




**Trinity College of Nursing
& Health Sciences**
UnityPoint Health

Title: Corrective Action Policy	
Written by: Curriculum Committee	
Date Initiated: 4/2007	Date Revised: 4/2010; 4/2014; 4/2016; 2/2018; 4/2021; 2/2023
Approved by:  <hr/> Chancellor	Governing Board Approval: <hr/> 1/12/2016 Date

PURPOSE

Trinity College of Nursing & Health Sciences aims to “... develop health care professionals who promote the health of individuals, families, and communities” (College Mission). Quality health care education requires recognition of and adherence to established policies, procedures, regulations, practices and high standards of performance. The College has established policies to promote academic success and professional development of students, including but not limited to: *Academic Honesty and Integrity, Attendance, Dress Code for Students, General Standards of Behavior, Sexual Harassment, Social Media, Substance Abuse, and Campus Violence Prevention* policies. Individual programs have established program-specific policies, such as *Critical Objectives*, course-specific policies, clinical guidelines, and other policies which must be continuously upheld by students. Students are expected to adhere to the code of ethics of the profession for which they are being prepared. The College provides for protection of student rights and due process within policies such as the *Fair Treatment Policy for Students* as well as the annual *College Catalog* and *Faculty and Employee Handbook*.

The intent of this policy is to provide a confidential and progressive process for faculty, staff or administration (concerned party) to:

1. Document concern(s) regarding observed or reported student behavior(s) in violation of established policy,
2. Ensure appropriate investigation of the concern to determine whether it is substantiated by evidence,
3. Develop and monitor an appropriate improvement plan to promote accountability for expected behavior when a concern is substantiated,
4. Determine ongoing compliance with and effectiveness of the improvement plan, and,
5. Where ongoing concern(s) remain unresolved or **urgent** concerns are identified, to provide documentation supporting written referral for administrative review.

PROCESS

It is expected that most substantiated concerns will be resolved using a written *Plan for Improvement* as described in *Steps 1-6*. Substantiated ongoing student behavior that is not improving, is violent or threatening, or presents an imminent danger warrants urgent action and is referred to the Dean of Nursing & Health Sciences (academic concern) or Director of Student Services and External Relations (non-academic concern) using *Step 7 Written Notification of Administrative Referral*. The administrator receiving the referral will complete the *Step 8 Administrative Review and Recommendation*.

Trinity College of Nursing & Health Sciences retains the authority to remove or withdraw from a class, clinical, observation experience, or other college-sponsored activity/event, any student whose conduct may have a detrimental effect on themselves, the College, employees, patients, visitors, clients, or other students. An administrative recommendation for removal from a course or program is reviewed by the College Chancellor (*Step 9*).

Providing a signature acknowledges that the student has been advised of the concern in writing and agrees with the written documentation and plan of improvement **or** has provided a written statement of disagreement with explanation. Non-compliance with the Plan for Improvement will result in progression to additional step(s) as noted in the process. The student, concerned party, and appropriate administrator is provided with an updated copy of the documentation at each step of the process.

Documentation of Corrective Action Process

Step 1: Documentation of the concern.

Within 2 business days of observing or receiving a report of a student behavioral concern, document the concern below and inform the Dean of Nursing & Health Sciences (academic concerns) or Dean of Enrollment Management (non-academic concerns).

Documentation of Step 1:

Electronic or Written Signature:

Date:

Step 2: Inform the student of the concern and request a meeting

Within 1 business day of documentation of the concern, using college email with confidential setting and using delivery confirmation and read-receipt options, request a face-to-face meeting with the student to discuss a student conduct concern. Students are expected to respond within 2 business days and to provide periods of availability upon reading the message. Details of the concern are not to be included in the email. Identify a minimum of 2 college personnel to be present at the meeting, one being the concerned party and the second being the Director or Chair of the student's program. The student may request a support person to attend the meeting, who must be mutually agreed upon beforehand, and who is not allowed to participate in the meeting.

Documentation of Step 2:

Electronic or Written Signature:

Date:

Step 3: Face to face meeting

The student, optional support person, concerned party and Program Director/Chair will meet in a private meeting room to ensure confidentiality. Establish the purpose and agenda for the meeting, and that the General Standards of Behavior (policy) are expected. Present the concern to the student and document the student’s response. If the student agrees that the concern is accurate, the parties will proceed to Step 4 and create a written Plan for Improvement. If the student is not in agreement, provide an opportunity to document their disagreement with the concern in writing.

In the instance of a concern reported by another student or individual not employed by the college, if the student does not agree with the concern as presented, the student will present their perspective in writing for inclusion in this step of the report. The meeting will be ended, and the reporting individual will be informed that the concern has been addressed and resolved. If the reporting individual provides additional verifiable evidence to substantiate the concern, the concerned party will begin again at Step 1.

Documentation of Step 3 including notes from the face-to-face meeting:

Documentation of student’s response indicating agreement and willingness to create a plan for improvement (Step 4) or disagreement with the concern, with explanation:

Signature of Concerned Party:

Date:

Signature of Program Director or Chair:

Date:

Signature of Student:

Date:

Step 4: Create a mutually agreeable Plan for Improvement.

This step may take place immediately at the conclusion of Step 3 during the first face to face meeting or may be accomplished via confidential email communication or via a second face to face meeting, within 2 business days of the completion of Step 3 as mutually agreed upon.

Include relevant student resources such as the Student Assistance Program, Student Success Center, Tutoring, Library services, and Academic Advising as appropriate. Include clear and measurable expectations of expected improvement and a mutually agreeable date to evaluate improvement. Implement the Plan.

If an additional instance or instances of the same behavior are substantiated prior to the agreed upon date of evaluation, the concerned party will proceed directly to Step 6 and request a face-to-face meeting regarding the ongoing concern within 1 business day. The student is expected to respond to the meeting request upon receipt.

Documentation of Step 4 Plan for Improvement including date of evaluation:

Signature of Concerned Party:

Date:

Signature of 2nd person (Program Director or Chair):

Date:

Signature of Student:

Date:

Step 5: Evaluate and document compliance with and effectiveness of the *Plan for Improvement*

If the concern has been fully resolved, document the resolution below and provide a copy of the documentation to the student. The completed form will be kept in a confidential file with the Dean of Nursing & Health Sciences (academic concern) or Dean of Enrollment Management (non-academic concern). If there has been improvement but the concern is not fully resolved, proceed to Step 6, evaluate and revise the plan as mutually agreed upon, including a date for re-evaluation for full resolution.

Step 5 Documentation:

Signature of Concerned Party:

Date:

Signature of 2nd person (Program Director or Chair):

Date:

Signature of Student:

Date:

Step 6: Revision, continuance, and re-evaluation of effectiveness of the Plan for Improvement. Used as described in Steps 4 and 5.

Continue the Plan or revise as needed with a second evaluation date. At the conclusion of Step 6, document the outcome of the Plan for Improvement. If the concern has been fully resolved, document this below. If the concern has not been fully resolved, document the evidence of the ongoing concern and proceed to Step 7.

Step 6 Documentation:

Signature of Concerned Party:

Date:

Signature of 2nd person (Program Director or Chair):

Date:

Signature of Student:

Date:

Step 7: Written Referral for Administrative Review

If the concern has not been resolved at the conclusion of Step 6 or if substantiated new, urgent or recurring behavior is documented, the matter is referred to the Dean of Nursing & Health Sciences (academic concern) or Dean of Enrollment Management (non-academic concern).

Written referral to the appropriate Dean or Director must include all prior documentation of the process to date, where applicable.

Step 7 Documentation:

Signature of Concerned Party:

Date:

Signature of 2nd person (Program Director or Chair):

Date:

Step 8: Administrative Review and Recommendation

The administrator receiving the referral will review all documentation and meet with the concerned party and student as deemed appropriate by the administrator. The administrator will determine an administrative recommendation for final resolution of the concern and communicate the administrative recommendation to the involved parties. The Administrative Review will be completed within 5 business days. If a recommendation is made to remove a student from a course or program of study, the decision will be reviewed by the Chancellor of the College prior to implementation.

Step 8 Documentation:

Administrative Signature:

Date:

Step 9: Chancellor Review of Administrative Recommendation

The Chancellor of the College will review all documentation and meet with concerned parties as deemed appropriate by the Chancellor within 5 business days. If the Chancellor concurs with the administrative review and recommendation, the Chancellor will direct the Dean of Nursing & Health Sciences to implement the recommendation.

Step 8 Documentation:

Chancellor Signature:

Date:

Plan for Improvement

Description of expectation of improvement and recommended support resources as applicable	Date of 1 st Evaluation	1 st Evaluation (Met, Partially Met, Not Met*)	Date of 2 nd Evaluation	2 nd evaluation (Met, Partially Met, Not Met*)

***Key for Evaluation:**

Met: Improvement has been consistently demonstrated between the implementation of the Plan for Improvement and the Date of Evaluation. If all expected behaviors are met, the concern is documented as resolved.

Partially Met: Improvement has been progressively but not fully demonstrated between the implementation of the Plan for Improvement and the 1st Date of Evaluation. Refer to Step 6.

Not Met: Improvement has not been progressively demonstrated by the 2nd date of evaluation **or** concern has increased by a new instance of substantiated behavior at any time. Refer to Step 7.