Academic Sanctions Appeal Process" outlined in the Sullivan University Catalog.

Grade Submission:

Grades will be submitted to CampusNexus within three (3) working days of the end of each quarter. Grades are submitted by preceptors, signed off by the Office of Clinical and Experiential Education (OCEE) and the Associate Dean of Academic Affairs and Assessment. Grades will be entered into Campus Nexus by the OCEE.

Concern and Praise Cards:

These evaluations can be found in the practice experience education software platform. These confidential evaluations enable you to alert OCEE of a concern or praise about a specific preceptor or student encounter. Praise cards are also used to identify students and preceptors fulfilling the criteria for Student of the Year and Preceptor of the Year, respectively.

Course Syllabus:

The course syllabi can be found within the experiential software platform and Blackboard organization. Your preceptor will provide a copy of the experience specific syllabus for your reference. The syllabi should act as a guide to helping you achieve the skills, competencies, and attitudes that are expected during each type of experience. Your preceptor may add items to the syllabi, but you must complete the required items contained within each syllabus.

Course Evaluation:

The course evaluation tool can be found within the experiential software platform and Blackboard organization. You and your preceptor should discuss your progress at a minimum at the midpoint and end of the experience.

NAPLEX Review Program:

Sullivan University's Doctor of Pharmacy program's NAPLEX preparation activities are outlined in the PHR 7602 Professional Transitions syllabus.

**CLINICAL EDUCATION – MASTER OF SCIENCE IN PHYSICIAN ASSISTANT PROGRAM**

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Goals of the Clinical Year

The clinical year takes students from the theoretical classroom setting to an active, hands-on learning environment to prepare them for a lifetime of continued refinement of skills and expanded knowledge as a practicing PA. The goals of the clinical year include:

- Apply didactic knowledge to supervised clinical practice
- Develop and sharpen clinical problem-solving skills
- Expand and develop the medical fund of knowledge
- Perfect the art of history taking and physical examination skills
- Sharpen and refine oral presentation and written documentation skills
- Develop an understanding of the PA role in health care delivery
- Prepare for the Physician Assistant National Certifying Exam (PANCE)
- Develop interpersonal skills and professionalism necessary to function as part of a medical team

Clinical Year Requirements

Curriculum Vitae:

Students must update their CV prior to the onset of SCPEs as some hospital systems require student CVs prior to student placement. CVs must be updated as each SCPE is completed. These must be uploaded into the program's practice experience education software platform after each SCPE.

Site Specific Documentation:

Some sites require additional student documentation, which must be completed prior to the start of the SCPE. If this is required, the student will receive an email from the Practice Experience Coordinator with necessary documentation to be completed. The documentation must be returned by the deadline given. Failure to return completed documentation on time may cause a delay in the SCPE. In this case, the student will be subject to the professionalism policy and the attendance policy, and an unapproved absence will result if the student is not permitted on the site due to delayed paperwork. This may also result in failure of the SCPE and/or delayed program completion.

Required Equipment:

Students are responsible for obtaining, maintaining, and assuring that the following items are readily accessible for use throughout their SCPEs.

- Short white coat (Students are not permitted to wear long white coats and will be removed from the site due to unprofessional conduct if a student is found to be wearing a long white coat)
- Student badge clearly identifying status as "Sullivan University PA Student".
- Students MUST always wear name tag. (See "Dress Code")
- Stethoscope
- Sphygmomanometer
- Otoscope and Ophthalmoscope
- Tuning forks: 128 Hz and 512 Hz
- Reflex hammer

- Tape measure (inches and centimeters)
- Pocket Rosenbaum eye chart with ruler (inches and centimeters)
- Penlight
- Laptop (bring to EOR)
- Pocket Notebook
- Apps/electronic resources (Epocrates, Sanford Guide, etc.)

SCPEs:

The PA program is responsible for the development and assignment of all SCPEs. Under no circumstance is a student permitted to arrange their own SCPE. SCPEs are assigned at the discretion of the PA Program and dependent upon successful and timely completion of required preceptor and site paperwork, affiliation agreement, and the proper State Authorization secured by Sullivan University. It is ultimately the program's responsibility and decision to determine if a preceptor/site meets program expectations and be confirmed for student placement. Students are assigned their SCPEs based on multiple factors which include academic standing, location, medical experience, preceptor availability, student request, student interest, or similarities with the preceptor/site. The student's SCPE placements are the program's responsibility and choice. If a student contacts a site/preceptor to arrange their own SCPE, it will be considered unprofessional conduct and the student will be subject to the professionalism policy.

All student placements for SCPEs are finalized at the discretion of the Director of Clinical Education in conjunction with the Program Director. Any SCPE is subject to change. The Clinical Team reserves the right to rearrange and reschedule SCPEs when necessary. Students will be notified as soon as the need for change arises and as soon as sites are secured. The Clinical Team also reserves the right to prioritize the order in which sites are contacted.

Students must be aware that the SCPE schedule is subject to change and occasionally sites or preceptors may cancel at the last minute, or the program may need to rearrange placements. Students must be flexible and understand that the program must place them where SCPEs are available.

Core SCPEs:

The seven (7) required core SCPEs are:

- Family Medicine
- Internal Medicine
- Pediatrics
- Behavioral Health
- Emergency Medicine
- Women's Health
- General Surgery

Elective SCPE:

Each student must also complete one elective SCPE. The SCPE discipline and site may be requested by a student. The program does not guarantee that elective site/preceptor request(s) will be granted. It is ultimately the program's responsibility and decision to determine if a preceptor/site meets program expectations and be confirmed for student placement.

The elective SCPE selection may consist of a specialty or subspecialty the student is interested in or may be used to gain further knowledge of a particular discipline the student has already rotated through. The program reserves the right to choose the student's elective for any reason (e.g., the student has not met program expectations, the student is on probation, the student has failed a SCPE).  To ensure PA graduates are prepared for primary care practice, the program may choose a student's elective SCPE.

If a student fails any given SCPE, the elective SCPE cannot be used as the repeat for that failed SCPE. Although the program has the right to choose the student's elective from having failed a prior SCPE, the student will still be required to repeat that failed SCPE as an extra SCPE. Each student is required to pass the 7 core SCPEs ALONG with a separate elective SCPE.

Out-of-State SCPEs:

Out of state SCPEs are a privilege. Efforts may be made to accommodate up to two (2) out of state SCPE requests per student. Placement is based on, but not limited to, site availability and meeting SCPE requirements as deemed by the program. Some out-of-state SCPE requests may not be granted. The program reserves the right to deny the out of state SCPE request should the student be on academic probation, if a student has had disciplinary or professionalism issues, or the student has failed a SCPE.

Transportation:

All students must have reliable transportation to and from SCPE sites. Students may be required to drive up to 60 miles (each way) to their clinical site. Unreliable transportation is not an excuse to miss multiple SCPE days. Refer to the attendance policy as the program understands that issues may arise, but this should not be a common occurrence.

Housing:

Every effort is made to ensure students are placed in a geographical area where they have housing. However, SCPEs are scheduled where SCPEs are available, and the student may be placed at a site greater than 60 miles from campus and/or the student's personal housing. Students may be provided with housing options at these distant sites; the housing costs are at the student's expense. The PA program will work with sites to assist students in identifying safe and comfortable housing. Accommodations range from guest rooms in private homes to onsite apartment living. Students may request additional financial aid for housing costs if needed.

Students who live or complete SCPEs outside of the Louisville area must return to campus as required for EOR meetings, exams, OSCEs, or other activities required by the program. It is the student's responsibility to arrange transportation and/or housing for these required on-campus days. All costs related to transportation and/or housing are at the student's expense. If a student is participating in a SCPE at a site more than 180 miles from campus, an approved absence of 1 day from the SCPE will be given for travel time to return to campus. This day cannot be substituted for a different day of absence from the site. The online Absence request form must be completed since a day of the SCPE will be missed. (This approved absence day will not be counted as the one approved absence day per SCPE as stated in the attendance policy.)

Schedule Changes:

Once a student's SCPE is confirmed, there are no changes to the schedule except for extenuating circumstances (i.e., the preceptor/site becomes unavailable). The schedule may need to be

changed at the discretion of the program. If a SCPE is canceled, the program will re-assign the student based on available preceptors/sites. Displaced students may be required to travel to distant sites within the designated Kentucky and Southern Indiana area. The determination of the program is final, and the PA program remains the final arbiter of all PA SCPE placements.

End of Rotation (EOR) Meetings:

EOR meetings typically occur the final two days of each SCPE. Typically Usually, , these meetings occur on campus, but may be held virtually in case extenuating circumstances. EOR meetings may include EOR exam, evaluations, case presentations, class and/or advisor meetings, practical examinations, and lectures. Students should expect EOR days to last from 8:00 AM to 5:00 PM on both days (time subject to change). Attendance at EOR Meetings is mandatory and absences carry stiff penalties. See EOR Absence Policy.

Independent Shadowing:

The PA program does not arrange shadowing experiences for clinical year students. On their own time, students are not to present themselves as Sullivan students, they are not to provide any patient care or touch patients, they are not to wear Sullivan identification, and they are not acting under the auspices of Sullivan University so may not be covered by Sullivan liability insurance.

Site Information

Clinical Site Policies:

To ensure that the site and preceptor meet program expectations for learning outcomes and performance evaluation measures, vetting of each site and preceptor occurs prior to placement of students. It is ultimately the program's responsibility and decision to determine if a preceptor/site meets program expectations and be confirmed for student placement. An active affiliation agreement must be on file with each clinical site before the student can rotate at the site. Students may not be placed at any facility where ownership or direct supervision is performed by a family member or relative.

Physician preceptors must be board certified in their area of practice and must hold an active state license. Advanced Practice Provider (PA/NP) preceptors must be NCCPA certified or an APRN, , be state licensed, and have worked in their area of practice for at least 2 years. The PA program verifies these credentials prior to student placement. If a preceptor has a board action against their state license, the state board will be contacted to review the board action with the Program Director, Director of Clinical Education, and Medical Director. If the board action has been resolved, the program may choose to permit the use of the preceptor, depending on the infraction. If there are unresolved board actions, the preceptor will not be used. Board certification and licensure are verified every 2 years as state licenses expire or upon board certification expiration. Licenses will be reviewed for board actions upon expiration or as circumstances dictate.

Students must have direct, hands-on contact with patients and involvement in patient assessment, patient decision-making, and helping formulate a detailed plan. Students must always have direct supervision. Furthermore, the site must provide the patient exposure and allow the student to fulfill all course competencies, including technical skills.

Preceptors must provide direct supervision and should provide feedback and mentoring to the student. Preceptors may assign the student additional reading or assignments to aid in accomplishing learning outcomes and instructional objectives.

PA program faculty conduct site visits to ensure that the preceptor and site continue to provide the physical facilities, patient populations, and supervision necessary to fulfill program expectations of the clinical experience. Site visits may occur more frequently if there is evidence of student or preceptor concerns.

The program uses many tools to verify that each student is meeting expected learning outcomes for each SCPE, and that the site allows the student to accomplish these outcomes. Some of these tools include preceptor evaluations, student evaluations, site visits, SCPE assignments, and PAEA EOR exams.

Students must follow the working schedule of the preceptor which should be a full-time working schedule (average 36 hours per week; no more than 60 hours per week). Students should see a minimum of 6 patients per day. Alert the PA program if you are not seeing 6 patients per day or are not able to work a full-time schedule (36 hours per week). The student may be required to work evenings, holidays and weekends following the preceptor's schedule. It is the expectation of the PA program that each student achieves a minimum of 165 hours of clinical practice experience.

Contacting the Site:

Students will find site and preceptor contact information in the program's practice experience education software platform. Students are to contact the site (via email or phone) one (1) week prior to the SCPE start date to introduce themselves and learn of any details needed for the first day of the SCPE (arrival time, meeting place, dress code, etc.). If student's communication to the site goes unanswered, wait two (2) business days before contacting the site again. If after two (2) attempts the student is still unable to contact the site, notify the program immediately.

Orientation and Student Expectations:

All students should receive a general orientation of the SCPE site by the preceptor or staff. On the first day of the SCPE (or when possible, prior to the SCPE) the student should take care of any administrative needs, including obtaining a name badge and computer password, and completing any necessary paperwork, EMR training, and additional site-specific HIPAA training, if needed.

Early in the SCPE, it is recommended that the preceptor and student formulate mutual goals regarding what they hope to achieve during the SCPE, using the Course Learning Outcomes (found in each syllabus) as a guide. The preceptor should also communicate his or her expectations of the student during the SCPE. Expectations may include:

- Hours
- Interactions with office and professional staff
- General attendance
- Call schedules
- Overnight/weekend schedules
- Participation during rounds and conferences
- Expectations for clinical care, patient interaction, and procedures
- Oral presentations
- Written documentation
- Assignments
- Write-ups
- Additional items deemed pertinent by the preceptor

Students are expected to discuss with preceptor any day(s) they anticipate requesting off during the SCPE (see Attendance Policy). Approval for absences is granted by the OSA, not the preceptor or clinical site.

Addressing Concerns or Problems at the Clinical Site:

SCPE concerns should be initially discussed with the preceptor and then the Course Coordinator and/or Director of Clinical Education. If the concerns are not resolved satisfactorily, they should be brought to the attention of the PA Program Director. Students should feel free to discuss concerns with the PA Program Director without fear of retaliation from PA Program faculty or staff. If concerns are not resolved satisfactorily by the PA Program Director, the situation should be discussed with the Dean of COPHS. Students should also feel free to discuss their concerns with senior administration as needed without fear of retaliation. Classroom or clinical site discrimination or sexual harassment concerns should be brought to the immediate attention of the Associate Dean of Student Affairs for the COPHS, the PA Program Director and/or the Director of Clinical Education.

Praise cards and concern cards can be found in the practice experience education software platform. These confidential evaluations enable you to alert OCEE of a concern or praise about a specific preceptor or student encounter. Praise cards are also used to identify students and preceptors fulfilling the criteria for Student of the Year and Preceptor of the Year, respectively.

Site Visits:

Site visits may be performed by PA program faculty throughout the clinical year. Site visits are performed routinely and as necessitated by preceptor or student concerns. Site visits assess the student's progress toward meeting course learning outcomes and that the site and preceptor are providing the opportunity for students to meet required program and SCPE specific expectations.

Safety:

If a student feels unsafe at a clinical site, the student should notify the PA Program immediately. Students are responsible for obtaining safety information about the site and orienting to the site on the first day of the SCPE. This includes information regarding potential hazards, fire safety, natural disaster plans, etc. Students should report any safety concerns or threatening behavior (by preceptor, facility staff, etc.) to the PA Program immediately.

Student Supervision:

The PA student must always be supervised by the preceptor. The preceptor can provide direct supervision of technical skills with gradually increased autonomy in accordance with the student's demonstrated level of expertise. However, every patient must be seen, and every procedure evaluated by the preceptor prior to patient discharge. The PA student is not permitted to evaluate, treat, or discharge a patient without supervision and final evaluation by the preceptor.

Students may spend time with ancillary staff (x-ray, lab, physical therapy, etc.) as these experiences can be very valuable and may be required to fulfill certain SCPE expectations and assignments. However, the preceptor should always approve the student's assigned activities. If a circumstance arises in which a student is asked or expected to perform a clinical procedure or to deliver patient care services without adequate or appropriate supervision, the student must politely, but firmly decline and immediately contact the PA Program.

To protect your personal and professional integrity and to avoid potential legal liability, do not perform any patient care activity if:

- The authorized preceptor or their designee is not on the immediate premises.
- You have not received adequate instruction and/or are not proficient in or knowledgeable about the care you are asked to deliver.
- You have reason to believe that such care or procedure may be harmful to the patient.
- There is no adequate or appropriate supervision available at the time you are expected to carry out the assignment.
- The care or procedure is self-initiated (i.e., the PA student assumes or decides that a particular service or procedure should be performed).
- The activity is beyond the scope of your role as a PA student.

In some settings, especially if there are many patients, there may be pressure to perform services which are inappropriate to the level of training or knowledge. It is much easier to defend why a task was not performed than it is to defend why a patient's well-being was endangered. Do not let good judgment be compromised by the momentary flattery or excitement of doing something viewed as challenging or daring. A PA student may face termination should they not exercise reasonable and sound judgment regarding the welfare of a patient.

There is an obligation to exercise good judgment and professionalism during patient care. The PA student should use the above comments as a guide in decision-making. If placed in a compromising situation, the student should **ALWAYS** call the PA Program faculty to voice any concerns.

Informed Patient Consent Regarding Student Involvement in Patient Care:

In addition to preceptors, patients are essential partners in this educational endeavor. Exceptional patient care is the primary aspect of each PA student's educational endeavors. HIPAA policies must always be followed. Students must observe patient confidentiality, while respecting patient privacy and dignity and honoring patient preferences regarding treatment.

Patients must be informed that a PA student will participate in their care, and the patient's consent must be obtained. This may be done through standardized forms at admission or on a person-by-person basis. If the patient does not consent to a PA student being involved in their care, the request must be honored. Patients must have an explicit opportunity to decline student involvement. Each student must wear their "Sullivan University PA Student" badge and must also verbally identify themselves as such to each patient. (*See Dress Code & Student Identification section*).

Patient Confidentiality:

The Patient Confidentiality policy is presented during the first year. All records and communications regarding a patient's care are protected by Federal and State courts as confidential and are only to be disclosed to other members of the health care team on a "need to know" basis. Even when discussing with appropriate members of the healthcare team, the student is to use discretion when discussing patient information. Such communication is not to take place in hallways, elevators, cafeterias, or areas where other employees, students, patients, or visitors may overhear information.

Information overheard or viewed by the student inadvertently is subject to the same respect for the patient's confidentiality as firsthand knowledge. Unauthorized release of confidential information, in

any form, may subject the medical institution, health care providers and staff to civil and criminal liability or professional disciplinary actions. A breach of confidential patient information is grounds for disciplinary action and referral to the Academic Progression & Professionalism Committee which could result in remediation or possible dismissal from the program.

**Students are NOT permitted to take pictures of patients regardless of patient or preceptor permission**.

Documentation:

PA students may enter information in the site's written or electronic medical record (EMR) if permitted by the preceptor and/or site. EMRs sometimes present obstacles for students if they lack a password or are not fully trained in the use of one institution's EMR system. In these cases, students are encouraged to hand-write notes, if simply for the student's own edification, which should be reviewed by preceptors for feedback. Writing a succinct note and communicating effectively is a crucial skill that PA students should develop.

Students are reminded that the medical record is a legal document. All medical entries must be identified as "student" and must include the PA student's signature with the designation "PA-S." The preceptor cannot bill for the services of a student. Preceptors are required to document the services they provide as well as review and edit all student documentation. Although student documentation may be limited for reimbursement purposes, students' notes are legal and are contributory to the medical record.

Preceptors should clearly understand how different payers view student notes as related to documentation of services provided for reimbursement purposes. Any questions regarding this issue should be directed to the Director of Clinical Education.

**Centers for Medicare & Medicaid Services (CMS) no longer requires that clinicians serving as preceptors reperform student-provided documentation.** Preceptors may verify (instead of redocumenting) all student documentation/findings, including history, physical exam, and/or medical decision making. **For more information, please see:** https://paeaonline.org/advocacy/faq-cms-student-documentation/.

Prescription Writing:

Students may transcribe prescribing information for the preceptor, but the prescriber must sign all prescriptions. More specifically, **the student's name is not to appear on the prescription***.* For SCPE sites using electronic prescriptions, the preceptor MUST log into the system under their own password and personally sign and send the electronic prescription. These guidelines must not be violated by the student or the preceptor. Students may not carry a signed prescription pad with them.

Mobile Devices:

Students should leave mobile devices off while at the clinical site unless they are being used for patient logging or used to reference material for patient care. The student should inform the preceptor what they will be using the mobile device for, so it does not appear unprofessional. The student should not use a mobile device to access personal email or social media sites during SCPE hours. Students are not permitted to take pictures of patients or patient body parts regardless of patient or preceptor approval.

Other Policies Related to Clinical Students

Inclement Weather:

In the event of a weather-related closing or delay, students should follow the schedule of their clinical site, not Sullivan University. The student is advised to use their own judgement regarding safe travel conditions. The program prioritizes student safety first. Report any closings to the PA Program via phone or e-mail on the day of the occurrence. The PA program reserves the right to require a makeup of site time to ensure appropriate instructional time.

Clinical Year Student Grievances Regarding a Grade:

Students complete two SCPEs per quarter. Final SCPE grades are available to the student on Blackboard. Grades for both SCPEs are not posted on the Sullivan student portal until the end of the quarter.

A student who believes that a grade on **an assignment or evaluation** is inaccurate or inappropriate must consult with the Course Coordinator no later than (3) working days of after the grade is posted to Blackboard. The Director of Clinical Education and the Course Coordinator will review the assignment grade or preceptor evaluation with the student and determine the accuracy of the grade. If the student is not satisfied with the result of this decision, they may submit a written appeal to the PA Program Director within three (3) working days. If the student is not satisfied with the result of this decision, they may submit a written appeal to the Dean of the COPHS within three (3) working days. Should the students not be satisfied with the result, they are to refer to the official SU grievance policy. Refer to the current Sullivan University Catalog (https://www.sullivan.edu/academic-catalogs/) for further information.

A student who believes their final grade **for a SCPE** is incorrect should first verify its accuracy with the Course Coordinator as soon as possible but no later than three (3) working days after the grade is posted to Blackboard. The Director of Clinical Education and the Course Coordinator will review the assignment grade or preceptor evaluation with the student and determine the accuracy of the grade. If the student is not satisfied with the result of this decision, they may submit a written appeal to the PA Program Director within three (3) working days. If the student is not satisfied with the result of this decision, they may submit a written appeal to the Dean of the COPHS within three (3) working days. Should the students not be satisfied with the result, they are to refer to the official SU grievance policy. Refer to the current Sullivan University Catalog (https://sullivan.edu/academic-catalogs/) for further information.

Students should freely discuss concerns with the PA Program Director without fear of retaliation from PA Program faculty or staff. The PA Program Director will review the matter, consult with the Clinical Team, preceptor, and the student as necessary and present the matter to the COPHS Dean for a final decision. Should the student not be satisfied with the result, they are to refer to the official SU grievance policy. Refer to the current Sullivan University Catalog (https://sullivan.edu/academic-catalogs/) for further information.

Academic Progress:

Academic progress is monitored closely. If a student is identified to be in academic jeopardy, they may be counseled by their faculty advisor, the Course Coordinator, and/or the Director of Clinical Education. To maintain satisfactory academic standing in the Sullivan University PA Program, and to progress on to the next SCPE in the clinical year, a student must:

- Fulfill all course requirements and SCPE expectations
- Receive a score of "Below Expectations" or "Unsatisfactory" on less than or equal to 20% of the competencies on their Final Preceptor Evaluation
- Successfully complete the EOR exam or re-exam with a score equal to or greater than one standard deviation below the currently published PAEA national mean
- Maintain a minimum cumulative grade point average of 3.0 on a scale of 4.0 quarterly
- Maintain standards of professional behavior in all activities in the PA Program
- Receive a "Pass" from preceptor for the SCPE (from grade received on preceptor evaluation or faculty's direct communication with preceptor)

SCPE Failure:

Failure of a SCPE may also result from any of the following.

- **EOR Examination:** Failure to obtain a score at or greater than one standard deviation below the national mean on the EOR exam requires that the student complete a remediation assignment and re-examination the following week, before the start of their next SCPE.
- **Preceptor Evaluation**: Not passing the preceptor evaluation
- **HIPAA violation:** Depending on the violation, the student may be subject to Progressions Committee for possible remediation, failure of the SCPE, and/or dismissal from the program.
- **Violation of professional standards:** If the student fails any professionalism component, they will fail the SCPE regardless of final SCPE grade from completion of SCPE coursework.
- Preceptors may dismiss or request removal of a student from a site for academic, professional, or ethical reasons.
- **Attendance:** Unapproved absence, poor attendance, or repeat insufficient SCPE logging or key measures.
- **SCPE Expectations:** Not meeting or fulfilling SCPE program expectations as defined in syllabi and above.

If a student fails a SCPE for any reason, and it is their first SCPE failure, they will repeat that SCPE in its entirety (assignments, patient logging, clinical hours, exam, etc.). Even if the student passes the repeat SCPE, that SCPE will still be counted as one SCPE failure; students may only repeat one failed SCPE. If a student fails the repeat SCPE OR a subsequent SCPE of another discipline, resulting in a total of two failures, they will be dismissed from the PA program.

The clinical site for the repeat SCPE is determined by the PA program.  Repeating the SCPE will result in delayed program completion. After repeating the entire SCPE, if the student fails the EOR exam a third time, the student will be dismissed from the PA Program.

Technical Skills and Procedures:

PA students are required to perform a variety of technical skills and procedures during the clinical phase of the program and document these skills in the program's practice education software platform. Students must demonstrate competency of these skills. Some skills are specific to a SCPE (that is, they must be completed during a specific SCPE), while other skills may be performed anytime during the clinical year (see Technical Skills Competency Form for more information).

After observing and evaluating the student perform the required skill or procedure, the preceptor, at his or her discretion, may deem the student competent. The preceptor's signature on the Technical Skills Competency Form indicates that the preceptor deems the student to be competent in that skill.

This may mean the student could do the procedure once, or the student may do the same procedure 10 times before the student reaches a competent level. Should the preceptor think a student requires more experience, the preceptor is not required to "sign off" and the student will be required to obtain additional experience.  If a student does not complete the required technical skills in a SCPE, the program has the right to choose the student's elective SCPE to achieve competency in these skills.

Student Evaluations of the Site & Preceptor:

Students complete an initial evaluation of the site and preceptor, which is reviewed by mid SCPE by clinical faculty. Student initial and final evaluations are also used to verify and document that the clinical site is allowing the student to fulfill program expectations. If a concern is raised on this evaluation, the student and/or preceptor may be contacted to determine if remediation of the site or preceptor is needed. Faculty may visit the site if necessary.

At the end of each SCPE, students must complete two (2) evaluations: *Student Final Evaluation of Preceptor/Facility\** and *Student Evaluation of Course*. These evaluations are reviewed by the Course Coordinator and if there are concerns, the student and/or preceptor will be contacted to discuss the issue. Faculty may visit the site if necessary.

*These evaluations are only viewed by appropriate COPHS personnel. If requested by the preceptor, we will release cumulative remarks anonymously.

Preceptor Evaluations of the Student:

The preceptor's evaluation of the student will be submitted electronically through the program's practice education software platform. Each preceptor is asked to complete two (2) evaluations: *Preceptor Initial Evaluation* and *Preceptor Final Evaluation* of the student.

The *Preceptor Initial Evaluation* will be used by the student and preceptor to gauge the student's progress at mid SCPE. Preceptors are asked to review this evaluation with the student, so the student has an opportunity to work on areas of weakness prior to the *Preceptor Final Evaluation.*

The preceptor may discuss the evaluations with the student prior to their submission, however it is the preceptor's right not to do so.  While it is the responsibility of the student to remind the preceptor to complete their evaluations, the student will not be penalized if the preceptor does not submit the evaluation(s).

Should the preceptor provide comment(s) or feedback that the student feels are not reflective of their performance, the student should not become argumentative with the preceptor. This is an opportunity for constructive feedback and the student should be prepared to handle the feedback professionally.  Inappropriate comments to or about a preceptor (either in written or verbal form) is unprofessional conduct and the student may be issued a Professionalism Concerns Report.

**Poor preceptor evaluation of student**: Although not a component of the student's final grade, students must also pass the Final Preceptor Evaluation to pass the SCPE/course. If a preceptor reports unprofessional student behavior, this may result in disciplinary action by the PA Program.

<u>PAEA End of Rotation Examinations</u>:

The PA Program administers the PAEA End of Rotation™ exams to cover the 7 core SCPEs. Each 120 multiple choice question exam is built on an extensive content blueprint and topic list developed by experienced PA educators and national exam experts. The exam interface provides a readily accessible standard lab values sheet, an individual time-remaining clock (based on student start time and ADA adjustments) and allows students to flag questions for later review.

At the end of each SCPE, the student will take the PAEA End-of-Rotation multiple-choice examination corresponding to that SCPE. The student is randomly assigned to take version 1, 2, or 3 by PAEA. The exam is based upon the blueprint and topic list provided by PAEA at https://paeaonline.org/assessment/end-of-rotation/content. Beyond the blueprint and topic list, PAEA does not provide any specific information (exam questions or answers) to students or faculty.

<u>EOR Exam Scoring & Remediation</u>:

See SCPE-specific syllabi for EOR Exam Scoring and Remediation. Any student needing to remediate an EOR examination will be required to complete a remediation assignment and re-examination the Monday immediately following an EOR examination regardless of program breaks. If other clinical year activities are scheduled on Monday, then the re-examination will be on Tuesday. If this Monday or Tuesday falls on a University holiday the re-examination will occur on the next business day. Students may need to alter personal plans during any break period if remediation is necessary to progress to the next SCPE. ***Remediation is a privilege, not a right***.

<u>Program Expectations</u>

<u>Clinical Competency</u>:

The program uses many tools to verify that each student is meeting expected learning outcomes for each SCPE, and that the site allows the student to accomplish these outcomes. Some of these tools include preceptor evaluations, student evaluations, site visits, SCPE assignments, and PAEA EOR exams.

Student competency is assessed throughout the clinical year via preceptor evaluations, technical skills, written assignments, site visits, examinations, and OSCEs. If a student does not meet program expectations for student competency, the program may give individual remediation assignment(s) as needed.

If a student is noted to have a deficiency in any area (written assignments, patient encounters, clinical hours requirement, examinations, technical skills, etc.) or the preceptor has concerns regarding student competency, the issue(s) will be discussed with the student and/or preceptor.

If needed, the student may be given a remediation assignment(s) and the PA program faculty will continue to monitor the student's progress. If needed, the program may require that the student complete an elective SCPE in area of deficiency.

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**STUDENT COMPLIANCE STATEMENT**

I acknowledge receipt of the SU COPHS Student Handbook and fully understand that it is my personal responsibility to abide by and maintain compliance with the policies, procedures, and guidelines. I further acknowledge and understand that I have the personal responsibility to speak directly to college administration (e.g., Dean, Associate Deans, Assistant Deans, Department Chairs, Program Directors, Directors, etc.) about any questions or concerns I have regarding information within the Sullivan University Academic Catalog or SU COPHS Student Handbook.

In addition, I acknowledge and understand that it is my personal responsibility to read and ensure my understanding of each course syllabus. If I have any questions or concerns regarding a course syllabus, these questions should be directed to the individual course coordinator(s) at the beginning of the academic term in which I am enrolled in said course.

Please click on or copy and paste the following link in your web browser to verify your understanding of the "Student Compliance Statement" and expectations of the SU COPHS.

https://tinyurl.com/sucophsstudentcomplianceaffirm

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