SHRS Impaired Student Policy

The School of Health and Rehabilitation Sciences (SHRS) has the responsibility to educate students to be responsible professionals prepared to provide quality services. Whether in the classroom, the clinical setting, or a research setting, students are expected to demonstrate professional behaviors aligned with respective Scopes of Practice, Codes of Ethics, and Technical Standards.

Safety is a critical component in the classroom, the clinical setting, and the research setting. The utmost responsibility of the University, the School, and the faculty is the protection and well-being of individuals in the classroom, the clinical setting, and in research, all of which supersedes the educational needs of the student to participate in a degree program.

When a student's psychological and/or physical condition has impaired their ability to participate and perform in the classroom, clinical setting, and/or research, the student will be asked to leave the area. As discussed below, the student will be given the opportunity to hear the reasons for the removal, to discuss the incident with a representative from the school and participate in a treatment plan if appropriate. Any expenses incurred because of assessment, treatment, transportation, and monitoring are solely the responsibility of the student.

The existence of a health or personal problem for a student is NOT synonymous with impairment under this policy.

In addition to this policy, the University of Pittsburgh has developed resources to assist faculty and staff with distressed students. The Faculty and Staff Guide to Helping Distressed Students is available as well as this document from student affairs.

When a partner site has a policy regarding fitness for duty, that policy will be followed in addition to the School of Health and Rehabilitation Sciences policy.

Purpose

This Policy is designed to:

- Identify and adequately address the needs of students with impairment
- Enhance awareness among faculty and students of the typical characteristics of an impaired student to identify students in need of help
- Protect patients from risks associated with care given by an impaired student
- Promote educational programs and other methods of primary prevention of impairment of all students
- Provide a mechanism for a fair, reasonable and confidential assessment of a student who is suspected of being impaired, including the development of a plan to address the student's academic progress
- Take administrative actions as necessary

Definitions

For the purposes of this policy, impairment is defined as a physical or mental condition, substance abuse, chemical dependence or any other circumstances that interferes with the student's ability to engage safely in patient care or clinical practice.

Reporting Possible Impairment

- a. Self-reporting Any student who is concerned that they might be impaired or likely to become impaired should contact their respective Program Director to formulate a plan of action to secure appropriate assistance and resources.
- b. Report by others Any person (e.g., student, faculty, staff, clinical partner, or administrator) who has reasonable cause to suspect that the ability of a student to safely perform their clinical duties may be impaired shall, in good faith, report the student to the respective Program Director.
- c. If a report is determined to be made in bad faith or malicious, the reporting party will be identified to the Dean and may be subject to action under applicable institutional policies and/or laws and regulations.

Process

- a. When there is concern that a student is impaired, a faculty member may remove the student from the applicable area. The student shall be informed of temporary suspension from clinical practice. If warranted by the student's condition, the clinical instructor, campus security, or a representative from the school may accompany the student to the nearest healthcare facility for emergency treatment.
- b. When there is concern that a student poses a risk of harm, an immediate referral will be made to an appropriate service provider. If the behavior has occurred in the classroom, clinic, or research setting, the student will be temporarily removed from that setting.
- c. Faculty involved in the identification of a possible impaired student must initially meet with the student and/or person who is reporting the student.
- d. A subsequent meeting(s) will occur between the student, faculty involved in the identification of the problem, and Program Director. The documented and observable evidence of impaired performance will be reviewed with the student, and the student will have an opportunity to provide an explanation.
- e. One representative from the University community chosen by the student may accompany the student to any meeting but they may not stand in place of the student during the discussions. Such representative may not be legal counsel.
- f. During the meeting(s) an individualized plan will be discussed and developed with the student that considers the impact of the student's behavior on the safety of the environment. During the meetings(s) the student may be asked to sign an Authorization for the Disclosure of Protected Health Information and may submit relevant medical records from their treating physician. If the student agrees with the recommended plan, the student will proceed with implementation.
- g. If agreed to, the student must seek and select a treatment provider when recommended by the Program Director in a timely manner (not more than 2 weeks). Costs of treatment will be the student's responsibility.

- h. If the student has been referred for treatment, the student will be permitted to return to practice only on the specific recommendation of an appropriate treatment provider that the student is capable of safe and skilled performance in accordance with School or Programs Scopes of Practice, Codes of Ethics, and Technical Standards.
- i. The student has the right to refuse this assessment, treatment, and further monitoring. In which chase the student may file an appeal [see link below].
- j. The school may not permit a student to return to practice without certification from a recognized healthcare provider that he/she has completed treatment, is undergoing treatment, or does not need treatment, and is fit for duty.

Monitoring

a. The student successfully completing the treatment period will be monitored by the Program Director or faculty designee for progression in the degree program.

Leave of Absence and Re-entry

- a. An impaired student will be allowed a leave-of-absence in accordance with the policy outlined in the SHRS Student Handbooks.
- b. If the student requests a medical leave-of-absence, procedures for the leave and re-entry will be followed as outlined in the SHRS Student Handbooks.

Unresponsiveness to Intervention

a. If the student does not responsibly cooperate or respond to the plan created by the Program Director or faculty designee, the student may be required to take a leave of absence, be suspended, or be dismissed. Students can appeal this decision using the SHRS appeals process

Confidentiality

a. Confidentiality for every student is to be maintained throughout the process consistent with the University's FERPA Policy and Procedure.

File

a. All files will be kept by the student's respective department/program after the student graduates in accordance with university policy.