**BSN Remediation Guidelines**

The remediation process protects the faculty and the student by identifying knowledge deficits early in the educational process (both didactic and clinical competencies). It provides faculty a framework to develop a systematic plan for a student to engage in learning strategies and/or develop proficiency in order to be a successful professional.

Remediation is a way to improve student competency and facilitate student development toward the characteristics of the graduate. However, students may view remediation as punitive and be resistant and angry. Most students have never experienced a formal remediation process. It is the responsibility of the faculty to project to students the value of remediation for their educational success.

Remediation provides the BSN Program with an objective process to dismiss students who are unable to successfully remediate, refuse to improve their performance, or refuse to modify their behavior.

Successful remediation starts with a systematic and well defined plan. The process is embedded within the context of all program components (didactic, laboratory, and clinical) and it includes the use of a learning agreement.

Identify the issues early. The evaluation of the student by clinical faculty should identify students who lack clinical skills and relay this information to the student’s advisor. Didactic faculty must keep in communication with advisors regarding a knowledge deficit. The faculty has a moral, ethical and legal obligation to insure that our graduates are competent as entry level registered nurses.

The learning agreement is paramount to the implementation of any successful remediation. It should be used in all components of the program. The learning contract empowers the student and the faculty to work together as equal shareholders in the learning process.

<http://www.uknow.gse.harvard.edu/leadership/LP101-407.html>

The above link is to an article from the Harvard Graduate School of Education

General Guidelines for remediation/learning agreement

1.) First, know the nursing school’s policies and procedures and consistently follow them.

2.) The syllabus is the agreement between the student and the faculty of record. Expectations for the students, along with the consequences for below acceptable standards in academic performance or unacceptable behavior need to be spelled out. Please put in your syllabus, after academic integrity a reminder that students are responsible to follow the guidelines in the Student Handbook particularly requirements for patient care and professional behavior during clinical hours.

3.) Evaluate possible causes of the problem. This may include deficits in critical thinking, accountability, responsibility, communication, teamwork, safety and collaboration.

4.) Identify the root of the deficit: student, faculty or educational process. Sometimes the student and faculty are equally at fault.

3.) Patient safety is imperative and should never be compromised. If a student is unprepared, negligent or imprudent, then immediately remove the student from the clinical area.

4.) Deal with unacceptable behavior early. Problematic behavior that is ignored by the faculty tends to get worse and can spread to other students in the group. If unacceptable behavior is addressed early, it sometimes can be successfully remediated. This pertains to the classroom as well as the clinical setting.

5.) Address the specific behavior and explain why it is unacceptable. Calmly spell out the consequences of the student’s problematic behavior, especially if the behavior is on-going. Stay on target and do not digress into other issues. Never demean, threaten or devalue the student or use derogatory terms. Be objective and consistent. Do not allow emotions to cloud your judgment.

6.) Model professional behavior at all times and cultivate an atmosphere of mutual respect.

7.) Consistent with rule 4723‐5‐12‐B of the Ohio Administrative Code, the policy on student conduct engaged in interaction with clients in any clinical setting are in the Student Handbook and in the clinical faculty orientation handouts.

8.) Document, document, document!! Keep a detailed paper trail of your interactions with the student. The paperwork is proof of attempts at remediation and retention, as well as student acknowledgement of the disciplinary process. The detailed record will increase your chances of successfully defending your actions in an appeals process.

 9.) A copy of the remediation plan is given to the student and the faculty keeps the original.

 After the remediation is complete (evaluation and final outcome and signatures), the

 student is given a final copy, the advisor is given a copy and the original goes in the student

 file.

Faculty

Remediation must start early! The information below is in the student’s handbook.

**MID‐TERM GRADES**

In the BSN and Graduate Entry Programs, students whose performance is deemed borderline or failing after mid‐term may be granted additional time in which to satisfactorily meet course objectives. Students given additional time will be expected to cooperate with faculty in developing a learning plan for improving performance. Additional time to complete course objectives is granted at the discretion of the faculty of record. Students whose performance at or before mid‐term is borderline or failing, will be advised in writing by the faculty at mid‐term, or sooner, if necessary. When performance is noted as borderline or failing after mid-term, students will also be advised in writing by the faculty.

**EVALUATION**

Each student’s progress is reviewed periodically during and at the end of each semester. Evaluation is based on the student’s performance on assignments, on examinations, in clinical laboratories (when applicable) and the clinical setting (when applicable), as well as on other evidence in accord with the objectives of the curriculum. If a student’s performance is judged to be borderline or failing during a course, a plan for improving performance is initiated. At the close of each semester, the student’s academic records are reviewed and a determination made as to whether there is sufficient improvement to pass the course.

**Plan for Improving Performance**

**Development of Plan to Improve Performance**

* Students who have been notified of borderline or failing performance (didactic/clinical) are expected to meet with the course instructor(s) to establish and sign learning agreement to improve performance.
* The learning contract will include a description of the performance problem, measurable behaviors to be demonstrated and periodic re‐evaluation of performance.
* The learning agreement should be signed and dated by the student and course professor(s).

**Summary of Performance**

* Students, for whom plans for improvement have been developed, will receive a written summary assessing achievement of the specific expected outcomes in addition to their regular performance evaluations. This summary will be signed and dated by the student and instructor and attached to the learning agreement.

Effective immediately

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