2026

School of Medical Laboratory Science

Student Handbook

4401 Wornall Road
Kansas City, MO 64111
816-932-3395

saintlukeskc.org/medical-laboratory-science-program

✠ Saint Luke's™
HOSPITAL OF KANSAS CITY

Academic Affiliates

Saint Luke's Hospital School of Medical Laboratory Science is affiliated with the following academic institutions:

Fort Hays State University
Kansas State University
Missouri Southern State University
Missouri Western State University
Northwest Missouri State University
Pittsburg State University
Rockhurst University
University of Central Missouri
University of Missouri – Kansas City
University of Wisconsin – Oshkosh

Clinical Affiliates

Saint Luke's Hospital School of Medical Laboratory Science has no affiliations with other institutions for the purpose of providing alternate clinical sites for education of MLS students. All clinical rotations take place within Saint Luke's Hospital Department of Pathology, which operates as a hospital and full-service reference laboratory. If Saint Luke's Hospital Laboratory cannot provide planned learning activities, course instructors are responsible for arranging a comparable demonstration of essential learning experiences.

Non-Discrimination Policy

Saint Luke's Hospital does not discriminate based on sex, race, religion, age, handicap, sexual orientation, or national origin in the administration of its educational policies. Saint Luke's is an Equal Opportunity Employer.

Accreditation

The history of the first formal accrediting body in the medical laboratory field dates from 1933, which marked the beginning of the Board of Schools of the American Society of Clinical Pathology (ASCP). The Board was responsible for establishing the academic course requirements and the essential requirements for the hospital educational component of any approved program in Medical Technology. The Board of Schools existed until December 1973, when a new independent agency, the National Accrediting Agency for Clinical Laboratory Sciences (NAACLS), assumed the duties of the Board.

NAACLS includes representatives from ASCP, American Society for Clinical Laboratory Science (ASCLS), other laboratory professions, the education community, and the public on its board. NAACLS reviews program requests for accreditation and re-accreditation by reviewing reports and conducting site visits of each School.

Saint Luke's Hospital School of Medical Technology was on the original ASCP Board of Schools list of seventy-seven schools in 1933 and published in 1936 by the American Medical Association. Saint Luke's Hospital has maintained continuous accreditation since that time. Over the years, Saint Luke's has changed the program name several times. In 1990, Saint Luke's name changed from the School of Medical Technology to the Program in Clinical Laboratory Science, to reflect a national trend away from the general phrase M*ed Tech* which is often confused with Emergency Medical Technician (EMT) and Certified Medication Technician (CMT). In 2017, the name changed to Saint Luke's Hospital Medical Laboratory Science Program for continuity with the ASCP Board of Certification. The final change was in 2024, to the Saint Luke's Hospital School of Medical Laboratory Science to establish continuity with the university/college environment that refers to single disciplines of study that provide academic credit as schools.

NAACLS designates and approves program officials for the Saint Luke's Hospital School of Medical Laboratory Science. **Alexander Braun, MD,** certified in Anatomic and Clinical Pathology as well as Blood Banking and Transfusion Medicine by the American Board of Pathology, serves as **Medical Advisor**. **Brenna Ildza, MHS, MLS(ASCP)SH, PBT** is the **Program Director.** The Program Director holds academic appointments at affiliated colleges and universities.

Saint Luke's Hospital School of Medical Laboratory Science is accredited by the National Accrediting Agency for Clinical Laboratory Sciences (NAACLS), 5600 N. River Road, Suite 720, Rosemont, Illinois 60018-5119, (773) 714-8880, info@naacls.org

Mission Statement

In keeping with Saint Luke's Hospital's teaching mission, the School of Medical Laboratory Science integrates cognitive, psychomotor, and affective learning to provide an educational experience that enhances scientific, technical, and professional development of Medical Laboratory Scientists.

Goals

Saint Luke's Hospital School of Medical Laboratory Science assumes responsibility for providing educational facilities, instructors, and learning experiences in an environment that enables students to develop as professional and responsible members of the health care community.

Saint Luke's Hospital School of Medical Laboratory Science provides benefits to the Hospital, the Health System, and the health care community that include:

- ❖ Providing scientific and technical instruction to students who aspire to become professionally certified as Medical Laboratory Scientists

- ❖ Maintaining optimal MLS staff levels for the Hospital, Health System, and Community

- ❖ Decreasing MLS recruitment costs and open MLS position time

- ❖ Providing MLS staff with opportunities to teach and thus, to learn

- ❖ Maintaining the continuity and legacy of Saint Luke's Hospital School of Medical Laboratory Science which has been in continuous operation since 1933

Objectives

Saint Luke's Hospital School of Medical Laboratory Science provides the necessary learning experiences for students to:

- ❖ Obtain a Certificate of Completion by meeting criteria for progression and completion of the program

- ❖ Demonstrate ability to perform as a Medical Laboratory Scientist at entry level as defined by NAACLS "Standards and Entry Level Competencies"

- ❖ Successfully challenge the ASCP Board of Certification (BOC) Medical Laboratory Scientist (MLS) exam

Entry Level Competencies

Goals are aligned with Saint Luke's Hospital Mission, Goals, and Core Values, in addition to NAACLS competencies for a Medical Laboratory Scientist. All serve to guide the development of the SLH program curricula.

Upon completion of the Saint Luke's Hospital School of Medical Laboratory Science, the graduate will be able to:

❖ develop and establish procedures for collecting, processing, and analyzing biological specimens and other substances
❖ perform analytical tests on body fluids, cells, and other substances
❖ integrate, relate, and recognize discrepancies in complementary data generated by various clinical laboratory departments
❖ confirm abnormal results, verify quality control and quality assurance measures, and institute proper procedures to ensure and maintain accuracy and precision
❖ establish and perform preventive and corrective maintenance of equipment and instruments, and identify appropriate sources for repair
❖ develop, evaluate, and select new techniques, instruments, and methods in terms of their usefulness and practicality within the context of personnel, equipment, space, and budgetary resources
❖ demonstrate professional conduct and interpersonal skills with patients, laboratory staff, other health care professionals and the public, as assessed through Saint Luke's Health System Core Values
❖ establish and maintain continuing education as a function of growth and maintenance of professional competence
❖ provide leadership in educating other members of the health care environment and community
❖ exercise principles of management, safety, and supervision
❖ apply principles of educational methodology
❖ apply principles of laboratory information systems (LIS)
❖ describe the role of a Medical Laboratory Scientist in the healthcare environment.

Upon graduation and initial employment, the Medical Laboratory Scientist will demonstrate entry level competencies in the above areas of professional practice. The school periodically solicits graduates and employers to determine adequacy in preparing students to meet these competencies in a work environment.

Course Descriptions

Me 450: Clinical Microbiology (6 credit hours)   **Angela Miller, MLS(ASCP)cm**
Isolation and identification of microorganisms, including bacteria, viruses, rickettsiae, parasites and fungi, that cause disease; clinical interpretation of tests and correlation of results with patient condition. Follows general college microbiology and/or pathogenic microbiology.

Me 455: Clinical Chemistry (6 credit hours)   **Jenny Angelo MLS(ASCP)cm**
Quantitation of biochemicals correlating to patient condition; analytical techniques; manual test procedures; operation, troubleshooting and validation of results from sophisticated instrumentation using computer hardware and software. Follows a minimum of sixteen semester hours of college chemistry, including coursework in biochemistry.

Me 460: Clinical Hematology (6 credit hours)   **Mariam McAdams, MLS(ASCP)cm**
Study of blood and blood cell abnormalities, with correlation of instrument and microscope findings to patient condition; evaluation of blood clotting and coagulation mechanisms, including the monitoring of anticoagulant therapy; chemical analysis and identification of cells or formed elements in bone marrow, spinal fluid, urine, and other fluids.

Me 465: Immunohematology (4 credit hours)   **Elizabeth Jones, MLS(ASCP)BB**
Analysis of the relationships between donor blood components and blood recipients; introduction to red blood cell antigen systems; antigen and antibody detection; prevention of transfusion incompatibilities; assessment of patient transfusion-related occurrences.

Me 470: Clinical Immunology (4 credit hours)   **Melinda Mills, MA, MLS(ASCP)MBcm**
Immunofluorescence, enzyme immunoassay, dilutions, molecular diagnostics, radioimmunoassay, and other immunochemistry, using sophisticated instrumentation with current computer hardware and software.

Me 475: Topics in MLS I (2 credit hours)   **Angela Miller, MLS(ASCP)cm,**
                                                & Brenna Ildza, MHS, MLS(ASCP)SH, PBT
Clinical workshops on a variety of topics including phlebotomy, parasitology, mycology, flow cytometry and mycobacteriology.

Me 480: Topics in MLS II (2 credit hours)   **Brenna Ildza, MHS, MLS(ASCP)SH, PBT**
Professional seminars, guest lectures, and planned visits with other health professionals; topics include clinical case studies, medical ethics issues, hospital and laboratory management, laboratory information systems, communication, education, research and development, and career entry options. Course culminates in a Professional Topics journal with articles chosen, researched, written, and produced by students.

Observational Requirements

The student must demonstrate adequate vision to:
- Observe laboratory procedures in which biological samples including blood, bone marrow, body fluids, culture materials, tissue sections and cellular specimens are processed and handled
- Characterize color, odor, clarity, and viscosity of biological samples, reagents, or chemical reactions
- View biological samples through a microscope, differentiating color, shading, morphology, shape, and fine structure of stained and unstained preparations
- Read and comprehend test orders, policies, procedures, tube labels, instrument control panels, computer screens, instrument printouts, test results, charts and graphic materials displayed in print or on a video monitor
- Judge distance and depth.

Movement Requirements

The student must demonstrate sufficient strength, mobility, dexterity, and fine motor skills to:
- Move freely and safely within the laboratory and in patient areas when performing phlebotomy
- Comfortably access patients in seated or lying positions to collect blood samples
- Reach laboratory instrument, equipment, bench tops and supplies that may be on shelves higher than eye level
- Manipulate laboratory equipment (test tubes, pipets, slides, cover slips, inoculating loops) and adjust instruments to perform procedures
- Perform moderately taxing continuous physical work, often requiring prolonged sitting or standing
- Travel independently to selected sites for practical and seminar experiences.

Intellectual Requirements

The student must:
- Possess these intellectual skills: comprehension, measurement, mathematical calculation, reasoning, integration, analysis, comparison, self-expression, and criticism
- Be able to exercise sufficient judgment to recognize and correct performance deviations.

Communication Requirements

The student must be able to:
- Demonstrate effective written and oral communication skills in the English language
- Read and comprehend technical and professional materials (textbooks, journal articles, handbooks, instruction manuals)
- Follow verbal and written instructions to perform laboratory procedures correctly and independently
- Clearly instruct patients prior to specimen collection
- Converse with patients effectively, confidentially, and sensitively
- Communicate with faculty members, fellow students, staff, and other health care professionals in written and verbal formats
- Independently prepare papers and laboratory reports
- Take paper, computer, and laboratory practical examinations

Behavioral Requirements

The student must be able to:
- Manage time and systematize actions to complete professional and technical tasks within realistic constraints
- Effectively utilize emotional health and intellect to exercise appropriate judgment
- Provide professional and technical services while experiencing task-related stresses in a distracting environment (high noise levels, crowding, complex visual stimuli)
- Be flexible and adapt to professional and technical changes
- Recognize potentially hazardous materials, equipment and situations and proceed safely to minimize risk of injury to patients, self, and nearby individuals
- Adapt to working with unpleasant biological materials
- Support activities of fellow students and staff to promote a team approach to learning, task completion, problem solving, and patient care
- Be honest, compassionate, ethical, and responsible; be forthright about errors or uncertainty; critically evaluate own and others' performance; offer and accept constructive criticism; seek out ways to improve

Note: These lists are not inclusive of all functions.

MLS Entry Level Competencies

Behavioral Objective	Core Value MLS Job Description
Cognitive	
Operate and maintain instruments	Quality/Excellence
Find and correct technical problems	Quality/Excellence
Perform and evaluate quality control data	Quality/Excellence
Evaluate validity of test results	Quality/Excellence
Complete computer data entry accurately	Quality/Excellence
Apply scientific theory to bench work	Learning/Innovation
Correlate patient data with test results	Learning/Innovation
Psychomotor	
Perform tests/assays with entry-level speed	Quality/Excellence
Use careful, precise technique	Quality/Excellence
Require minimal direction after training	Quality/Excellence
Complete paperwork legibly	Quality/Excellence
Affective	
Adapt to necessary schedule changes	Teamwork
Communicate effectively with others	Teamwork
Willingly assist others	Teamwork
Willingly stay late to finish assigned work	Teamwork
Accept direction/suggestions and strive to improve	Teamwork
Maintain confidentiality of exams and testing materials	Quality/Excellence
Follow directions and procedures	Quality/Excellence
Adhere to safety standards	Quality/Excellence
Display absolute integrity in patient testing	Quality/Excellence
Read assigned materials	Customer Focus
Adhere to Hospital and School policies and procedures	Customer Focus
Treat others with courtesy and respect	Customer Focus
Display appropriate telephone manners	Customer Focus
Develop and maintain professional demeanor	Customer Focus
Put patient welfare above personal convenience	Customer Focus
Maintain confidentiality of patient records	Customer Focus
Meet lecturer on time at assigned location	Customer Focus
Independently seek out information and resources	Learning/Innovation
Take on extra tasks as time permits	Learning/Innovation
Participate in lectures/discussions	Learning/Innovation
Use supplies in a cost-effective manner	Resource Management
Use down time constructively	Resource Management
Prioritize workflow efficiently	Resource Management
Work within own limitations	Resource Management
Complete assigned work on time	Resource Management
Arrive when scheduled	Resource Management
Adhere to assigned lunch and break schedules	Resource Management
Take responsibility for making up missed learning	Resource Management

Safety

The potential hazards in a medical laboratory warrant the attention of everyone who enters the environment. Safety of patients, staff and students is always our primary concern. It is the joint responsibility of the Program Director, MLS Faculty, and students to ensure a safe working environment.

The professional development component of the program includes developing an attitude of safety and an awareness of hazards. Students always follow safety procedures outlined in the Laboratory Safety Manual. Students who choose not to follow safety procedures may be subject to disciplinary action.

During their first week in the Laboratory, students will receive instruction in safety policies and procedures and participate in a mock fire drill. Clinical sections may also provide specific safety instructions.

Standard Precautions

> **Standard Precautions is a method of infection control in which all human blood and body fluids are treated as if known to be infectious for HIV, HBV, and other Bloodborne pathogens. Students must handle all patient specimens, instruments, and reagents as if they are capable of transmitting disease.**

OSHA Regulations

> The Occupational Safety and Health Administration (OSHA) is a government organization that issued the Occupational Exposure to Bloodborne Pathogens Standard in December 1991. The Standard is designed to protect workers from exposure to bloodborne pathogens by detailing ways to reduce the risk of contracting a bloodborne disease on the job. This Standard also affects students because they may be exposed to bloodborne pathogens during learning activities.

> OSHA Standards require the Laboratory to provide personal protective equipment (PPE) for each person at no cost to them. Personal protective equipment prevents blood or other potentially infectious materials from contact with an individual's clothes, skin, eyes, or mouth.

Personal Protective Equipment (PPE) and Engineering Controls

Students must comply with all SLHS guidelines for wearing PPE, including supplemental guidelines developed in response to unusual events or pandemics. In general, PPE requirements for laboratory staff also apply to MLS Students. Students who choose not to adhere to PPE requirements may be subject to disciplinary action.

> **Lab coats**
>> Saint Luke's Laboratory provides lab coats at no cost, in sizes to fit each person properly. Closed, knee-length lab coats with long sleeves must be worn in contaminated work areas. When worn correctly, lab coats provide an adequate barrier from splashes, sprays, or droplets of body fluids and hazardous materials. Lab coats are worn in work areas and must not be worn in public or non-contaminated areas. Lab coats do not protect against soak-through from body fluids and hazardous materials.

> **Gloves**
>> Based on job category and task assessments, all laboratory workers must wear gloves that cover the wrist area while in contaminated areas, including during phlebotomy. Disposable, single use, properly fitted gloves must be changed when they become contaminated, torn, or punctured. Gloves should be removed inside out aseptically, and hands must be washed after removing gloves. Disposable gloves are not reusable. Gloves are provided at no cost. Saint Luke's Hospital only uses powder free/latex free gloves. Gloves do not prevent punctures from needles.

> **Mask/eye protection and face shields (engineering controls):**
>> Masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or counter-mounted face shields, should be worn or utilized whenever splashes, sprays, or droplets of body substances may result in eye, nose, or mouth contamination.

Cleaning, laundering, disposal, and repair of PPE:

> Students are not responsible for cleaning, laundering, and/or disposal of personal protective equipment. Laundry bins are available for dirty lab coats for cleaning. Discard disposable personal protective equipment in red plastic lined biohazard tubs when contaminated with blood or body fluids. Repair or replace personal protective equipment as needed to maintain effectiveness.

Student Policies

Personal Appearance
1. MLS students must meet general rules for all Hospital employees per the Dress Code/Professional Appearance Policy (Appendix A).
2. Students are responsible for following the Policy.
3. Laboratory coats provided and laundered by SLH.
4. Scrubs and business casual are appropriate attire.
5. No jeans, sweats, tee shirts or similar casual wear allowed.

Professional Conduct
1. MLS students must meet general rules for all Hospital employees per the Rules of Conduct and Disruptive Behavior Policies (Appendices B and C).
2. Students are responsible for following the Policy.
3. Academic integrity is expected. Academic dishonesty is grounds for disciplinary action, up to and including expulsion. See academic integrity below.
4. Students are accountable for initiating or participating in inappropriate workplace conversations, including, but not limited to politics, religious beliefs, salaries, and other sensitive or confidential topics.
5. The Program Director will manage policy infractions, in consultation with the Medical Advisor and/or System Director, Pathology Services.
6. Severe infractions of the Policy may warrant consultation with Risk Management and, for 3+1 students, the student's advisor at the affiliated college or university. See also Remediation and Termination Guidelines.

Academic Integrity

The school is committed to assuring ethical behavior by all its members, towards all its members, and all members are expected to share in this commitment to ethical behavior. Academic dishonesty refers to any act that is intended to produce an academic assessment that is not commensurate with an individual's performance, or any act that is intended to unfairly assist or hinder an individual's academic efforts. A student who has committed an act of academic dishonesty is an offense against the school and has failed to meet a basic requirement of satisfactory academic performance. This is a basis for disciplinary action, up to and including expulsion.

Identification

Students are issued a photo identification nametag for parking and identification while on the Hospital campus. If lost or damaged, there is a $25 charge for replacement. Return nametags following School completion.

Professional Societies

MLS students are introduced to and encouraged to join a professional society such as ASCP and ASCLS, when student dues are nominal. Membership information is available on society websites, and dues are the responsibility of the student.

Continuing Education

MLS students are encouraged to attend continuing education offerings in the Laboratory and throughout the Health System. The Laboratory holds monthly educational presentations and laboratory sections occasionally provide additional educational opportunities. There may be an opportunity to attend a laboratory conference as well. MLS Faculty or the Program Director will notify students of required attendance.

Student Health

Students show evidence of good health before beginning the program, including medical information or history requested by the School Medical Advisor or Employee Health Services. A health assessment, including drug screen and proof of immunization status, ensures that students meet essential requirements for admission to and completion of the program. Students also receive information about a *recommended* immunization series for protection against Hepatitis B and a meningococcal vaccine.

Health Insurance

Students must maintain health insurance while in the school. Saint Luke's MLS School does not offer or provide health insurance. Most universities offer health insurance through student plans. Any hospitalization or medical expenses not covered by the student's own policy will be the student's expense.

Confidentiality of Health Information

Students receive training in Hospital policies relative to the privacy of Protected Health Information (PHI). Students must sign the Saint Luke's Health System Pledge of Confidentiality for Protected Health Information before beginning clinical rotations.

Smoking

Saint Luke's Health System does not permit smoking inside the Hospital or on the Hospital campus. This includes hospital grounds adjacent to the main campus. There are no exceptions to this rule.

Drug Free Workplace

The School of Medical Laboratory Science voluntarily participates in efforts to ensure a drug-free workplace. Students must pass a drug screen as a condition for admission.

Liability Insurance

The Hospital's liability insurance carrier covers students at no charge when performing procedures within the Hospital or on official Hospital business. Students can purchase additional coverage but is not required.

<p align="center">*Student Policies*</p>

Student Classroom Policies:
- The student classroom is a **quiet work/study area** that allows drinks and snack foods; lunch and conversation breaks occur in another location (breakroom/cafeteria).

- Computers are available in the student classroom for **specified MLS School learning assignments**. See **Acceptable Use of Information Technology, Systems, and Services** (Appendix D) policy for more detail.

- The student classroom is open during the day. Although it is in a secured area, students should not place purses or valuable personal items in areas visible from the hallway. Keep valuables in lockers or out of sight.

Lockers and Hospital Property

Students are assigned lockers; only Hospital locks are permitted. The Hospital is not responsible for ensuring safety of private property belonging to students or staff. Lockers are Hospital property; it reserves the right to conduct searches without notice.

Computer Use

The MLS School utilizes Canvas for the learning management system and requires having a **personal device (laptop or tablet)** available every day of attendance.

The hospital provides computers with internet access for **education and business purposes only**. Personal email may not be accessible on a Saint Luke's device. Use of internet resources is not anonymous; each log-on is traceable to user S or A numbers. Computer and internet use must be consistent with Hospital policy and is monitored. **Inappropriate use of computers will result in disciplinary action; this includes all non-educational or non-business use.**

The MLS School communicates with students via personal email accounts. Students are responsible for monitoring email daily and assumed to have received information sent by email.

Social Media

Students must adhere to the Saint Luke's Health System Social Media policy (Appendix E). The Program Director will manage policy infractions in consultation with the Medical Advisor and Director of Pathology Services. Violations are grounds for disciplinary action, up to and including expulsion. Severe infractions of the Policy may warrant consultation with Risk Management and, for 3+1 students, the student's advisor at the affiliated college or university. See also Termination Guidelines.

Student Policies

Attendance

Clinical course work occurs in an eleven-month schedule. Core attendance hours are 7:00 AM to 3:00 PM, Monday through Thursday. Student attendance is mandatory. Daily workload, staffing, teaching, and patient care needs may occasionally require adjusted hours for best use of student and instructor time.

In the event of illness, the student <u>must</u> notify their MLS bench instructor or Education Coordinator and Program Director <u>before</u> the start of each day he/she is absent. Send this in a single email to all parties. Missed learning must be rescheduled in the manner and timeframe determined by the Education Coordinator and/or Program Director.

Contact Education Coordinators as follows:

Angela Miller – Microbiology	(816) 932-2422
Jenny Angelo - Chemistry	(816) 932-2935
Mariam McAdams - Hematology	(816) 932-2415
Beth Jones – Blood Bank	(816) 932-2412
Mendy Mills - Molecular Diagnostics	(816) 932-3886

Other Saint Luke's Laboratories:

Marcia Shackelford - Saint Luke's East (SLE)	(816) 347-4424
Pat King – Saint Luke's North (SLN)	(816) 880-6457

Contact Program Director as follow:

Brenna Ildza – bildza@saintlukeskc.org or (816) 932-3395

Tardiness

Students unable to report on time <u>must</u> notify their MLS bench instructor or Education Coordinator and Program Director. A student is tardy if arriving more than 6 minutes after the scheduled time. Tardiness will result in disciplinary action according to the guidelines listed:

- Four episodes of tardiness within a continuous three-month period
- Six episodes of tardiness within a six-month period
- Eight episodes of tardiness within a nine-month period

Specific disciplinary steps will depend on whether the student is already in a progressive disciplinary process. Unusual occurrences (weather, auto malfunction or accident, personal or family emergencies) may contribute to tardiness and evaluated on an individual basis prior to disciplinary action.

Personal Absence Days

After completing the first six months in the School, students receive three personal absence days. The MLS Program Director will <u>schedule these days in advance</u> for personal events such as graduation ceremonies, employment interviews, or urgent personal business. The MLS Program Director may grant exceptions to this policy.

Student Policies

Snow/Ice Storms

In the event of snow and/or ice storms our primary concern is safety of students traveling to and from the hospital. We will follow UMKC for school closure due to inclement weather. Students will receive email notification of cancelled classes. Freezing weather will not cancel School. Severe weather can be predictable, and students must prepare for snow/ice days by having study materials at home. Rather than having time off, these days provide time for independent study and completion of assigned work. Students may receive lectures at home during severe weather by Microsoft Teams meetings. Faculty or Program Director may administer exams on the following day or at their discretion. It may be advisable to contact the section Education Coordinator during the snow/ice day to determine how to prepare for the next day.

Students who hold employment positions in the laboratory must contact their work supervisor/manager if they will not be able to work as scheduled. The snow/ice policy is for the MLS School only; it does not apply to employment situations.

Student Responsibilities for Attendance:

- Address personal matters during non-working hours whenever possible
- Report unplanned absences as soon as possible to a program official
- Seek prompt help for health or personal problems that could interfere with attendance
- Problem-solve minor inconveniences so they do not interfere with attendance
- Recognize that absences interfere with the learning process and make every attempt to minimize these occurrences.

School Responsibilities for Attendance:

- Communicate expectations clearly and consistently
- Review student attendance records
- Communicate with students returning from medical or other absences to obtain pertinent information
- Encourage students to seek assistance if a health or personal problem is interfering with attendance
- Maintain consistency in counseling students for excessive absences or tardiness

Cell Phones and Telephones

Students may use personal cell phones during lunch or break periods in clean areas. Mute or turn off cell phones and stored in a secure location such as a locker during class. Laboratory testing areas prohibit cell phone use. Cell phone use outside these guidelines may prompt disciplinary action.

Counseling

Students will utilize their personal health professionals for counseling services. A list of available services will be provided upon request. If individual problems interfere with a student's ability to progress toward successful completion of the School, the Program Director may request utilization of services.

Student Employment

MLS students are not Laboratory staff and not expected to perform service work during academic hours. Students perform tests on patient samples to the extent necessary to achieve learning outcomes and entry level competence. At such times students are operating under the guidance and supervision of MLS staff.

Students are eligible to apply *on a strictly voluntary basis* for employment in the Hospital or Laboratory. These paid, supervised positions are not under the influence or auspices of the MLS School. Students in these positions are subject to SLHS employee rules and regulations. The number of such opportunities varies each year and there are no requirements or guarantees of employment during the clinical year.

Students may find it difficult to carry more than 10-15 hours of employment per week during their clinical rotation, as study workload is heavy. Students must remain current with all School responsibilities and assignments, irrespective of employment.

Academic Policies

Confidentiality of Student Records

FERPA (Family Educational Rights and Privacy Act, 1974) guides the MLS School in protecting privacy of student records. The Program Director permanently retain records. Parties authorized by the student have limited access to obtain release of records, including clinical coursework grades and evaluations. Under controlled circumstances and by request, students may review their own records.

Students, college/university registrars, and MLS advisors receive School coursework final transcripts. Upon written request by the student, other parties will receive final transcripts. The School will release Student performance evaluation forms, including affective evaluations, for reference purposes with permission of the student, as noted on the form.

The School maintains enrolled student records for two years following completion. In year three, the School compacts the files and keeps them in a secure accessible location for another eight years. Ten years after completion of the School, the student transcript/record is reduced to legal name, grades, credits, date of admission, and date of completion for permanent storage in compliance with Hospital policy.

Conferences with School Officials

In keeping with the goal of preparing students for a professional career, Students are expected to take responsibility for seeking information, guidance, and support as needed from School officials. Although sources of help are available, students must take an active role in assessing and improving their performance in the School.

Students work very closely with MLS Faculty while in clinical rotations, and thus have frequent opportunities to seek professional guidance from experienced Faculty. In addition, the Program Director's office is readily accessible and very private, which provides an ideal setting for discussions of a confidential and/or sensitive nature. Students may initiate conferences with the Program Director or Faculty to discuss progress, problems, or concerns. Students who perceive a lack of impartiality on the part of any School official, are encouraged to consult another Faculty member, the Program Director, Medical Advisor, or System Director of Pathology Services.

Students experiencing academic issues are encouraged to approach the Faculty or Program Director for confidential assistance and guidance. MLS Faculty or the Program Director can initiate confidential academic counseling but produces a record that becomes part of the student's file.

Academic Advanced Placement

The School will individually evaluate requests for advanced standing due to prior course or laboratory work beyond entry requirements. The School reserves the right to deny advanced standing and the decision of the School officials is final.

Academic Policies

Evaluations

Student progress is evaluated in three domains of learning: cognitive, psychomotor, and affective. A written curriculum for each clinical instructional unit explains what and how students learn and how the School will assess learning. Students must remain aware of learning objectives, activities, and methods of evaluation.

Cognitive Skills

Cognitive (**thinking**) skills are evaluated by written or oral examination or quizzes. Grades are based on performance as demonstrated within scheduled time periods. Grades may be adjusted downward if work assignments or tests are not completed on time. All grading adheres to the following scale:

92-100%	**A**
84-91%	**B**
75-83%	**C**

Test scores below 75% are Unsatisfactory. See Academic Remediation Policy, page 21.

Psychomotor Skills

Psychomotor (**doing**) learning is evaluated using task checklists, practical examinations, or observed performance demonstrations. Evaluations may be assigned points or graded as Pass/Fail. There may be time limits on practical exams.

Affective Skills

Affective (**being**) learning is evaluated regularly throughout the year. Student affective performance evaluations are completed at the end of each clinical rotation. School officials may provide informal feedback or evaluations more frequently and at their discretion. Students may pass a clinical rotation with a single rating of Needs Improvement; their final rotation must have no ratings of Needs Improvement to complete the program without remediation.

Affective evaluations may provide opportunity for counseling and professional development. These evaluations may be released to potential employers upon request by the student. Employers often consider performance in this domain to be of primary importance in predicting career success.

Completion of the MLS School

Essential Requirements for Certificate of Completion

Students admitted to the School will progress toward successful completion by:

- ❖ continuing to meet minimum health criteria
- ❖ earning grades of C or better in each clinical course (cognitive skills)
- ❖ earning Pass grades on Psychomotor Domain evaluations in each clinical course (psychomotor skills)
- ❖ earning no more than three Needs Improvement ratings on clinical rotation evaluations (affective skills)
- ❖ adhering to School and SLHS policies and regulations

Conferring a Certificate of Completion will in no way depend on the student's ability to pass state or national licensure or certification examinations.

MLS School Final Examination

In addition to meeting Essential Requirements, students must attain a grade of at least 70% on the final examination. If a student passes all clinical courses but is unable to pass the final examination, remediation and one additional examination will be provided. This may or may not delay completion of the program.

Degree Seeking (3+1) Students

Saint Luke's Hospital School of Medical Laboratory Science awards a Certificate of Completion when degree requirements are complete. University registrars and MLS advisors receive a final transcript for thirty semester hours of clinical course work. College/university guidelines govern the decision to assign clinical course transfer credit hours or School grades as noted in the institution's catalog. Conferring of a degree is in no way dependent on the student's ability to pass state or national licensure or certification examinations.

Non-Degree Seeking (4+1) Students

Saint Luke's Hospital School of Medical Laboratory Science awards a Certificate of Completion to School graduates who have earned a degree prior to School entry and are not seeking a second baccalaureate degree. The student will receive an official transcript.

National Certification

School graduates that have met certification requirements are eligible to challenge nationally recognized board examinations. The American Society for Clinical Pathology (ASCP) Board of Certification examination certifies Medical Laboratory Scientists as MLS(ASCP). Students are responsible for submitting necessary materials to obtain certification; SLH will provide the ASCP MLS exam fee using the student's non-refundable School deposit. Students should access the ASCP website for specific and current information. The School strongly encourages National certification. Medical Laboratory Scientist employment usually requires National certification but is not a requirement of the School or any college/university.

Academic Remediation Policy

Faculty will academically counsel any Student who fails a test, evaluation or exam and given a remedial assignment and/or examination administered at the discretion and convenience of Faculty. The final composite grade for a failed test/exam will not change but will be documented as pass if remediation is completed and fail if remediation is not completed. Failing to complete remediation will result in an academic warning.

Academic Warning

Students receive an Academic Warning when <u>any</u> of the following occur:

- Student fails a test or exam in any course <u>and</u> fails remediation

- Student fails and remediates <u>three</u> or more tests or exams during the School

- Student fails a <u>final</u> exam in any course (Chemistry, Hematology, etc.)

Students in Academic Warning status will meet weekly with the MLS Program Director and/or Faculty to monitor academic progress, discuss concerns, and provide support or recommendations. Students may need to complete program requirements outside of School hours.

Removal of Academic Warning status will occur when School officials determine the student has shown academic improvement with no grades below C and clinical performance meets established criteria.

The School will award Students in Academic Warning status a Certificate of Completion if overall grades of C or better are earned at the completion of the program.

Academic Probation

Students receive Academic Probation when any of the following occur:

- Student fails <u>two</u> or more tests or exams in any course and fails remediation.

- Student fails and remediates <u>five</u> or more tests or exams during the program.

- Student fails more than one <u>final</u> exam in any course (Chemistry, Hematology, etc.).

- Student fails to earn a grade of C or better in any course.

Students in Academic Probation will meet weekly with the MLS Program Director and/or Faculty to monitor academic progress, discuss concerns, and provide support or recommendations. Students may need to complete School requirements during planned absences.

Students who fail to earn an overall grade of C or better in a course must repeat parts or all modules of the course, at the discretion of Faculty and the Program Director. The opportunity to repeat a course will depend on reasons for course failure and constraints of teaching staff. Students may not repeat more than one course.

Removal of Academic Probation status will occur when School officials determine the student has shown academic improvement with no grades below C and clinical performance meets established criteria.

School will award a Certificate of Completion to Students on Academic Probation who complete the program with overall grades of C or better.

Dismissal

The School will dismiss Students who fail to meet academic, psychomotor, or affective requirements. The decision to dismiss a student is a severe and rare event and will be a joint decision of the Program Director, Medical Advisor, Faculty, and academic advisors for degree-seeking students.

The School may dismiss Students on Academic Probation under the following circumstances:

- Student continues to fail tests or exams, with or without successful remediation

- Student fails three or more <u>final</u> exams

- Student demonstrates a combination of weak didactic and clinical performance in multiple areas, such that upon completion of the School the student would be unable to function successfully as an entry-level MLS

The School may dismiss Students not on Academic Probation for the following reasons, but not limited to:

- Failure to meet Essential Requirements
- Prolonged illness that precludes successful completion
- Excessive or unexcused absences
- Severe or repeated violations of Hospital policies detailed in the Policy Manual
- Evidence of even a single instance of academic dishonesty. Examples include cheating on any School examination, plagiarism on written assignments, and use of artificial intelligence (AI) to craft a complete assignment.

Degree-seeking students: School dismissal of degree-seeking students will not be eligible for a Certificate of Completion. The School will send a transcript with credit hours successfully completed to their affiliated college or university.

Non-degree seeking students: School dismissal of non-degree seeking students will not be eligible for a Certificate of Completion.

Student Complaints

The School provides Students with instruction and evaluation in all three domains of learning: cognitive, psychomotor, and affective. Learning domain complaints are categorized and resolved using the following guidelines.

Category 1 Complaint:
> Minor complaints brought to the attention of MLS Faculty may be resolved individually and informally by Faculty and student. If either party has continuing concerns, the Program Director may be consulted for further action. Category 1 complaints do not generate a written record.

Category 2 Complaint:
> Complaints brought to the Program Director by Faculty or students may be resolved by the Program Director. These may include complaints submitted in writing as part of a formal evaluation process. If deemed necessary, the Medical Advisor and/or System Director of Pathology Services may be consulted. Category 2 complaints may or may not generate a written record, at the discretion of the Program Director.

Category 3 Complaint:
> Severe complaints presented by students or Faculty as a significant problem are documented by the Program Director for action and resolution. If deemed necessary, the Medical Advisor and/or System Director of Pathology Services may be consulted. Records of such complaints, including resolution summaries, are maintained by the Program Director.

Grievance Procedure

The Grievance Policy establishes a problem-solving process to ensure orderly, prompt, and fair response to student complaints that have not been resolved by the Complaint process. Specific guidelines are as follows:

- Students may not file a grievance without first utilizing the Complaint process
- Category 1 and 2 complaints that progress no further, are considered resolved and not eligible for grievance
- Students who file a Category 3 complaint and are not satisfied with the resolution may file a grievance within one business day of the Category 3 resolution
- The Grievance policy may be voided when a student is deemed a risk to the safety of SLHS staff, students, patients, or visitors. A decision to void the policy will be made jointly by the Program Director, Medical Advisor and System Director of Pathology Services, in consultation with Saint Luke's Hospital Security and/or Risk Management officials. These decisions are final.

The grievance procedure is a two-step process:

Step 1
- Completed Grievance Request is reviewed and resolved by the MLS Program Director and Medical Advisor within five business days
- Written resolution is presented to the student within 24 hours
- Student may accept the decision or proceed to Step 2.

Step 2
- Original completed Grievance Request and written resolution are submitted to the Program Director within two business days of Step 1 decision
- Grievance panel is assembled within ten business days that includes:
  - Program Director, Medical Advisor, System Director of Pathology Services, or designee, a Faculty representative and up to two SLHS laboratory staff who are MLS School alumni
  - For 3+1 students, a representative of the academic affiliate may participate, at the Program Director's discretion
  - Grievant may choose another SLHS student or employee to accompany him/her at the hearing
  - No outside parties such as family members or attorneys may participate
  - Panel members cannot have a conflict of interest, involvement with the issue being grieved or an unusually close association with the student.
- Within five working days of the grievance panel, a written consensus decision will be given to the student. This decision is final.

Grievance Request Format

The written Grievance Request must include the following elements:

- Student name
- Date Grievance Request submitted to Program Director
- Date of incident (or range of dates)
- Date of Category 3 Complaint resolution
- Specific issue being grieved – brief statement
- Details of issue, including time/place/persons involved as relevant
- Specific reasons for filing Grievance Request
- Anticipated outcome of grievance – statement of what the student hopes to achieve

Statement on Policy Changes

Because conditions and circumstances may change during the clinical year, the SLH School of Medical Laboratory Science reserves the right to enact changes in policies and procedures as deemed necessary and appropriate.

This Policy Manual does not constitute a contractual commitment between the School and students; it constitutes an attempt to promote consistency and fairness in dealing with student matters.

Cost Disclosures

Tuition

    School tuition is the responsibility of the student. Tuition for the clinical year is $4000.00 + a $200.00 lab fee + a $200 textbook rental fee and payable electronically. Total cost is $4400. Students enrolled as a degree seeking student in a college charging additional tuition and/or fees during the clinical year are responsible for all such charges.

    Students will be required to complete a tuition contract prior to program start. Students will not incur any late fees if tuition payments become overdue. The tuition contract constitutes a formal contract; any breach of this contract may be grounds for dismissal.

Textbooks

    The MLS School textbook rental fee is $200. Renting textbooks is optional. Students may purchase new textbooks on their own if desired.

Expenses that are the student's responsibility

- Living expenses: food, housing, travel, clothing, etc.
- Optional Professional society dues
- Health insurance and medical costs

Financial Aid

      Students working toward their baccalaureate degree with affiliated academic institutions may be eligible for financial aid through their university. Saint Luke's Hospital does not offer financial aid for students enrolled in the School.

Refund Policies

      For veterans or eligible persons as defined by the Veterans Administration:
            Students will receive a refund of tuition and book fees if they fail to enter or complete the program. The refund will be within 10% of an exact pro rata refund. The School will retain no more than $10 if a student fails to enter the course on the designated start date.

      For all other students:
- 50% of tuition is refundable before February 1 of the entering year or August 1 of the entering year depending on the class start date.
- 0% is refundable on or after February 1 or August 1 of the entering year
- Financial aid sources are refunded in full if tuition was received directly from such sources before making student refunds.

School Closure Contingency Plan

In the event of School closure or natural disaster, the Program Director or a designee will notify the National Accrediting Agency for Clinical Laboratory Sciences (NAACLS) within 30 days of such occurrence. Plans to complete clinical studies for affected students include:

School Closure

      If Saint Luke's Hospital decides to discontinue the MLS School, all students enrolled in or accepted to the MLS School will complete their training before School closure.

Natural Disaster

      In the event of a natural disaster, such that physical and/or laboratory facilities of Saint Luke's Hospital are unavailable for instruction, MLS School officials will evaluate ways to re-establish the School as quickly as possible utilizing other Saint Luke's Health System Laboratories. Alternatively, the School will contact other accredited MLS Schools that may have capacity to accept students whose clinical rotations are incomplete. Program directors in the Kansas City, Springfield, and Joplin areas are prepared for such an event, and have agreed to collaborate for the benefit of enrolled students who need to complete clinical studies. Planned completion dates will be adhered to unless that is not possible.

Appendix A

Dress Code/Professional Appearance

1. All Saint Luke's Health System employees, medical staff, volunteers, students, observers, residents and house staff will wear their identification badge while on duty. The identification badge is to be visible to others, with the picture side out and unaltered, at all times. The employee's own name and picture must be visible on the name badge. If an employee loses or damages his/her Saint Luke's Health System ID badge, his/her supervisor will send the employee to Human Resources for a replacement card at a charge to the employee. The ID badge is also used for access control, parking, time-keeping, employee purchases, payroll and employee discount purposes. The immediate supervisor is responsible for returning the ID badge to Human Resources in case of termination or resignation.

2. Employees will consistently maintain a neat, clean, and well-groomed appearance to include:

   - Hair that is clean and neatly trimmed. Long hair is to be pulled back when providing direct patient care. Beards and mustaches must be clean, trimmed, and close to the face. Some departments, for health and safety reasons, may have special policies pertaining to beards or mustaches.

   - Daily bathing and oral hygiene

   - Use of effective deodorants

   - Clean fingernails that are well-manicured and trimmed to a safe length so as not to enhance the chance of infection.

   - No excessive use of colognes/perfumes. In general, perfumes and colognes should be avoided, or worn only very lightly as some may have allergic reactions to the scents. For the comfort of our patients, any use of colognes/perfumes by individuals providing direct patient care is prohibited.

   - No excessive makeup

   - No dark glasses used indoors unless prescribed by a physician

   - Conservative jewelry only is permitted. Jewelry that protrudes or hangs on a chain, including multiple bracelets, is prohibited particularly if it poses a safety issue to the employee or patient. Rings may be worn as long as they do not cause injury or enhance chance of infection.

   - Visible body piercings are limited to the ears, with a reasonable number of earrings permitted per ear. (Discrete nose piercings that reflect a cultural tradition will be addressed on an individual basis with the department director.)

   - In general, tattoos should be covered. Any visible tattoos cannot be vulgar, profane or intimidating to patients and their families.

   - School pins, professional registration insignia, Saint Luke's Health System service pins, and Saint Luke's Health System approved pins are permitted.

   - Saint Luke's Health System department identification patches are permitted.

3. Employees will consistently dress in appropriate attire according to the following:

- Dress/polo shirts are worn inside trousers or skirts.

- Clothing is properly fitting and non-revealing.

- Skirt length must be modest and appropriate.

- Undergarments are to be worn and are not visible through clothing or outside clothing.

- Employees have the option to wear socks/ stockings.

- For those employees who do not have regular patient contact or do not have job functions that would make open toed shoes a safety hazard, open toed shoes are allowed. Managers will have the final decision on what is considered a safe area for open toed shoes. Shoes are to be kept clean, polished and in good repair. Athletic shoes are permitted.

- Clothes are clean, unwrinkled, and in good condition.

- Capri pants are permitted as long as they fall below the knee.

- Shirts with discrete logos, located over the left breast pocket area, are permitted.

- Denim shirts, jumpers, vests and skirts, as long as they are clean, in good condition and not faded or frayed.

- Denim scrubs for those who work in patient care areas as long as they are clean, in good condition and not faded or frayed.

Attire that is not permitted includes:
Sweat shirts/pants
Shorts
T-shirts as an outer garment
Flip flops
Buttons, insignias, or symbols other than approved in #2 above
Leggings worn alone as pants
Halter tops or any other short tops that show bare backs or midriffs.
Pants, including scrub pants that reveal bare backs or midriffs.
Jeans, unless approved by entity's Executive Team
Employees' clothing shall not have any symbols or logos related to alcoholic beverages or illegal substances and shall not violate the Saint Luke's Health System's diversity and inclusion initiative

4. Canvas shoes and sandals are prohibited in patient care areas. Sandals are permitted in non-patient care areas only according to #3 above. Heel height must not interfere with the ability to perform duties. In patient care areas, soft soled clean leather uniform or athletic shoes are preferable to reduce noise.

5. Employees in some departments may be required to wear protective and/or identifying clothing, devices, or equipment.

6. Departments may require employee to wear a specific uniform/scrubs or shoes.

Inappropriate apparel, grooming or appearance is addressed by the department supervisor or manager. Failure to follow guidelines may result in disciplinary action and an employee may be asked to return home to change on his/her own time or change into scrubs, at the discretion of the supervisor.

Rules of Conduct

All employees are to conduct themselves in a professional manner, complying with Health System rules and procedures. Employees should commit to and abide by SLHS Shared Behaviors with everyone they encounter at SLHS. Each situation involving a violation of rules will be carefully examined regarding relevant circumstances before appropriate disciplinary action is taken. Nothing contained herein should be construed as limiting the Health System's right to discipline up to and including discharge without prior notice for any reason it deems appropriate in its sole discretion. The following violations are examples of conduct that could result in discipline up to and including termination of employment.

- Falsification of any health system or patient records, or giving incorrect or false information to anyone whose duty it is to compile such records

- Falsification of any employment application or other related record

- Swiping or signing in of the time clock for any other employee, having someone else time in or out for you, falsifying any part of the timecard/record, or unauthorized or attempted use of your own or another employee's ID Badge

- Insubordination toward any management representative or person to whom you report or failure to adhere to a management directive

- Willful destruction of health system property or destruction of such property

- Theft, dishonesty or unauthorized possession of Health System property or the personal property of others

- Any violation of the Alcohol and Drug Abuse Policy

- Carrying weapons unauthorized by the Health System, including firearms, on the health system property

- Fighting, instigating/causing a fight, or striking anyone on Health System property

- Committing any action or failing to take action that could have substantial negative effect on a patient's well-being, whether through negligence, willful actions, or incompetence

- Use of profane, threatening, or abusive language towards others, or use of obscene language to or in front of a patient

- Divulging privileged, or confidential information obtained from your employment

- Tampering or careless handling of Health System equipment including fire protection devices or violation of fire or safety rules or regulation, including the Occupational Safety and Health Act

- Violation of any harassment policies, including any prohibited harassment. Prohibited harassment is described as verbal, written, or physical conduct that denigrates, mocks, shows aversion toward or otherwise makes fun of or singles out an individual because of their protected status, which could include race, color, age, gender, national origin, citizenship status, disability, pregnancy status, veteran status, religion, creed, sexual orientation, sex, gender identity or expression, marital status or any other status protected by law

- Violating Bully-Free Workplace Policy, to include exhibiting bullying or demeaning behavior

- Conviction of a felony or any conviction of Federal, State, or local entity violation related to your employment or failure to disclose conviction to employer

- Any other serious act of misconduct

- Failure to adhere to any Health System policy, rule, or regulation

- Pattern of repeated violations of policies or rules

- Excessive absences, tardies, or early outs; not giving proper advanced notice when unable to report for work, working unauthorized overtime, or unauthorized absence from your department or entity

- Performing unsatisfactory quality and/or quantity of work

- Inappropriate, unauthorized, or excessive use of electronic communications including personal devices such as cell phone, iPad, laptop, or ear buds in clinical areas

- Violation of fire or safety rules or guidelines

- Failure to comply with security instructions or search requests by authorized persons of lockers, vehicles, or any items being carried or handled by an employee while entering, leaving or on Health System premises

- Failure to observe the Health System traffic or parking regulations

- Sleeping or wasting time on duty (exceptions-for sleeping as authorized for specific situations or positions)

- Unauthorized solicitation or posting and distribution of pictures, announcements, or other literature

- Acceptance of any contributions, tips, or gifts not in alignment with Gifts and Business Courtesies Policy

- Not adhering to the Health System Dress Code/Professional Appearance Policy

- Failure to cooperate or display courtesy to other employees or any other person with whom the employee comes in contact

- Engaging in outside activities that adversely affect your job performance or engaging in activity that violates the Conflict of Interest Policy

- Malicious spreading of rumors or otherwise instigating disruption to an orderly work-flow

- Disruption of meetings to include standing up and walking out, raised voices, or yelling

- Failure to report any incident relating to a patient's well-being

- Inappropriate comments written in the medical record

- Failure to follow a management directive

- Failure to adhere to the Tobacco Free Policy

- Failure to maintain current licensure/regisration as required by law and specified in job description

- Failure to complete mandatory requirements by the deadline

- Behavior that disparages or undermines confidence in the entity or its leaders

- Conduct that discredits employees or any entity of the Health System or willful misrepresentation of any entity or the Health System

- Any act of misconduct or any other action that is inconsistent with orderly, reasonable, and common sense conduct necessary for the mutual welfare of the Health System and its employees

Disruptive Behavior

Disruptive behavior (whether physical, verbal, mental, sexual or neglectful) toward physicians, employees, patients, family members, volunteers and visitors will not be tolerated. Also see Policy entitled Rules of Conduct, and Sexual and Other Prohibited Harassment.
Below are examples of concrete desirable behaviors required of all employees, volunteers and physicians to create a professional environment for our patients and visitors.

Examples of Desirable Behavior:

- Practicing our profession or trade according to the professional code of ethics.

- Respecting patient confidentiality and autonomy.

- Respecting patient rights.

- Promoting the dignity of the patient, maintaining appropriate professional work and social boundaries with the patients, other customers and coworkers, rather than exploiting these relationships for personal gain.

- Using customer feedback as a means to obtain information that will enable us to improve the quality of patient care.

- Coming to work on time and being ready to work.

- Never saying, "I don't know" without finding someone who does know the answer.

- Always practicing "safety first".

- Reporting problems and broken equipment using the proper reporting procedures.

- Responding in a positive and timely manner, using appropriate resources for resolution or to bring closure.

- Interacting with employees, patients, families, physicians, volunteers and visitors in a courteous, kind and considerate manner which shows respect, without compromise, to such factors as:
  Age
  Sex
  Disability
  Education
  Ability to Pay
  Religion
  Sexual Orientation
  Cultural origin
  Diagnosis
  Race

- Being courteous to customers by:

  o Always knocking before entering a patient's room.

  o Calling others by their preferred name and avoid using pet names such as *honey*, *dear*, and *sweetie*

  o Introducing yourself and offering an explanation and obtaining permission prior to performing any procedures.

- Wearing name badge at all times with your name and picture in view.

- Using *please* and *thank you* in all conversations and never being rude.
- Asking for permission before placing caller on hold.

- Offering to help if someone seems to need directions.

- Avoiding technical or professional jargon when speaking with a patient and/or customer.

- Making sure, when transporting patients that you always face them forwards.

- Maintaining and promoting confidentiality and privacy. This includes:

  - Appropriate use of patient records.

  - Avoiding talking about patients in public areas such as hallways, elevators, restroom and cafeteria.

  - Respecting privacy by closing doors or curtains during situations such as baths, procedures, interventions and exams.

  - Providing patient a second gown, robe or supplies when appropriate.

  - Allowing private time with visitors when possible.

  - Politely asking others to wait for another elevator to maintain privacy of the patient; use staff elevators whenever possible.

- Taking the initiative and time necessary to exceed customer expectations through demonstration of service oriented behaviors and attitudes; all employees, physicians and volunteers will:

  - Display pride and professionalism in their work.

  - Dress professionally and be well groomed.(See Dress Code Policy)

  - Be attentive and sensitive to the needs of patients and other customers.

  - Be tactful

  - Be friendly, have eye contact, be sincere, positive, empathetic and patient.

  - Resolve patient complaints by using the LAST model: Listen, Apologize, Solve and Thank.
  - Respond appropriately to a customer by saying *"I'd be happy to"* and respond appropriately to a customer's *"thank you"* by saying *"You're welcome"* and/or *"It was my pleasure."*
  - Responding to a patient or customer request in accordance with the timeframe set forth by the employee's department.

  - If there is a delay, updating patients about their status and offering to reschedule if possible.

  - Updating family members at least hourly while a patient is undergoing a procedure.

  - Being knowledgeable of Saint Luke's Health System's Patient Bill of Rights and incorporating it into daily practice.

- o Using healthy and positive interactive styles: No negative talk about each other, other departments, or customers will be tolerated.

- o Using profanity, shouting, belittling, threatening, or other forms of disrespectful behavior will not be tolerated at this entity. All communication in public places of the organization will be positive.

- o Resolving conflicts and differences in a private setting rather than in the presence of another person: Don't talk about work and/or personal issues at the bedside, i.e. "I can't believe how short-staffed we are."

- o Respecting each discipline's expertise and knowledge: don't question someone's expertise in front of a patient or family.

- o Communicating truthfully and considerately, with internal and external customers.

- o Never talking about another employee to a patient, coworker or physician to make yourself look better.

- o Working as a team, as appropriate, and supporting other members of the team.

- o Arriving at meetings no later than the scheduled start time unless you notify the meeting coordinator.

- o Attending meetings of assigned committees or staff meetings unless excused prior to the meeting.

Examples of Disruptive Behavior include but are not limited to:

- Abusive treatment of patients or staff.

- Being disrespectful.

- Behavior that disparages or undermines confidence in the entity or its leaders.

- Bullying or demeaning behavior.

- Disruption of meetings.

- Improper illustrations in the medical record or drawn on a patient.

- Inappropriate comments written in the medical record.

- Inappropriate response to patient needs or staff requests.

- Insulting and verbal attacks which are personal and go beyond the bounds of fair professional comment.

- Name Calling.

- Non-constructive criticism, addressed to its recipient in such a way as to intimidate, undermine confidence, belittle, or to impute stupidity or incompetence.

- Physical attacks, pinching, patting the gluteus of another, slapping or unwanted touch.

- Profanity or disrespectful language.

- Racial, ethnic, religious or socioeconomic slurs.

- Raised voice or yelling or shouting in a hostile manner.

- Refusal to complete a task or carry out duties. Insubordination.

- Repeated violations of policies or rules.

- Seductive, aggressive, or assaulting behavior.

- Sexual harassment, sexual comments/innuendo.

- Throwing instruments, charts or other items.

- Uncooperative or defiant approach to problems.

Any employee, volunteer or physician who witnesses or suspects possible disruptive behavior should report this to the manager/supervisor immediately. Employees, physicians and volunteers who report suspected disruptive behavior will not be subject to retribution or disciplinary action for reporting their concerns.
If the allegation is substantiated, or a pattern of such allegations is established, the person demonstrating the disruptive behavior will be subject to disciplinary action. Any relevant licensing or certifying boards will be notified.

Acceptable Use of Information Technology, Systems, and Services

General Use and Ownership

1. While those using SLHS's information technology, systems, and services can expect a reasonable level of privacy, users should be aware that the data they create on the SLHS systems remains the property of SLHS. Because of the need to protect SLHS's network, SLHS reserves the right to audit and monitor these systems as SLHS deems appropriate.

2. Employees are responsible for exercising good judgment regarding the reasonableness of personal use. If there is any uncertainty, employees should consult their supervisor or manager.

3. Authorized individuals within SLHS may monitor equipment, systems and network traffic at any time to ensure that their use is authorized, for management of the system, to facilitate protection against unauthorized access, and to verify adherence to SLHS security policies and procedures. Monitoring includes coordinated active scans / attacks by authorized individuals to test or verify the security of the SLHS systems. During monitoring, information may be examined, recorded, copied and used for authorized purposes. All information, including personal information, placed on or sent over SLHS systems may be monitored.

4. Remote access will be governed in accordance with the Network Access – Remote Connections Policy (ECPS-418).

Security and Proprietary Information

1. For confidential electronic information, including but not limited to Protected Health Information, corporate strategies, competitor-sensitive information, and research data, SLHS users should take necessary steps to prevent unauthorized access to this information.

2. Authorized users are responsible for the security of their passwords and accounts. The sharing of individually assigned accounts and passwords is prohibited.

3. Users are required to log off or engage the password protected screensaver on PCs when left unattended. In addition, all PCs, laptops and workstations should be configured to automatically activate a password-protected screensaver after 10 minutes of inactivity.

4. The use of encryption to protect sensitive data in accordance with the Acceptable Encryption Use policy is required.

5. Because information contained on portable computers is especially vulnerable, special care should be exercised, such as physically securing the devices when not in use.

6. All SLHS hosts that are connected to the SLHS production or Guest network , whether owned by the employee or SLHS, shall be continually executing approved virus-scanning software with a current virus definition file, unless overridden by authorization of the Chief Information Security Officer (CISO).

Electronic Health Record Data Integration with Non-SLHS Solutions and Services

In order to be compliant with requirements defined in Meaningful Use Stage 3, SLHS must provide patients the ability to access their electronic health record with the use of 3rd party applications not associated with SLHS. The integration is through the use of an Application Program Interface (API) that is provided with an HL7 standard called Fast Healthcare Interoperability Resource (FHIR). However, if SLHS is advised or discovers that a 3rd party application is utilizing SLHS data in an inappropriate manner, SLHS

has the right to disable the application from accessing SLHS's electronic health record. Inappropriate manner can include a reported and confirmed lack of security with a 3rd party application or reports that the 3rd party application is posting or providing patient data to organizations outside of their stated user/data agreement. SLHS will take actions below based on patients reporting and will not proactively monitor all 3rd party applications that SLHS patients agree to share data.

Procedure to disable 3rd party applications:

1. SLHS receives a report of security incident in regards to 3rd party application that is utilizing SLHS data through electronic health record FHIR
2. Review the report with the appropriate SLHS teams to include Legal and Compliance / Privacy

3. Chief Information Security Officer (CISO) will contact the 3rd party company to attempt resolution. If no resolution, CISO will document the reason(s) for disabling the FHIR connection to the 3rd party application
4. Disable process: Electronic health record vendor is notified; Electronic health record vendor support request is opened; Electronic health record vendor release authorization completed; Change Control completed; notify Client Support Center (CSC); update knowledge base (KB) and CSC patient scripts

5. Notify 3rd party company that the FHIR connection to SLHS electronic health record has been disabled until they provide remediation report of reported issue.

Procedure to reinstate 3rd party applications:

1. CISO receives correspondence from 3rd party application company that must include steps taken to resolve issue(s) with evidence of resolution or how SLHS can test to confirm resolution
2. If required, SLHS applications and/or technology teams will test resolution and advise CISO on outcomes

3. Reinstate process: Electronic health record vendor is notified; Electronic health record vendor support request is opened; Electronic health record vendor release authorization completed; Change Control completed; notify Client Support Center (CSC); update knowledge base (KB) and CSC patient scripts

Unacceptable Use

The following activities are, in general, prohibited. Employees may be exempted from these restrictions during the course of their legitimate job responsibilities. Under no circumstances is an employee or user of SLHS computer resources authorized to engage in any activity that is illegal under local, state, federal or international law while utilizing SLHS-owned resources. The lists below are by no means exhaustive, but attempt to provide a framework for activities which fall into the category of unacceptable use:

1. Violations of the rights of any person or company protected by copyright, trade secret, patent or other intellectual property, or similar laws or regulations, including, but not limited to, the installation or distribution of "pirated" or other software products that are not appropriately licensed for use by SLHS.

2. Unauthorized copying of copyrighted material including, but not limited to, digitization and distribution of photographs from magazines, books or other copyrighted sources, copyrighted music, and the installation of any copyrighted software for which SLHS or the end user does not have an active license is strictly prohibited.

3. Exporting software, technical information, encryption software or technology, in violation of international or regional export control laws, is illegal. The appropriate management should be consulted prior to export of any material that is in question.

4. Introduction of malicious programs into the network or server (e.g., viruses, worms, Trojan horses, e-mail bombs, etc.).

5. Revealing your account password to others or allowing use of your account by others. This includes family and other household members when work is being done at home or at any non-SLHS facility.

6. Using a SLHS computing asset to actively engage in procuring or transmitting material that is in violation of sexual harassment or hostile workplace laws in the user's local jurisdiction.

7. Making fraudulent offers of products, items, or services originating from any SLHS account.

8. Effecting security breaches or disruptions of network communication. Security breaches include, but are not limited to, accessing data of which the employee is not an intended recipient or logging into a server or account that the employee is not expressly authorized to access, unless these duties are within the scope of regular duties.

9. Network scanning or security scanning is expressly prohibited unless prior approval is received from the Chief Information Security Officer.

10. Executing any form of network monitoring which will intercept data not intended for the employee's host, such as keystroke logging, unless this activity is a part of the employee's normal job/duty.

11. Circumventing user authentication or security of any host, network or account.

12. Interfering with or denying service to any user other than the user's host (for example, denial of service attack).

13. Using any program/script/command, or sending messages of any kind, with the intent to interfere with, or disable, a user's terminal session, via any means, locally or via the Internet/Intranet/Extranet.

14. Providing information about, or lists of, SLHS employees or users to parties outside SLHS.

15. Installation of software on SLHS owned systems that has not been approved by SLHS Information Services

16. Deploying unapproved, "rogue" wireless access points.

Internet Usage

The use of the Internet must be consistent with the overall SLHS Code of Conduct. This includes compliance with standing policies on confidentiality, patient/financial/associate information, and Social Media. Each user is expected to have signed a confidentiality agreement. The Internet is to be used for business purposes and each individual with access is expected to use it in a productive manner for the benefit of Saint Luke's Health System.

Incidental personal use of the Internet is acceptable provided the use is reasonable and professional with minimum impact to SLHS resources, and does not interfere with job responsibilities. SLHS enforces content filtering of certain Internet websites based on categories. Access to websites within the restricted categories are granted, as needed, based on business requirements. The list of content filtering categories include: abused-drugs, adult, command-and-control, dating, dynamic-dns, extremism, gambling, games, hacking, malware, nudity, online-storage-and-backup, parked, peer-to-peer, phishing, private-ip-addresses, proxy-avoidance-and-anonymizers, questionable, social-networking, swimsuits-and-intimate-apparel, unknown, weapons, and web-based-email

AUDIT AND SANCTIONS

Employee/Workforce members found to have violated this policy may be subject to disciplinary action, up to and including termination of employment.

Appendix E

Social Media

While on duty, SLHS allows limited personal use of social media and the intranet for communication with family and friends, independent learning, and public service, as long as that usage does not negatively impact productivity, patient care or business activities, or consume more than a limited amount of resources. However, employees should refrain from using social media excessively while on duty or on equipment SLHS provides, unless it is work-related as authorized by SLHS.

Social networking activities in or outside of work that affect a SLHS employee's job performance, the performance of others, or SLHS's business interests are a focus of this policy. Social media activities that adversely affect the job performance of SLHS's employees, or otherwise adversely affect SLHS's patients or legitimate business interests, may result in disciplinary action.

Employees who have concerns of inappropriate internet activity should consult their supervisor or Human Resources representative. Any questions regarding this policy or acceptable social media usage should be directed to the entity Human Resources Director and/or the SLHS Marketing Department.

Employees who choose to use social media are expected to:

1. Know and follow SLHS Employee Code of Conduct (including Annual Affirmation of Shared Behaviors); Email, Voicemail, and Internet Usage Policy; Media Guidelines; Conflict of Interest Guidelines; and Patient Privacy Guidelines.

2. Receive approval from SLHS Marketing to create a social media page or site (i.e. Facebook, Linkedin, YouTube, MySpace) that represents a business interest of SLHS.

3. Be clear and open about the fact that they are not speaking on behalf of SLHS when engaging in social media related to an employee's employment or any aspect of their work at SLHS. Employees should also make it clear that the personal views expressed on the social media site belong to the individual and are not reflective of the views of SLHS. It is best to include a disclaimer, such as "The views expressed on this (posting, blog, etc.) are my own and do not reflect the views of my employer." Use a personal email address (not your saint-lukes.org address) as your primary means of identification on social media sites for your personal communications.

4. Comply with all Marketing social media guidelines, including following the guidelines for creation of a SLHS social media site and obtaining the proper release forms before posting any patient information or patient images.

5. Respect all health care delivery laws and regulations and follow all copyright laws.

6. Respect all health care patient privacy rules and regulations. It is not appropriate for employees to use any patient information on any personal social media sites. There are specific regulations governing "de-identification." If information used alone or in combination with other information can identify a patient to anyone, including a co-worker, it is not de-identified.

7. Maintain the confidentiality of any SLHS's entity's confidential or proprietary information. Do not post internal communications, reports, policies, procedures, or other internal business-related confidential communications.

8. Never post on social media sites SLHS's log or brand images or materials in a manner that would defame or otherwise discredit the services offered by SLHS.

9. Never use social media to provide medical advice or medical commentary on behalf of SLHS, unless otherwise authorized by SLHS.

10. Never use social media sites to conduct business-related correspondence that will contradict state and federal laws and SLHS policies concerning privacy, confidentiality of protected health information, and intellectual property or any non-public, confidential information relating to SLHS's business decisions.

11. Never use social media sites to engage in political campaigning or legislative advocacy on behalf of SLHS, unless otherwise authorized by SLHS. When engaging in political or legislative activities, employees should make it clear that they are not speaking on behalf of SLHS.

12. Avoid posting photos or videos of SLHS employees, vendors, or persons engaged in SLHS business or at company events that could be viewed as malicious, threatening, intimidating, or disparaging towards SLHS's patients, or vendors.

13. Respect SLHS's mission, vision, and values. Remember and respect SLHS's spiritual roots and 130-year positive image in the community. Make sure your postings are consistent with SLHS's anti-discrimination and anti-harassment policies. Avoid posting any statements or content that could be viewed as malicious, obscene, threatening, or defamatory. Examples of such content might include posts that could constitute unlawful discrimination or harassment or otherwise contribute to a hostile work environment on the basis of race, sex, disability, religion, or any other status protected by law.

14. Feel encouraged (and encourage co-workers) to use social media as a way to share appropriate information. SLHS's reputation is best represented by its people, so employees should make every effort to post comments that reflect positively on SLHS's brand and image.

15. The policy does not interfere with or restrict employee communications regarding wages, hours, or other terms and conditions of employment, or prohibit employees from filing unfair labor practice charges with the National Labor Relations Board, or from pursuing other remedies through governmental agencies concerned with workplace matters.