



**PONCE**

HEALTH SCIENCES UNIVERSITY

St. Louis, Missouri Campus



**2023-2024**

# **STUDENT HANDBOOK**

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# ABOUT THE SCHOOL HANDBOOK

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The Ponce Health Sciences University-St. Louis (PHSU) Student Handbook (Handbook) provides students with important information about policies, procedures, requirements, and services. The handbook is considered a supplement to the university Academic Catalog. Please refer to the catalog for specific academic policies and procedures. [stlouis.psm.edu/admissions/catalog](http://stlouis.psm.edu/admissions/catalog).

Students at PHSU are those who are officially registered. Students are required to read, understand, and adhere to the Handbook's provisions. Lack of awareness of standards and procedures included in this Handbook will not excuse students from being penalized for offenses established herein.

An updated version of the Handbook is published each Academic Year. The yearly update (and any subsequent updates during the Academic Year) supersedes all prior editions and provides the latest rules, policies, and procedures to create the most up-to-date student reference. The Handbook's provisions do not constitute an irrevocable contract between PHSU and its students since plans, policies, requirements, and services may be altered from time to time. Therefore, PHSU reserves the right to amend, modify, add, or delete information within the Handbook at any time without advance notice. Any amendment to these policies will be duly published and distributed. This version is the most up-to-date version, and it was last revised on June 30, 2023. Please contact the Vice President of Student Affairs for questions or to submit and update.

## STATEMENT OF INTENT

Ponce Health Sciences University (PHSU) has created this Student Handbook with the purpose of diffusing the rights and responsibilities of our students, as well as providing a guide for the establishment of a respectful and healthy learning environment. All dispositions in this Handbook are in accordance with the university's mission, vision, and strategic plan.

## OBJECTIVES OF THE HANDBOOK

1. Inform all students of their rights and responsibilities as students of Ponce Health Sciences University (PHSU).
2. Identify the Institutional Representatives responsible for handling all matters pertaining to or addressed in this document.
3. Establish proper norms of behavior in PHSU in order to ensure the safety and health of all members of our community, and determine the possible sanctions or penalties applicable in any given situation established in the Handbook.
4. Identify the official Student organizations to encourage student participation in the daily operation of our Institution.
5. Guaranteeing all students their right to be treated justly without discrimination against race, color, age, gender, pregnancy, sexual identity, religion, nationality, civil status, political ideas or affiliations, physical and/or mental impediments, social origin or status, or any other discriminatory motive prohibited by law.
6. Guaranteeing students their right to defer and protest their rights in an orderly manner, adhering to the norms of conduct and lifestyle pertaining to the University without it interfering or impairing with academic processes and institutional order, so harmonious coexistence is preserved.

## STUDENTS RIGHTS AND RESPONSIBILITIES

### SECTION 1 – STUDENT RIGHTS

All students have the inherent right to:

1. Receive quality education that will prepare them in their chosen field of study.
2. Carry out activities that promote integral development approved by the Office of Student Affairs
3. Participate in activities organized by the Institution that improve their personal and professional development, their leadership and planning skills, and create a sense of civic and social duty in the student.
4. Belong to student and professional organizations authorized and registered by the Institution.
5. Request and receive information about available financial aid and any other information pertaining to the subject of finances.
6. Students with special needs are able to request all the supportive services during the admissions processes. (Refer to the Reasonable Accommodations Policy).
7. Receive and discuss the syllabus with their professor at the beginning of course. Students enrolled in online courses can access their syllabus in the Learning Management System (LMS)- Canvas.
8. Receive adequate academic support according to their particular needs and the procedures established by each School and Academic Program.
9. Receive guidance and support in cases where the student's safety is in jeopardy.
10. Submit a Grievance to the Office of Students Affairs if there is an Institutional Policy violation.

### SECTION 2 – STUDENT RESPONSIBILITIES

All students are required to:

1. Exhibit and maintain respectful conduct towards all members of the University community.
2. Follow the Academic Integrity Policies code of conduct.
3. Participate in their classes, practicums, internships, or clerkships regularly, with full knowledge that they are responsible for the material assigned and discussed in class. Should a justification be necessary, it should be presented to Academic Affairs to obtain an academic excuse.
4. Always have the identification card visible. As per our safety procedures, no student or community member will be allowed entry without proper identification. Also, all students will bear their Id's in activities where they represent the Institution with proper authorization from the corresponding authorities.
5. Preserve, maintain, and not cause harm to property, instructional equipment, or materials. Any student who does so is subject to disciplinary sanctions.
6. Follow the dress code of the University.
7. Fulfill their economic responsibilities towards the Institution according to PHSU policies.

# MISSION, VISION & GOALS

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## MISSION

The mission of Ponce Health Sciences University (PHSU) is to provide a world-class, culturally competent, health sciences education to the population we serve, through innovative adaptive learning environments focused on the success of its students to become ethical practitioners and scientists.

## VISION

The PHSU vision is to build upon its reputation as a prestigious academic and research leader by continuing to educate underrepresented diverse populations while focusing research efforts on solving health disparities.

## GOALS

1. To continue its commitment to excellence in educational achievement by recruiting outstanding diverse students and faculty and providing the appropriate resources for the development of high quality academic programs.
2. To expand its academic and professional educational offerings to include other health related fields.
3. To enhance recognition of the institution's commitment to excellence in basic and clinical research, scholarship, and creative pursuits, supporting existing investigators and recruiting new highly qualified researchers.
4. To expand and improve its high-quality medical, mental health, diagnostic, and therapeutic services.
5. To continue to be an institution that prepares ethical professionals and scientists that contribute to society in general and to Puerto Rico in particular.

# ADMISSION TO THE UNIVERSITY AND REASONABLE ACCOMMODATIONS

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Applicants to Ponce Health Sciences University are selected on the basis of scholastic achievement, fitness and aptitude for the study and other personal qualifications. The Admissions Committees also give consideration to the use of language, special aptitudes, mechanical skills, stamina, perseverance, and motivation. Students are admitted on the basis of individual qualifications, regardless of disability, sex, race, religion, age, national origin, marital status, neither sexual nor political orientation.

The PHSU Admissions Office and the Admissions Committees act in accordance with “Americans with Disabilities Act of 1990” which includes changes made by the ADA Amendments Act of 2008, which became effective on January 1, 2009. Once the candidate is accepted, if he/she needs special accommodations, he/she is responsible for contacting the Academic Affairs Office for further information. It is the student's responsibility to make his/her condition known to PHSU Administrators and to seek out assistance.



Applicants with disabilities will be evaluated on a case-by-case basis in accordance with the technical standard guidelines of the program. All students must possess the physical and emotional capabilities required to independently undertake the full curriculum and to achieve the levels of competence required by the faculty. For the full accommodations policy, please see the *Academic Catalog*.

# STANDARDS OF CONDUCT IN THE TEACHER-STUDENT RELATIONSHIP

Ponce Health Sciences University adapts and incorporates the AAMC model of Standards of Conduct in the Teacher- Student Relationship, and encourages faculty and students to familiarize themselves and pledge adherence to this policy statement:

Preparation for a career in health care professions demands the acquisition of a large fund of knowledge and a host of special skills. It also demands the strengthening of those virtues that are expected in the health provider/patient relationship and that sustain the health profession as a moral enterprise. This policy statement serves both as a pledge and as a reminder to teachers and learners that their conduct in fulfilling their mutual obligations is the medium through which the profession inculcates its ethical values.

## GUIDING PRINCIPLES

<b>Duty</b>	Ponce Health Sciences University faculty have a duty, not only to convey the knowledge and skills required for delivering the profession’s contemporary standard of care, but also to inculcate the values and attitudes required for preserving the profession’s social contract across generations.
<b>Integrity</b>	The learning environment conducive to conveying professional values must be suffused with integrity. Students learn enduring lessons of professionalism by observing and emulating role models who epitomize authentic professional values and attitudes.
<b>Respect</b>	Respect for every individual is fundamental to the ethics of the health professional. Essential for nurturing ethics is the mutual respect for every individual by students, novice members of the profession, as well as by their teachers, as experienced and esteemed professionals. Given the inherently hierarchical nature of the teacher/learner relationship, teachers have a special obligation to ensure that students, interns, and residents are always treated respectfully.

## COMMITMENTS OF FACULTY

1. We pledge our utmost effort to ensure that all components of the educational program for students, interns, and residents are of high quality.
2. As mentors for our students, interns, and resident colleagues, we maintain high professional standards in all of our interactions with patients, colleagues, and staff.
3. We respect all students, interns, and residents as individuals, without regard to gender, race, national origin, religion, or sexual orientation; we will not tolerate anyone who manifests disrespect or who expresses biased attitudes towards any student, intern or resident.
4. We pledge that students, interns, and residents will have sufficient time to fulfill personal and family obligations, to enjoy recreational activities, and to obtain adequate rest. We monitor and, when necessary, reduce the time required to fulfill educational objectives, including time required for “call” on clinical rotations, to ensure student’s, intern’s, and resident’s wellbeing.

5. In nurturing both the intellectual and the personal development of students, interns, and residents, we celebrate expressions of professional attitudes and behaviors, as well as achievement of academic excellence.
6. We do not tolerate any abuse or exploitation of students, interns, or residents. We encourage any student, intern or resident who experiences mistreatment or who witnesses unprofessional behavior to report the facts immediately to appropriate faculty or staff; we treat all such reports as confidential and do not tolerate reprisals or retaliations of any kind.

## COMMITMENTS OF STUDENTS

1. We pledge our utmost effort to acquire the knowledge, skills, attitudes, and behaviors required to fulfill all educational objectives established by the faculty.
2. We cherish the professional virtues of honesty, compassion, integrity, loyalty and dependability.
3. We pledge to respect all faculty members and all students, interns, and residents as individuals, without regard to gender, race, national origin, religion, or sexual orientation.
4. As health professionals in training, we embrace the highest standards of the profession and pledge to conduct ourselves accordingly in all of our interactions with patients, faculty colleagues, and staff.
5. As well as fulfilling our own obligations as professionals, we pledge to assist our fellow students, in meeting their professional obligations.

# CONFLICT OF INTEREST IN THE STUDENT-FACULTY RELATIONSHIP

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## POLICY STATEMENT

The health professionals and faculty/staff who provide psychiatric/psychological/personal counseling or other sensitive medical and healthcare services to the university (PHSU-ST. LOUIS) students will not be involved in the academic, professionalism, or disciplinary evaluation, promotion, or dismissal of students receiving those services.

## PURPOSE OF POLICY

It is essential to have a separation of roles to ensure confidentiality in the provision of health and counseling services to PHSU-ST. LOUIS students and the absence of conflict of interest in PHSU-ST. LOUIS student evaluations, promotions, and dismissal decisions.

## PROCEDURE

Members of the PHSU-ST. LOUIS faculty assigned to evaluate students or to make decisions regarding the promotion or possible disciplinary action of students for whom they have provided psychiatric/psychological/personal counseling or other sensitive health services are obliged to report the conflict of interest to the block or clerkship director so that the student or faculty/staff can be reassigned to preclude any conflict of interest, real, perceived, or potential.

Students who have been assigned to a course, preclinical experience or clinical clerkship rotation in which they would be evaluated by a member of the faculty or staff who has provided them with psychiatric/psychological counseling or other sensitive medical or health services, should

report the real, perceived, or potential conflict of interest to the block or clerkship director as soon as they receive the assignment so that there will be no involvement of said faculty/staff in the academic evaluation or promotion of the student. Students that do not report such conflict of interest by two days after the initial contact with the faculty member forfeit their right to be assigned a different evaluator.

In the event that the student or faculty has not been re-assigned after reporting of the conflict, the student should report the matter to the Dean of Enrollment Management & Student Success for resolution. Similarly, if faculty or students are involved in a hearing for a possible adverse action related to academic, professionalism, or disciplinary matters, they should notify the Chairperson of the Student Promotion Committee or the Vice President of Students Affairs if one or more members of the hearing committee has provided a student with any psychiatric/psychological counseling or other sensitive medical or health services, so that the faculty can be excused from the committee.

Evaluation instruments shall include a disclaimer in which faculty members attest that they have not had a professional relationship with students that could affect their judgment upon evaluation of the students.

## HONOR CODE

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In the pursuit of academic, personal, and professional excellence, every student follows an Honor Code which delineates PHSU-ST. LOUIS's standards of conduct and the student's commitment to such principles.

### PREAMBLE

In their pursuit for academic, personal, and professional excellence, students of Ponce Health Sciences University have adopted this *Honor Code*. The principles of this *Honor Code* are intended to aid students in maintaining a high level of ethical conduct in concordance with the educational philosophy of our institution. These are standards to enable students to determine the propriety of their conduct in relation to peers, members of the faculty, administration, and patients.

### PRINCIPLES

- Students have the responsibility to uphold and maintain the highest degree of personal and professional integrity.
- Students are encouraged to seek appropriate counsel if deemed necessary.
- Ethical growth should be coincident with academic growth among the student body.
- To evidence the need to combine personal honor with communal responsibility the following precepts are specifically, but not exclusively, expected to guide the conduct of each member of the Ponce Health Science University student body:
  - Each student must work independently and honestly on all examinations.
  - Plagiarism is considered a major ethical offense.
  - Each student will be trustful and dutiful in carrying out clinical and academic responsibilities.
- The success of the Honor Code depends on the personal integrity, mutual trust, and cooperation of all members of the Ponce Health Sciences University community: students, faculty, and administration.

## REPORTING

A student or faculty member who observes or suspects a violation of the Honor Code shall submit a written report of the incident to the Dean of Enrollment Management & Student Success or Associate Dean for Academic Affairs. That representative will deliver the report of the incident to the Vice President for Academic Affairs who will authorize an investigation. The Vice President for Academic Affairs will appoint two investigators from Ponce Health Sciences University who will notify the accused student of the alleged violation, his/her rights, and the date of the Promotion Committee hearing. All suspected violations would be heard at the Promotion Committee.

## DUE PROCESS

A student charged with violating this code is guaranteed the following safeguards:

- The student must be informed, in writing, of any charges at least 48 hours before the case is heard by the Promotion Committee.
- The student has the option of being excused from any tests, assignments, or examinations for a period of no longer than two days before or after the meeting of the Promotion Committee.
- The student has the right to be represented by counsel of his/her choosing at the Promotion Committee hearing.
- The student has the right to present witnesses at the Promotion Committee hearing.
- The student has the right to confront the accusers and to cross-examine any witnesses at the Promotion Committee.
- The student has the right to examine any evidence prior to the Promotion Committee hearing.
- All records of prior social or academic infractions having no direct bearing on the present charges shall be excluded from evidence.
- The student has the right, in the event of a not guilty verdict, to request that this finding be made public.

## SANCTIONS

The following actions will be taken against a student who is found guilty of a violation of the Honor Code:

1. *Reprimands such as:* warning letter, verbal, or written admonition, place a letter with findings of violation in the formal academic record.
2. *Probation:* Any probation rendered by Promotion Committee shall be entered into the student's academic record, but shall be removed upon the defendant's graduation.
3. *Failure of Course:* The Promotion Committee will recommend to the Vice President of Academic Affairs and subject to his/her final authority, that a student be given a failing mark in a course connected to the Honor Code violation.
4. *Suspension:* The student will be suspended for a minimum of one academic semester/trimester, and this will be entered permanently in the School academic record. The conditions for reintegration shall be stated in the order of suspension and must at least require the repetition of the academic semester in which the violations(s) occurred.
5. *Expulsion:* Permanent dismissal from Ponce Health Sciences University.

A combination of the above penalties deemed appropriate by majority vote of the Promotion Committee based on the severity of the infraction, past academic and other performance of the student, the student's attitude, and the student's potential for future performance.

## APPEALING (DUE PROCESS)

The Vice President for Academic Affairs will evaluate the appeal and the investigation report. Rejection of the appeal by the Vice President for Academic Affairs is final. However, the Vice President for Academic Affairs may overturn the decision. If the Vice President for Academic Affairs has a reasonable doubt, about the student's allegation or the investigation, he/she can appoint an Ad Hoc Committee, comprised of members of the faculty, student body and administration to reevaluate all evidence.

The Ad Hoc committee will notify the student in writing of the date and time when the case will be heard. The Ad Hoc committee has the discretion to re-interview the persons involved if necessary. The committee has seven (7) working days to submit its report to the Vice President for Academic Affairs. The Vice President for Academic Affairs will receive the Ad Hoc committee recommendations and make the final decision within forty-eight (48) hours.

All decisions, favorable or unfavorable, will be reported to the student in writing. All decisions made by the Vice President for Academic Affairs will be final.

## INTERPERSONAL ABUSE

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Personal abuse will not be tolerated at PHSU-ST. LOUIS. Verbal, psychological, or physical abuse such as speaking insultingly, engaging in schemes to undermine the self-esteem of the person; or any other such activity will not be tolerated.

Any incident of abuse reported by any member of the academic community. The incident should be reported to the Vice President of Students Affairs or designee.

The Dean of Enrollment Management & Student Success or designee will gather all pertinent information on reported cases of personal abuse. The school's legal counsel will be notified of all such cases and will be kept informed of the progress of the investigation at all times. Early communication and intervention will lead to the resolution of the incident.

If the incident is resolved, no further action will be taken. A description of the incident must be in writing. The report of a resolved incident will contain no names. A follow up on the incident will be made after six or eight weeks to ensure that there has been no retribution.

If the incident is not resolved, in consultation with the Legal Counsel of the school, an Ad Hoc committee appointed by the President, and comprised of members of the faculty, student body, and/or administration will re-evaluate the case. All parties involved will be informed of the composition of the committee and will have the opportunity to present any disagreement on the membership of the committee and the reasons for the challenge. Appeals would be followed as described above. Psychological counseling will be available for the parties involved as needed and availability.

The Ad Hoc committee will review the information and make a recommendation to the President for further action. The whole process should be addressed within three months.

## NON-DISCRIMINATION POLICY

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Ponce Health Sciences University (PHSU-ST. LOUIS), as an educational institution and as an employer, values equality of opportunity, human dignity, and racial/ethnic and cultural diversity. Accordingly, the University prohibits and will not engage in discrimination or harassment on the basis of race, color, religion, national origin, ancestry, sex, age, marital status, familial status, sexual orientation, political affiliation, disability, or veteran status. Further, the University will continue to take affirmative steps to support and advance its values consistent with the PHSU mission. This policy applies to admission, students, employment, and access to and treatment in PHSU-ST. LOUIS programs and activities. This is a commitment made by PHSU-ST. LOUIS and is in accordance with federal, state and/or local laws and regulations.

## ALCOHOL, TOBACCO, ILLICIT DRUG AND VIOLENCE

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Ponce Health Sciences University prohibits the abuse of alcohol within the academic community. The possession, distribution or use of illegal drugs is grounds for immediate sanction, including dismissal. Smoking is prohibited on school grounds. Violence will not be tolerated within the academic community or on the school grounds or affiliated facilities.

The danger of alcohol, drugs, and controlled substances within the academic community or on the school grounds or affiliated facilities is of great concern to us. Each individual at PHSU-ST. LOUIS receives a manual that explains in detail the institutional policies and the resources available to deal with these problems. The following policy is established by PHSU-ST. LOUIS:

1. It is unlawful for any student at PHSU-ST. LOUIS to engage in any activity that involves illicit use, possession, manufacture or distribution of alcohol, drug, tobacco or controlled substances on the school campus, any location used for academic activities or at any of its organizations or affiliates. Proscribed activities include but are not limited to: use, manufacture, sale, transportation, dispensation, distribution, disbursement, or possession of such substances. This does not apply to medically prescribed drugs, or to the manufacture, handling, and distribution of drugs used for IRB approved research.
2. Any student of PHSU-ST. LOUIS found to be engaged in any of the above activities or in the case of vandalism is subject to dismissal. The student shall have the right to appeal as outlined in the “student promotion, academic probation and dismissal” section of the *Academic Catalog*.
3. Whenever a student of PHSU-ST. LOUIS is found to be illicitly using, possessing, manufacturing, or distributing alcohol, drugs, or controlled substances on the school or campus or on the grounds of affiliated institutions, or if the student has participated in institutional activities while under the influence of alcohol, drugs, or any controlled substance, the following will occur:
  - a. Should the offender voluntarily recognize that they suffer from drug or alcohol addiction and request help, counseling and rehabilitative services may be offered; including referral to public or private psychiatric services as an outpatient or inpatient, at the student’s own expense. If within 6 months, a certificate of complete rehabilitation is not presented, the student will be recommended for dismissal.
  - b. The first offense for any drug related activity other than abuse of a substance: the student may be referred for counseling by the corresponding authority and to any other pertinent professional assistance. Sanction including dismissal after due notice and hearing.

- c. Second offense: the student will be recommended for dismissal from PHSU-ST. LOUIS after due notice and hearing.
  - d. The school procedures do not preclude action by law enforcement authorities for violation of any state or federal laws.
4. In the event of a conviction by a court of law for any violation or related incident, whether the infraction is committed within or outside the school or affiliates grounds, the PHSU-ST. LOUIS student will be sanctioned by the school. It is the duty of the student involved to notify the Dean of Enrollment Management & Student Success of PHSU-ST. LOUIS of any such conviction in writing within 10 days. Failure to do so will lead to immediate sanction, including dismissal.
  5. Specific rules have been established to regulate PHSU-ST. LOUIS sponsored activities where alcohol is served, based on applicable laws and regulations.

For details, please refer to the *Institutional Public Policy on Establishing an Academic Community Free from Alcohol, Tobacco, use of Illicit Drugs and Violence*.

## PREVENTION POLICY & PROGRAM

Ponce Health Sciences University is one of the leading educational institutions in Medicine and Health Sciences in Puerto Rico. This represents a genuine commitment to establish an institutional public policy for the academic community free of drugs, alcohol, tobacco and violence. PHSU-ST. LOUIS recognizes that prevention strategies are the first steps to fight against drugs, alcohol, and violence. PHSU-ST. LOUIS promotes a prevention program aimed to provide services to students and employees.

## STATEMENT

It is PHSU-ST. LOUIS commitment to ensure an environment free of drugs, alcohol, tobacco and violence for everyone through prevention, education and rehabilitation.

## TITLE

### **ALCOHOL, DRUGS ABUSE AND VIOLENCE PREVENTION PROGRAM OF PHSU-ST. LOUIS**

The following Prevention Program, is designed to meet various state and federal regulations, including: “Drug Free Workplace Act” (34 CFR 85), the “Drug Free Schools and Campuses Regulations (34 CFR 86).

## POLICY

Possession and/or use of illicit drugs and unauthorized controlled substances are contrary to university policy and in violation of federal and Missouri laws. PHSU-ST. LOUIS prohibits the possession, use, manufacture, distribution and/or sale of illegal drugs and illegal drug paraphernalia. Students at the university using or otherwise involved with drugs in violation of the Student Conduct Code and are subject to university disciplinary action in addition to any action taken by local or federal law enforcement authorities. Questions regarding the Drug Policy should be directed to the Office of Students Affairs.

## APPLICABLE LAWS

This program is based on the following Federal and Missouri Laws and/or Regulations:

1. Drug Free Workplace Act of 1988 (Public Law 101-690) adopted on 1988.
2. Drug Free Schools and Communities Act, as amended (Public Law 101-226) adopted on December 12, 1989.
3. Regulations Adopted by the United States Department of Education to implement such laws, 34 CFR 85; 34 CFR 86; HEOA section 488 and HEA section 485.

## DRUG FREE SCHOOLS AND COMMUNITIES ACT, AMENDMENT OF 1989

The Law PL 100-297 signed in 1986, by the President of the United States, established the policy of a “Drug-Free Schools and Communities Act”. This policy was amended in 1989 and is still valid in the United States and its territories.

This law establishes that any institution that receives funds from the Department of Education of the United States of America, shall comply with the rules of the “Drug Free Act”. The Department of Education of the United States has the capacity to monitor and corroborate the existence of a biennial review of the public policy of “Drug Free Act” and its implementation at the institutional level. Failure to comply with this revision, could result in the loss of funding from the Federal Government and/or claim for repayment of funds previously granted to the Institution.

This Law requires that institutions must disseminate their policies annually to students and employees, along with information on health risks, disciplinary sanctions, and campus-based treatment options. Every two years, institutions are supposed to evaluate their programs to ensure they're effective and consistent.

## HEALTH RISK

The government has classified controlled substances from I to V according to their potential for abuse. In qualifying, the “I” substances have more potential for abuse and little or no medical value. They are decreasing in risk to the “V” where substances have less potential for abuse and accepted medical use. Drugs are, by definition, any chemical substance that alters in any way the functioning of the body, mind, and nervous system, behavior and feelings of people. The use of alcohol, tobacco, and other drugs can cause dependence, a physical or psychological need to use it. Addiction and alcoholism are developing a physical and psychological dependence in which the person loses self-control with the use of the substance.

Alcohol is a depressant drug that affects the central nervous system and progressively inhibits brain function. In Missouri the legal age for alcohol use is 21. The main component of alcoholic beverages is ethanol or ethyl alcohol, which has a different focus depending on your process. The use of alcohol and/or drugs affects motor coordination, reasoning, vision, and the ability to follow an object with his/her eyes; and this is why the act of driving motor vehicles under its state (either use or under intoxication) is considered legally intoxicated (blood alcohol concentration of 0.800) is considered a criminal offense. However, one could be mentally and physically prevented from driving motor vehicles at a lower level.

Intoxication is a function of the amount of substance ingested, the time consumed, the alcohol content of the drink, weight and gender of the person, the mood and the amount of food in the stomach of the individual at the time of consumption.



## INTERVENTION PROTOCOL TO REHABILITATE STUDENTS AND EMPLOYEES

PHSU-ST. LOUIS believes that rehabilitation can be possible when proper case management is available. The Office for Student Success and its Counseling Services are responsible for handling cases of students identified or are suspected of having problems related to drugs and alcohol.

Non-confirmed cases may be managed by institutional help services; professional counseling, discipline committee, bulletin board, and e-mails with information related to alcohol and drugs prevention. Confirmed cases, should be addressed by professional help from private and public agencies.

## COUNSELING AND TREATMENT CENTERS

PHSU St. Louis has a Counseling Center to provide a full array of counseling services including individual counseling, small group counseling, academic coaching, academic advising, and consultation with administrators, faculty, and staff. A full-time counselor as well as a UMSL doctoral student with a Master's degree in counseling from the Graduate Assistantship program are available for students. Students of Ponce Health Science University, St. Louis in need of additional mental health counseling services will be referred to the Counseling and Social Advocacy Center at UMSL or will receive an appropriate referral.

## PREVENTION STRATEGIES

<b>Admissions Office</b>	Information related to the Policy is given to the student during the admission process. Every student admitted to PHSU-ST. LOUIS signs the Policy of Alcohol and Drugs Abuse.
<b>Catalog and School Policies</b>	The <i>Student Handbook</i> includes a copy of the PHSU-ST. LOUIS Policy of Alcohol and Drugs Abuse.  In addition, the <i>Academic Catalog</i> is also available at <a href="http://stlouis.psm.edu/admissions/catalog">stlouis.psm.edu/admissions/catalog</a>
<b>Professional Counseling Services</b>	Professional counseling services are available to students and staff and will also utilize referrals to external agencies as needed on an individual basis.
<b>Extracurricular Activities</b>	PHSU-ST. LOUIS promotes extracurricular activities that involve preventative messaging in regards to drugs, alcohol, and tobacco use.
<b>Safe Colleges/ Vector LMS</b>	Vector LMS offers online training courses and information about alcohol, tobacco, drugs, violence and sexual harassment, to faculty, staff and students. This Program is managed by the Office of Student Success.

## STANDARD OF CONDUCT

1. PHSU-ST. LOUIS totally and hereby categorically prohibits the possession, use, manufacture, and/or distribution of drugs and alcohol by students, employees, and visitors to this institution.
2. Medications should be prescribed by a physician for the treatment of a properly documented health condition.
3. Law 40 of August 3, 1993 prohibits smoking in public and private academic institutions at all levels of education. PHSU-ST. LOUIS does not allow smoking in their classrooms or laboratories, halls, game rooms, libraries, hallways, restrooms, elevators, offices, research laboratories, lunch rooms, meeting rooms, parking area, or within the premises of the institution.
4. Smoking is also prohibited at PHSU-ST. LOUIS sponsored activities.

5. Advertising alcohol and tobacco products is prohibited at sponsored academic activities.
6. All student organizations recognized by our institution are subject to the above provisions in their official activities, both on and off campus.

*Visitors, guests or tenants of the PHSU-ST. LOUIS facilities are also required to comply with the same standards of conduct noted above.*

### **SANCTIONS**

Student Organizations are required to report within five (5) calendar days of any incident involving the use of alcohol and/or drugs that occurs in any official activity of the organization. Failure to comply with these provisions of public policy may result in sanctions as outlined in the *Student Handbook*.

## **WEAPONS AND FIREARMS POLICY**

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A dangerous weapon is defined as any firearm, whether loaded or unloaded; any device designed as a weapon and capable of causing great bodily harm; any electrical weapon; or any other instrumentality or device which, in the manner it is used or intended to be used, is calculated or likely to produce death or bodily harm. A firearm is described as any instrument that ejects any type of projectile. Possession of firearms and other dangerous weapons on School property is cause for disciplinary action up to and including dismissal for professional misconduct.

# DRESS CODE

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Students are representatives of Ponce Health Sciences University and must maintain an appearance that demonstrates respect and meets professional standards. As part of PHSU's effort to create a culturally competent institutional culture which fosters diversity, equity and inclusion, a revision of the Student Dress Code was performed with active participation from the student body and with the objective to update the dress code to a more inclusive format.

This policy applies to all Active PHSU students and/or PHSU visiting or international students on the Main campus, East Campus, St. Louis Campus and San Juan University Center. It also applies to students assigned to rotations/practicums in Allied Clinical Sites and Clinical Campuses.

The institution recognizes the importance of providing clear guidance to students about the dress code expectations for the diverse scenarios included but not limited to classrooms, labs, clinical sites and standardized patients.

For such purposes, the dress code was reviewed and revised with the active participation of the student body not only to update the guidance but also to adjust the Dress Code Policy to a non-binary and more inclusive format and to include specific details for the different scenarios students may encounter.

## CLASSROOMS DRESS CODE

- Students must wear a PHSU ID badge at all times, visibly, above the waist, identifying them as PHSU Students.
- All clothing must be neat and clean. Unacceptable attire or accessories may be offensive. Examples of unacceptable attire include sheer garments, tank tops, shorts, short skirts, low or deep necklines, items designed to be worn as undergarments, and garments such as leggings and spandex pants designed to be worn as athletic wear.
- The following attire conditions are unacceptable: soiled, torn, or frayed garments, apparel with words or pictures unrelated to the professional environment, including apparel with words or pictures of discriminatory or offensive nature.
- Headgear, except required by religious belief, and headphones, are not acceptable.
- Good personal hygiene is expected. Body odor or smoke odor should not be detectable.
- Jeans, shoes (including athletic shoes) and clean shirts (including T-shirts) are permissible. Bermuda or other shorts are also allowed in the classroom setting, must be no shorter than 2 in. above the knee.

## LABS DRESS CODE (INSIDE CAMPUS)

- Students must wear a PHSU ID badge at all times, visibly, above the waist, identifying them as PHSU Students.
- All clothing must be neat and clean. Unacceptable attire or accessories may be offensive. Examples of unacceptable attire include sheer garments, tank tops, shorts, short skirts, low or deep necklines, items designed to be worn as undergarments, and garments such as leggings and spandex pants designed to be worn as athletic wear.
- The following attire conditions are unacceptable: soiled, torn, or frayed garments, apparel with words or pictures unrelated to the professional environment, including apparel with words or pictures of discriminatory or offensive nature.

- Headgear, except required by religious belief, and headphones, are not acceptable.
- Good personal hygiene is expected. Body odor or smoke odor should not be detectable.
- Guidelines towards artificial nail enhancements and nail polish may be determined by the laboratory site. Chipped nail polish is unacceptable since it increases the risk of transmitting microorganisms. Natural nails kept short (i.e. not past the tip of the finger) are strongly encouraged.
- Hair and facial hair must be clean, dry, and controlled so as not to interfere with patient contact. For example, students with long hair may wish to tie hair back so it does not fall onto or brush against patients during a lab practice.
- Jeans, shoes (including athletic shoes) and clean shirts (including T-shirts) are permissible. Bermuda or other shorts are not allowed in the laboratory setting.

### CLINICAL/PRACTICUM/STANDARDIZED PATIENTS SITES DRESS CODE

- Students must wear a PHSU ID badge at all times, visibly, above the waist, identifying them as PHSU Students.
- White coats should be worn and PHSU ID must remain visible during all clinical and patient-related activities.
- All clothing must be neat and clean. Unacceptable attire or accessories may be offensive to our patients and standardized patients. Examples of unacceptable attire include sheer garments, tank tops, shorts, short skirts, low or deep necklines, items designed to be worn as undergarments, and garments such as leggings and spandex pants designed to be worn as athletic wear.
- The following attire conditions are unacceptable: soiled, torn, or frayed garments, apparel with words or pictures unrelated to the professional environment, including apparel with words or pictures of discriminatory or offensive nature.
- Shoes must be safe, clean, closed-toe, and appropriate for the clinical setting. Remember that open-toe shoes increase the risk of sharps or substances dropping on your feet.
- Sandals and bare feet are unacceptable at clinical sites.
- Moderation in jewelry and fragrances is encouraged during patient encounters.
- Headgear, except required by religious belief, and headphones, are not acceptable.
- Good personal hygiene is expected. Body odor or smoke odor should not be detectable.
- Guidelines towards artificial nail enhancements and nail polish may be determined by the clinical site, surgical environment, and standardized patient settings. Chipped nail polish is unacceptable since it increases the risk of transmitting microorganisms. Natural nails kept short (i.e. not past the tip of the finger) are strongly encouraged.
- Hair and facial hair must be clean, dry, and controlled so as not to interfere with patient contact. For example, students with long hair may wish to tie hair back so it does not fall onto or brush against patients during a physical exam.

### LIVE ONLINE/ REMOTE CLASSROOM DRESS CODE

The classroom behavior and dress code also apply to remote or online formats.

**Please note:** You may encounter variations in customs and expectations in different clinical settings. Observe other professionals' dress and ask your supervisor or clinical coordinator if you are unsure of what is appropriate. Students must comply with the PHSU Dress Code and the Practicum or Clinical Sites Dress Code. Students who participate in multiple scenarios (classroom, lab, and clinical) during the same day must follow the stricter scenario code to avoid policy offenses.

# INSURANCE FOR STUDENTS

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## HEALTH INSURANCE (MD STUDENTS ONLY)

Each MD student is required by the School to carry comprehensive medical care insurance. Individuals, who choose to be covered by a plan other than the School's Health Insurance Plan, must present proof of coverage at the time of registration.

- Institutional health insurance cost is always included in the enrollment (every term).
- The student is responsible for the cancellation and denial of the institutional health insurance. Evidence of health insurance must be presented every term.
- If the student does not comply with the process on the dates established, the institutional plan will be activated. The cost of the insurance won't be reimbursed.

## DISABILITY INSURANCE

Ponce Health Sciences students are required to have disability insurance coverage, depending on their degree program. MD students are required to have disability insurance coverage. Students enrolled in the MSMS, MSMS Online, or PsyD programs have the option to enroll, but are not required.

Students who have his/her own disability insurance must present evidence during registration to cancel PHSU insurance.

# UNPROFESSIONAL BEHAVIOR POLICY

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When problems arise in the student's professional behavior, it is hoped that the problem can be solved between the student and his/her supervisor. If this is not possible, the Department Chair of the service should be notified using the referral forms. The Department Chair will attempt a resolution of the problem if he/she feels that it is appropriate. If he/she feels that this is not possible or inappropriate, further action must be referred to the Dean of Enrollment Management & Student Success with the corresponding referral form.

The Dean of Enrollment Management & Student Success will interview the student and discuss the situation. A plan of action will be formulated immediately and the student will be notified in writing by the Department Chair. The plan should be implemented immediately. If no resolution is obtained the Dean of Enrollment Management & Student Success will refer the student to the Student Promotion Committee.

The student will be notified in advance that his/her unprofessional behavior will be formally discussed by the Student Promotion Committee. The notification should make clear the reasons for this action. The Student Promotion Committee will consider the referral and make recommendations to the Vice President for Academic Affairs.

If a situation arises when there is an immediate concern for a student or patient's welfare, the Department Chair and/or the Dean of Enrollment Management & Student Success will proceed with an emergency recommendation referral to the Vice President of Academic Affairs. The Dean of Enrollment Management & Student Success will notify the Vice President of Academic Affairs of all cases under consideration.

# CODE OF CONDUCT—OFFENSES AND SANCTIONS

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## OFFENSES

The following offenses will be considered and submitted for disciplinary action by the appropriate campus authorities:

1. Violation of professional conduct, such as plagiarism and cheating
2. Violation of federal and state laws on campus premises.
3. Misuse, damage or destruction of campus property.
4. Illegal appropriation of campus property.
5. Failure to comply with PHSU policies and regulations.
6. Any intent or act to threaten, intimidate, interfere with fellow students and/or employees.
7. Any intent or sexual harassment against fellow students, employees, and/or visitors within the premises of Ponce Health Sciences University.
8. Carelessness in the operation or use of equipment which will risk his/her own personal safety or that of another person.
9. Originate or spread false rumors or statements affecting the image of PHSU or any of its components.
10. Any discriminatory practices based upon sex, race, color, national origin, sexual orientation, age, marital status, political affiliation, disability, violation of privacy rights, student abuse or mistreatment.
11. Contribute to or facilitate unsanitary conditions or unhygienic conditions on campus premises.
12. Failure to adhere to attendance policies or disruption of class activities such as:
  - Being late or absent without a reasonable excuse or authorization.
  - Leaving the place of study/duty during didactical activities/working hours without authorization or excuse.
  - Reporting to study/work under the influence of alcohol or illegal drugs on the campus premises.
13. Failure to observe the parking policies and procedures.
14. Failure to observe the “No smoking” policy at Ponce Health Sciences University.
15. Overtime or irregular break times without previous authorization.
16. Possession, use or distribution of illegal drugs as well as the abuse of alcohol in the school premises will be considered personal misconduct, and may result in dismissal.

## SANCTIONS

Any offense or violation of the PHSU policies or regulations will be subject to sanctions.

These sanctions include, but are not limited to:

1. Warning
2. Verbal admonition/reprimand
3. Written admonition/reprimand
4. Formal Letter of violation as charged:

Ordinarily, if the finding of violation as charged is made, the finding and sanctions will be included in the formal academic file. Any findings in the permanent file shall be included in any future reports(s) concerning the student, unless specified otherwise by the Committee. Alternatively, the Committee could recommend that the findings and sanctions be included in a secondary file, which is maintained by the Student Affairs Office or Human Resource Office
5. Mandatory participation and successful completion of a counseling or rehabilitation program.

6. Suspension for a pre-determined time: Exclusion from classes and other activities with forfeiture of academic credit, as set forth in the notice of suspension, for a definite time beginning immediately. Sanction for cheating shall ordinarily include a recommended failure in the course involved with authorized withdrawal in other concurrent courses, regardless of the time in the school year when the offense is committed. If the suspension is for more than one term, the suspension shall begin immediately and shall be served in consecutive terms.
7. Indefinite Suspension: Termination of student/employee's status, subject only to formal readmission, with no right to petition for readmission before the expiration of a calendar year from the date of suspension.
8. Probation
9. Expulsion: Permanent dismissal from Ponce Health Sciences University.

## GRIEVANCE POLICY

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Any student has the right to submit to the Dean of Enrollment Management & Student Success a written report of a concern or complaint of any violation to the PHSU-ST. LOUIS policies and/or professional ethic without any retribution or consequences.

Violation to PHSU-ST. LOUIS regulations will not be tolerated. Verbal, psychological or physical abuse such as speaking insultingly, engaging in schemes to undermine the self-esteem of the person; or any discriminatory practices or adverse activity will not be tolerated.

### PROCEDURE

Any member of the academic community will report any incident of abuse or violation to PHSU-ST. LOUIS policies. The incident should be reported to the Dean of Enrollment Management & Student Success.

The Dean of Enrollment Management & Student Success or designee will gather all pertinent information on reported cases. Early communication and intervention will lead to the resolution of the incident.

If the incident is resolved, no further action will be taken. A description of the incident must be in writing. The report of a resolved incident will contain the description of the action plan followed.

A follow up on the incident will be made between six or eight weeks to ensure that there has been no retribution.

If the incident is not resolved, the Dean of Enrollment Management & Student Success will appoint three members as Investigation Committee to re-evaluate the case. All parties involved will be informed of the composition of the committee and will have the opportunity to present any disagreement on the membership of the committee and the reasons for the challenge. If necessary; PHSU's legal counsel will be notified of the case and will be kept informed of the progress of the investigation. The Investigation Committee will review the information and make a recommendation to the Vice President for further action. The Vice President of Student Affairs will inform the student of the decision. The whole process should be addressed within three months.

After receiving the notification by the Vice President, the student has the right to appeal the decision in writing to the Campus Director of PHSU St. Louis within seven working days.

The appeal, or due process presented below must be followed.

### APPEALING (DUE PROCESS)

The Campus Director will evaluate the appeal and the investigation report. Rejection of the appeal by the Campus Director is final. However, the Campus Director may overturn the decision. If the Campus Director has a reasonable doubt, about the student's allegation or the investigation, he/she can appoint an Ad Hoc Committee, comprised of members of the faculty, student body and administration to reevaluate all evidence.

The Ad Hoc committee will notify the student in writing of the date and time when the case will be heard. The Ad Hoc committee has the discretion to re-interview the persons involved if necessary. The committee has seven (7) working days to submit its report to the Campus Director

The Campus Director will receive the Ad Hoc committee recommendations and make the final decision within forty-eight (48) hours.

All decisions, favorable or unfavorable, will be reported to the student in writing. All decisions made by the Campus Director will be final.

## STUDENT COMPLAINT LOG POLICY

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*Last Revised: July 2022*

**Refer Questions To:** Dean of Enrollment Management & Student Success

**Scope:** This policy applies to administration, faculty or students in all programs of Ponce Health Sciences University (PHSU-ST. LOUIS).

**Related Policy:** Grievance Policy referenced in the *Academic Catalog* and *Student Handbook*

### PURPOSE OF POLICY

This policy governs the procedures by which the administration and faculty log any student related complaint and how the Student Complaint Log is maintained.

It is **not** intended to override the published grievance policy for students to formally report a complaint.

### DEFINITIONS

A **Complaint** is defined as any grievance regarding any department, service, or person that arises during a student's time at PHSU-ST. LOUIS. Examples include, but are not limited to the following:

- A student complaint against another student, faculty, resident, department, or service
- A complaint from PHSU-ST. LOUIS administration, faculty or resident against any student

An **Informal Complaint** is a complaint expressed either verbally or in writing to a relevant administrator or faculty, which is not dealt with through a formal process of the University. It may involve a discussion with relevant parties in order to receive information and explore options on resolving the matter. It does not involve a formal investigation or the determination of evidence.



A **Formal Complaint** is defined as a concern which has not been resolved informally, and which is then set out in writing, and forwarded to the Dean of Enrollment Management & Student Success per the University's Grievance Policy.

## **POLICY AND PROCESS**

All administration, faculty and residents are required to log any informal or formal complaints via email to [studentcomplaints@psm.edu](mailto:studentcomplaints@psm.edu) and copy the appropriate Dean within 5 business days of receiving the complaint.

**Informal complaints** should be recorded within the body of the email and contain the following information:

1. Name of Student
2. Date the complaint was expressed.
3. Nature of the complaint (e.g., person, department or service that the complaint is about and the circumstances and/or situation surrounding the complaint)
4. Steps taken to resolve the complaint, the person that responded, and all documentation associated with those steps.
5. Date and final resolution, action or explanation regarding the complaint, including referral to the appropriate Dean if the complaint was not resolved and/or recommendation to the student to formally submit a written complaint following the University's documented Grievance Policy.

**All formal written complaints** should be recorded in the Student Complaint Log by the Dean of Enrollment Management & Student Success and contain the following information:

1. Name of Student
2. Date the complaint was expressed.
3. Nature of the complaint (e.g., person, department, or service that the complaint is about and the circumstances and/or situation surrounding the complaint)
4. Steps taken to resolve the complaint, the person that responded, and all documentation associated with those steps.
5. Date and final resolution, action or explanation regarding the complaint.

The Dean of Enrollment Management & Student Success is responsible for:

- Maintaining a log of all formal and informal student complaints in the Office of Student Affairs
- Ensures that the complaints are resolved by the appropriate Dean within 10-business days of receipt of informal complaints. Formal complaints follow the established guidelines of the Grievance Policy
- That the resolution is reported back to the Dean of Enrollment Management & Student Success
- The Office of Enrollment Management and Student Success ensures that the resolution is recorded in the Student Complaint Log.

PHSU-ST. LOUIS provides published policies on Grade Appeals and Grade Appeals are **NOT** considered as complaints that are to be included in the Student Complaints Log.

# SEXUAL HARASSMENT, SEXUAL VIOLENCE, GENDER DISCRIMINATION POLICY (TITLE IX POLICY)

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## INTRODUCTION

Ponce Health Sciences University (“PHSU” or the “University”) strives to provide a place of work and study free of sexual harassment and sex and gender-based discrimination. When sexual harassment has occurred, PHSU will act to stop the harassment, prevent its recurrence, and discipline and/or take other appropriate action against those responsible. The University is committed to the safety and security of the students and employees on our campuses and will provide appropriate support to, treatment of, and information to any student or employee who may be harmed by an act of sexual harassment.

Acts of sexual harassment, which include sexual assault, stalking, dating violence, and domestic violence as defined in this policy, are unacceptable and are prohibited at PHSU.

This policy addresses the University’s responsibilities under Title IX of the Higher Education Amendments of 1972, 20 U.S. C. § 1681 et seq. (“Title IX”) and the Violence Against Women Reauthorization Act of 2013 (VAWA) and other applicable federal and state statutes. Title IX prohibits discrimination on the basis of sex in educational programs and activities that receive federal assistance. Similarly, VAWA requires that schools have procedures in place to respond to allegations of sexual assault, dating violence, domestic violence, and stalking.

## SCOPE

This policy covers how PHSU will respond to allegations of sexual harassment regardless of whether the alleged perpetrator (“Respondent”) or the alleged victim (“Complainant”) is a student, faculty, staff or third party. This policy applies to conduct that occurs on University property or at University-sponsored activities or events. The University may also address reports that occur off-campus and/or online when the conduct occurs in the context of the University’s programs or activities or affects a substantial University interest.

This policy governs sexual harassment that constitutes sex-based harassment; however, not all behaviors prohibited under this policy are prohibited under Title IX. PHSU has adopted a “two-pronged” approach. Complaints that allege behaviors that meet the jurisdictional requirements under Title IX will proceed using the *Title IX Resolution Procedures*. Complaints that alleged behaviors that do not meet the definitions and jurisdictional requirements of Title IX, but are otherwise prohibited under this policy, may alternatively use the procedure for *Non-Title IX Resolution Procedures*. The University will determine which procedures to use, as outlined in this policy, based on the constellation of facts and circumstances surrounding the report or Complaint as well as the following factors:

- a. what is reported to have occurred
- b. applicable law and related definitions
- c. the status of the Complainant or Respondent as student, employee, or third-party
- d. where and in what context the harassing behavior is reported to have occurred
- e. whether there are continuing effects of such reported behavior on campus or within the University’s educational programs or associated activities.

The Title IX Coordinator is the University official designated to evaluate reports to determine which law(s) attach, what threshold each law holds under the various laws, and which resolution procedures to utilize to resolve such reported behavior.

Even if the Respondent is unknown or is not a member of the University community, PHSU will assist the Complainant in identifying appropriate campus and local resources and support options and/or, when criminal conduct is alleged, in contacting local or campus law enforcement if he or she would like to file a police report. In addition, the University may take other actions as appropriate to protect the Complainant against third parties, such as barring individuals from University property and/or events. When the Respondent is enrolled in or employed by another institution, the University can assist the Complainant in liaising with the appropriate individual at that institution.

This policy distinguishes between **reporting** a sexual misconduct incident to University officials and **filing a Complaint**. Reporting a sexual harassment incident allows the University to provide support and resources to the Complainant while not necessarily resulting in the initiation of the investigation and resolution procedures described in the policy. A formal process with investigation and potential disciplinary action only occurs with the filing of a Complaint.

Other acts of discrimination on the basis of sex are also prohibited at PHSU but are not addressed using this policy. Reports or Complaints alleging discrimination based on pregnancy, different treatment based on gender, or other forms of sex discrimination will be referred to and decided by the appropriate University office. Acts of other prohibited harassment or discrimination that are not sex-based, for example race, ethnicity, national origin, etc. if reported to the Title IX Coordinator will be referred to the appropriate administrator and responded to using the appropriate University policies and procedures.

## DEFINITIONS

### SEXUAL HARASSMENT

As outlined above, the University prohibits conduct as defined under Title IX, but also behaviors that fall outside of the scope of conduct prohibited by Title IX. If a report constitutes sexual harassment under this policy, the University will determine which resolution procedures to utilize to resolve the Complaint.

For purposes of this policy, all of the following definitions constitute conduct to be “on the basis of sex.” The University will treat attempts to commit any sexual harassment as if those attempts had been completed. Behaviors that are not on the basis of sex may still be prohibited by other University policies and will be addressed by the appropriate department.

**Hostile Environment Sexual Harassment** means unwelcome verbal, written or physical conduct based on sex, sexual orientation and/or gender identity, which has the purpose or effect of unreasonably interfering with an individual’s work or education (including living conditions) or that creates an intimidating, hostile or offensive environment. *To meet the threshold for Title IX, a reasonable person must determine the unwelcome conduct to be so severe, pervasive, and objectively offensive that it effectively denies a person equal access to the University’s education program or activity.*

**Quid Pro Quo Sexual Harassment** is a form of harassment that consists of unwelcome sexual advances, requests for sexual favors, or other verbal, written, or physical conduct of a sexual nature when a person affiliated with the University conditions the provision of an aid, benefit, or service of the University on an individual’s participation in the unwelcome sexual conduct. *To meet the threshold for Title IX, an employee<sup>1</sup> of the University must condition the provision of an aid, benefit, or service of the University on an individual’s participation in the unwelcome sexual conduct.*

## SEXUAL ASSAULT

The following four offenses constitute acts of sexual assault: Non-consensual sexual penetration, nonconsensual sexual touching, incest, and statutory rape.

**Non-Consensual Sexual Penetration** is defined as penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim.

**Non-Consensual Sexual Contact** is defined as the touching of the private body parts of another person, for the purpose of sexual gratification, without the consent of the victim. Private body parts for purposes of this policy are breast, buttocks, and groin.

**Incest** is sexual intercourse between persons who are related to each other within the degrees wherein marriage is prohibited by law.

**Statutory Rape** is sexual intercourse with a person who is under the statutory age of consent.<sup>2</sup>

**Dating Violence** encompasses a wide range of behaviors committed by a person who is or has been in a social relationship of a romantic or intimate nature with the Complainant. The existence of such a relationship shall be determined based on the Complainant's statement and with consideration of the length of the relationship, the type of relationship, and the frequency of interaction between the persons involved in the relationship. For the purposes of this definition, dating violence includes, but is not limited to, sexual or physical abuse or the threat of such abuse. Dating violence does not include acts covered under the definition of domestic violence.

**Domestic Violence** encompasses a wide range of behaviors including sexual assault, physical abuse, and the threat of such abuses committed by a current or former spouse or intimate partner of the victim; by a person with whom the victim shares a child in common; by a person who is cohabitating with or has cohabitated with, the victim as a spouse or intimate partner; by a person similarly situated to a spouse of the victim, or by any other person against an adult or youth victim protected from those acts by domestic or family violence laws of the jurisdiction in which the crime of violence occurred. Domestic violence, as defined by Title IX, is considered relationship violence and must be "on the basis of sex." The laws of the jurisdiction will be determined upon reporting consistent with where the offense is reported to have occurred (Missouri versus Puerto Rico.)

**Stalking** is defined as engaging in a course of conduct directed at a specific person that would cause a reasonable person to fear for the person's safety or the safety of others or suffer substantial emotional distress. A course of conduct means two or more acts, including, but not limited to, acts in which the stalker directly, indirectly, or through third parties, by any action, method, device, or means, follows, monitors, observes, surveils, threatens, or communicates to or about a person, or interferes with a person's property. A reasonable person means a reasonable person under similar circumstances and with similar identities to the Complainant. Substantial emotional distress means significant mental suffering or anguish that may but does not necessarily require medical or other professional treatment or counseling.

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<sup>1</sup> An "employee" for purposes of compliance with Title IX is a paid person working directly for the University. Unpaid volunteers no matter if they are part-time, full-time, or temporary and/or third-party contractors who work on campus or for the University subsequent to a contract the University holds with a vendor do not constitute "employees" for purposes of Title IX.

<sup>2</sup> The age of consent is different in Puerto Rico versus Missouri where PHSU has campuses. See the appropriate jurisdiction to determine the age of consent.

**Sexual Exploitation** means taking non-consensual or abusive sexual advantage of another person for one's own advantage or benefit or for the advantage or benefit of anyone other than the person being exploited. Examples include but are not limited to non-consensual photography, video-, or audio- recording of sexual images or activity, distributing, or threatening to distribute images of sexual activity without consent or through intimidation or coercion, and observing a consensual sexual act without the prior knowledge or consent of all involved parties. In some circumstances, Sexual Exploitation may also meet the definition of hostile environment harassment and may be resolved under Title IX Resolution Procedures.

## DEFINITION OF CONSENT

Consent means voluntary, informed, uncoerced agreement through words and/or actions freely given, which a reasonable person would interpret as a willingness to participate in mutually agreed-upon sexual acts. Consensual sexual activity happens when each partner willingly and affirmatively chooses to participate and is of age and in a position to exercise independent judgment about the matter.

Indications that consent is *not present* include:

- when physical force is used or there is a reasonable belief of the threat of physical force, including when one person overcomes the physical limitations of another person.
- when coercion is present. Coercion means the improper use of pressure to compel another individual to initiate or continue sexual activity against the individual's will. Coercion may include intimidation, manipulation, and/or extortion. Words or conduct may constitute coercion if they wrongfully impair another individual's freedom of will and ability to choose whether to engage in sexual activity.
- when a person is incapable of making an intentional decision to participate in a sexual act, which could include instances in which the person is in a state of incapacitation, which could be permanent or temporary. Evaluations of capacity will be viewed in hindsight using a reasonable person standard.

Important points regarding consent include:

- Consent to one act does not constitute consent to another act.
- Consent on a prior occasion does not constitute consent on a subsequent occasion.
- The existence of a prior or current relationship does not, in itself, constitute consent.
- Consent can be withdrawn or modified at any time.
- Consent is not implicit in a person's manner of dress.
- Accepting a meal, a gift, or an invitation for a date does not imply or constitute consent.
- A person's lack of verbal or physical resistance or submission resulting from the use or threat of force does not constitute consent.
- Silence and passivity do not necessarily constitute consent.
- Initiation by someone who a reasonable person knows or should have known to be deemed incapacitated is not consent.
- A person's consent to engage in sexual activity with one person does not constitute consent to engage in sexual activity with another.

A person cannot consent to sexual activity if that person is unable to understand the nature of the activity or give knowing consent due to circumstances, including without limitation when a person is incapacitated or not of legal age.

A person who is asleep, semi-conscious, or unconscious is considered incapacitated and unable to consent. Additionally, a person may be incapacitated due to a temporary or permanent mental or physical disability.

In the context of PHSU’s policy, incapacitation is the state in which a person’s perception or judgment is so impaired that they lack the cognitive capacity to make or act on conscious decisions. The use of drugs or alcohol can cause incapacitation, which is a state beyond mere intoxication. An individual who is incapacitated is unable to consent to a sexual activity. Engaging in sexual activity with an individual who is incapacitated (and therefore unable to consent), where a person knows or ought reasonably to have understood that the individual is incapacitated, constitutes sexual harassment and is a violation of PHSU’s policy.

## **POLICY DEFINITIONS**

**Advisor** is a person of the Complainant or Respondent’s choice who acts as a support person during the formal or informal resolution process. The Advisor may attend any interview, meeting, or proceeding, but the Advisor may not actively participate and may not serve as a proxy for the party. For resolutions under the Title IX Resolution Procedures, the Advisor may attend the hearing and conduct cross-examination of the other party and any witnesses at the hearing; otherwise, the Advisor may not actively participate in the hearing. If a party does not have an Advisor present at a hearing required under the Title IX Resolution Procedures, the University will provide, without fee or charge to that party, an Advisor of the University’s choice to conduct cross-examination on behalf of that party.

**Complainant** is a person who is alleged to be the victim of conduct that could constitute sexual harassment under this policy.

Complaint means a written statement filed by a Complainant or signed by the Title IX Coordinator alleging sexual harassment against a Respondent and requesting to proceed utilizing the University resolution procedures outlined in this policy. A Complaint may be completed by the Complainant in person or submitted by email, mail or by telephone to the Title IX Coordinator.

**Decision-maker** is a trained person or persons that will make the determination of responsibility at the conclusion of the Title IX or Non-Title IX Resolution Procedures or following an appeal. The Decision-Maker will provide the determination in writing and cannot be the same person as the Title IX Coordinator or the Investigator. In the case of an Appeal, the Appeals Decision-Maker will be different from the person or persons who made the initial determination. The Decision-Maker may be an employee or a contracted service provider. More than one Decision-maker may be utilized, and the parties will be informed prior to the hearing of the names of such persons.

**Investigator** is a trained person assigned to conduct the investigation upon the signing of a Complaint or on the basis of a report in the Non-Title IX process. The Investigator may be the Title IX Coordinator, an employee who has been provided with required and sufficient training, or a contracted service provider. More than one Investigator may be appointed as determined by the University.

**Respondent** is a person who has been reported to be the perpetrator of conduct that constitute sexual harassment under this policy.

**Title IX Coordinator** is the PHSU employee responsible for ensuring compliance with the University’s Title IX program, including the effective implementation of supportive measures and remedies. The Title IX Coordinator or the President may delegate responsibilities under this policy to a designee, who may or may not be campus specific, who will be appropriately trained per the requirements of federal and state or Territory law (if applicable). For purposes of this policy, any reference to the Title IX Coordinator should be read as the “Title IX Coordinator or other designee.”

## REPORTING OPTIONS AND UNIVERSITY RESPONSE

Any member of the PHSU community who believes that they have experienced sexual harassment or discrimination, including acts which would constitute sexual assault, domestic violence, dating violence, stalking, or sexual exploitation in violation of this policy, is encouraged to report the incident(s) as soon as possible. PHSU urges an individual who has been subjected to sexual harassment to report, whether or not they intend, at that time, to press criminal charges, seek civil restitution, or pursue internal disciplinary measures. While reporting is encouraged, people have the right to report or not report the incident to the University and/or to law enforcement.

Additionally, any other person with knowledge of sexual harassment is encouraged to report the incident to the Title IX Coordinator. If the Title IX Coordinator is the complainant of said behavior, the Coordinator should contact the institution's Chief Human Resources officer.

### GETTING IMMEDIATE HELP

Individuals are encouraged to contact 9-1-1 for an immediate need and to seek medical treatment as soon as possible following an incident that poses a threat to the safety or physical well-being of any person or following a potential criminal offense. See the respective campus appendix for more information on campus contacts for Title IX and security as well as local law enforcement agencies.

### REPORTING TO LAW ENFORCEMENT

The University encourages any student or employee who has experienced any crime, including acts of domestic violence, dating violence, sexual assault, or stalking to report the incident to the local law enforcement agency with jurisdiction.

Campus Security or the Title IX Coordinator can assist a victim in contacting appropriate law enforcement officials and will cooperate within the extent permitted by law with law enforcement agencies if a victim decides to pursue the criminal process. Victims also have the option to decline to notify law enforcement authorities. The University will never condition any institutional response on a victim's reporting to or cooperation with law enforcement as those processes are separate and distinct.

Reports made to the police will not automatically be reported to PHSU. A separate report will have to be made if a person wishes to report to the University.

### REPORTING TO THE TITLE IX COORDINATOR OR THE UNIVERSITY

Any PHSU student, employee or staff member who believes they have been subjected to sexual harassment is encouraged to report these incidents to the Title IX Coordinator or their campus representative. A Title IX report can be made in person or by phone during office hours or via e-mail, voicemail, or physical hard copy postal mail at any time. Any person can make a report for any campus location to the institution's Title IX Coordinator:

#### **Title IX Coordinator**

Jonaira Arroyo, M. Ed, LPC  
Academic Tower 1st Floor Office 107  
787-840-2575 Ext. 5734  
388 Zona Industrial Reparada 2  
Ponce, PR 00716  
[jarroyo@psm.edu](mailto:jarroyo@psm.edu)

### REPORTING TO CONFIDENTIAL RESOURCES

Confidential resources exist and may be utilized in lieu of reporting. Missouri and Puerto Rico law

provide those communications with certain *confidential resources* such as medical doctors and nurses, licensed marital and family therapists, licensed professional counselors, etc. are privileged and not subject to further disclosure except as provided by law. Reports made to confidential resources, on or off campus, will not result in a complaint being filed with the University. Please see the respective appendix by campus for confidential resources.

### **ADDITIONAL REPORTING OPTIONS**

Filing a Complaint under this policy does not preclude a student or employee from filing a written complaint with the U.S. Department of Education's Office for Civil Rights.

Most OCR staff are working remotely because of the pandemic. Therefore, to ensure receipt of your correspondence, please consider emailing ([OCR@ed.gov](mailto:OCR@ed.gov)) or faxing (202-453-6012) it to their office, where it will receive immediate attention. If neither of these options are available to you, mail your correspondence to the address below, and they will process it as soon as conditions allow. You may also contact OCR at 800-421-3481 or [OCR@ed.gov](mailto:OCR@ed.gov) to confirm receipt of your correspondence.

Anyone can contact the Main Headquarters for OCR by using the information below.

**U.S. Department of Education**  
Office for Civil Rights  
Lyndon Baines Johnson Department of Education Bldg.  
400 Maryland Avenue, SW  
Washington, DC 20202-1100

### **WHO MUST REPORT?**

Except for University-recognized confidential resources, all PHSU employees (including student workers) are considered *Responsible Persons* and must therefore report to the Title IX Coordinator any sexual harassment allegations of which they become aware. Additionally, if any employee should learn of or suspect the abuse of any minor child on campus or within a campus program or activity, the University requires that that employee report that information to law enforcement within 24 hours.

### **AMNESTY FOR STUDENTS WHO REPORT PROHIBITED SEXUAL CONDUCT**

PHSU recognizes that a student who is under the influence of alcohol and/or drugs at the time of an incident of sexual harassment may be hesitant to report for fear of disciplinary actions related to the student's own violation of the Code of Student Conduct. PHSU will not impose disciplinary actions on students who report sexual harassment, either as a victim or as a witness, solely for possessing or being under the influence of alcohol and/or drugs at the time of the incident. The seriousness of sexual harassment is a major concern, and the University does not want any circumstance to inhibit the reporting of sexual harassment. The University may offer leniency with respect to other violations which may become known as a result of such reports, depending on the circumstances involved. The Title IX Coordinator will make the determination on behalf of the University.

### **OUTREACH BY THE TITLE IX COORDINATOR**

When a report or Complaint of sexual harassment is made under this policy, the Title IX Coordinator (or designee) will confidentially contact the Complainant to offer supportive measures and explain the options for proceeding, including the process for filing a Complaint. The Coordinator will consider the Complainant's wishes with respect to supportive measures and inform him or her of the availability of supportive measures with or without filing a Complaint. The Complainant does not have to decide whether to pursue a Complaint or to name the other party/ies at the time of the report.

### **SUPPORTIVE MEASURES**

Upon receipt of a report or Complaint of an alleged violation of this policy, the University will pro-



vide reasonable and appropriate supportive measures. Supportive measures are available regardless of whether the Complainant chooses to pursue any action under this policy, including before and after the filing of a Complaint or where no Complaint has been filed. Supportive measures are available to the Complainant, Respondent, and as appropriate, witnesses or other impacted individuals, as determined by the Title IX Coordinator. The Title IX Coordinator will maintain consistent contact with the parties to ensure that safety and emotional and physical well-being are being addressed. Generally, supportive measures are meant to be short-term in nature and will be re-evaluated on a periodic basis. To the extent there is a continuing need for supportive measures after the conclusion of the resolution process, the Title IX Coordinator will work with appropriate school resources to provide continued assistance to the parties.

Appropriate actions may include, but are not necessarily limited to, the following:

- Housing reassignments (as applicable where on campus housing is offered and available);
- Class reassignments;
- No contact directives;
- Limitation on extracurricular activities;
- Removal from the University community;
- Referral to University disciplinary process;
- Training; or
- Other appropriate actions as necessary to stop sexual harassment, prevent its recurrence, or remedy its effect on the Complainant or University community.

### **INTERIM REMOVAL**

In connection with this policy, in circumstances seriously affecting the health or well-being of any person, or where physical safety is seriously threatened, or where the ability of the University to carry out its essential operations is seriously threatened or impaired, the President or an authorized representative may summarily suspend, dismiss, or bar any person from the University. Prior to acting against a student or employee in response to an allegation that arises from a Complaint under the jurisdiction of Title IX, the University will undertake an individualized safety and risk analysis, determine that an immediate threat to the physical health or safety of any person arising from the allegations justifies removal, and provide written notice to the Party. In all such cases involving students, actions taken will be reviewed promptly, typically within one week, by the appropriate University authority. Removals subject to Title IX will include an opportunity for appeal by the Respondent. *\*As a note, the person who renders the decision on emergency removal subject to a complaint falling under the jurisdiction of Title IX is considered a Decision-Maker under Title IX and will not be able to subsequently render further decisions in the process.*

Complaints involving employees as the Respondent will be subject to the leave provisions that rest within Human Resources and could involve placing the employee on administrative leave (with or without pay) depending on the nature of the reported offense, the determination of an ongoing risk to public safety, and/or other factors as determined by Human Resources.

### **RIGHTS OF THE PARTIES**

The Title IX Coordinator will ensure that the Complainant receives an explanation of rights and options written in plain language with concise information. The written notification of rights and options will include the following:

- The importance of obtaining and preserving forensic and other evidence;
- The right to report or not report the alleged incident to the University, law enforcement or both, including information about the Complainant's right to privacy and which reporting methods are confidential;

- The right to request and receive assistance from campus authorities in notifying law enforcement;
- The right to request and receive assistance in obtaining and enforcing a campus-issued order of protection or no contact order;
- The right to speak to and receive assistance from on and off campus confidential resources and other organizations that provide support and services to victims and survivors;
- The right to assistance from the University in accessing and navigating campus and local health and mental health services, counseling, advocacy services, legal assistance, financial aid services and immigration/Visa assistance;
- The right to supportive measures with or without the filing of a Complaint, no matter where the incident is reported to have occurred and that the University will consider the Complainant's wishes with respect to available supportive measures;
- The right to request a Formal or Informal Resolution if cause is found to proceed under this policy and a summary of the appropriate resolution procedures;
- Contact information for all the people and organizations listed herein; and
- Complainants have the right to request an end to the process except as set forth in this policy.

If a Complaint is filed, the Complainant and the Respondent will receive a written notification of rights and options regarding the resolution process, to include the following:

- The right for Complainants and Respondents to be treated equitably by the University which includes providing remedies to a Complainant where a determination of responsibility for sexual harassment has been made against the Respondent, and by following a resolution process that complies with this policy;
- The right to a fair, impartial, proceeding that begins promptly and is completed within reasonably prompt time frames;
- The right to a resolution process that is consistent with the University's policies, transparent to the Complainant and Respondent, and in which the burden of proof and of gathering evidence rests with the University and not the parties;
- The right to an Advisor of the party's choosing during the resolution process. If a party does not have an Advisor present at any required hearing, the University will provide without fee or charge, an Advisor of the University's choice for purposes of conducting cross examination;
- The right to reasonable accommodations during any hearing, such as not being in the same room as the other party;
- The right to an objective evaluation of all relevant evidence—including both inculpatory and exculpatory evidence—and provide that credibility determinations will not be based on a person's status as a Complainant, Respondent, or witness;
- The right to a determination regarding responsibility made at the conclusion of the resolution process and that the University makes no prior presumption of responsibility; and
- The right not to be retaliated against for filing a Complaint and/or for participating in an Informal or Formal Resolution.

## **PROHIBITION ON RETALIATION**

It is a violation of University policy to retaliate against any person making a report or Complaint of sexual harassment or against any person cooperating in the investigation (including testifying as a witness to or as a Respondent) of any allegation of sexual harassment.

Retaliation includes intimidation, threats, coercion, harassment, or other forms of discrimination against any individual who has brought forward a report or participated in the processes outlined in this policy. Retaliation should be reported promptly to the Title IX Coordinator. Individuals engaging in retaliation are subject to student or employee disciplinary action under the applicable University policy.

## CONFIDENTIALITY & PRIVACY

Issues of privacy and confidentiality play important roles in this policy and may affect individuals differently. Privacy and confidentiality are related but distinct terms. “Confidentiality” refers to the circumstances under which information will or will not be disclosed to others. “Privacy” refers to the discretion in information sharing that will be exercised by the University during any investigation or disciplinary processes under this policy.

Requests for confidentiality or use of anonymous reporting may limit the University’s ability to resolve an allegation using the University’s disciplinary proceedings. Individuals involved in investigations or disciplinary proceedings under this policy are encouraged to exercise discretion in sharing information to safeguard the integrity of the process and to avoid the appearance of retaliation. While discretion regarding the process is important, Complainants and Respondents are not restricted from discussing and sharing information with others who may support or assist them in presenting their case.

In some circumstances, the reporting responsibilities of employees, or the University’s responsibility to investigate, may conflict with the preferences of the Complainant and/or Respondent regarding privacy and confidentiality. Therefore, all individuals are encouraged to familiarize themselves with their options and responsibilities, and make use of confidential resources, if applicable, in determining their preferred course of action.

Medical and counseling records are privileged and confidential documents that the Parties will not be required to disclose. If one Party chooses to provide written consent regarding the disclosure, all Parties will have access to those records.

PHSU has an obligation to make reasonable efforts to investigate and address Complaints or reports of violations of this policy. In all such proceedings, the University will take into consideration the privacy of the parties to the extent possible.

Any additional disclosure of information related to the Complaint or report may be made if consistent with the Family Educational Rights and Privacy Act (FERPA) or the Title IX requirements.

## PARTICIPATION AND PRESUMPTIONS

Neither the Complainant nor the Respondent is required to participate in the resolution process outlined in these procedures. The school will not draw any adverse inferences from a Complainant’s or Respondent’s decision not to participate at any point during the process. An Investigator or Decision-maker, in the investigation or the resolution process respectively, will not make presumptions with regard to responsibility in advance of any decision.

The school presumes that reports of prohibited conduct are made in good faith. A finding that the alleged behavior does not constitute a violation of this school’s policy or that there is insufficient evidence to establish that the alleged conduct occurred as reported does not mean that the report was made in bad faith.

## OPTIONS FOR PROCEEDING THROUGH UNIVERSITY PROCESSES

### FILING A COMPLAINT

To initiate the Formal Resolution process, a Complainant must file a Complaint (or, for an offense that does not meet the jurisdiction of Title IX, a report must be received, evaluated, and referred to the appropriate office.) A Complaint is a written statement alleging sexual harassment against a Respondent and requesting to proceed utilizing the University’s Formal Resolution process.

A Complaint may be completed by the Complainant in person or submitted by email, mail or by telephone to the Title IX Coordinator. A Complaint may be filed at any time.

### **NO COMPLAINT**

Complainants have the right not to file a Complaint, yet they are highly encouraged to seek medical attention and counseling. Complainants who wish to file a Complaint at a later date, may do so by utilizing any of the options outlined in this policy. However, please note that a delay in reporting could create obstacles to the University's process for stopping harassment and/or discrimination, remedying its effects, and preventing recurrence as well as potentially weakening evidence that could be useful in determining whether sexual harassment occurred, in obtaining an order of protection, or for the State or territory in being able to proceed with a criminal proceeding.

### **UNIVERSITY - INITIATED COMPLAINTS**

In limited cases, the Title IX Coordinator may initiate a Complaint without a request by the Complainant upon receipt of a report of sexual harassment. The Title IX Coordinator will sign the Complaint when the Title IX Coordinator, in his or her discretion, determines that a grievance process is warranted given the reported behavior.

A Complainant retains standing as a Complainant even in cases where the Title IX Coordinator initiates the Complaint. If the Title IX Coordinator initiates a Complaint, they will advise the Complainant that they have done so and will provide the rationale to the Complainant regarding why they are proceeding and her or his rights throughout the process.

### **INFORMAL RESOLUTION**

Informal Resolution options are designed to address the harm that has been caused and to identify what is needed to repair the harm and restore trust through a less formal resolution process. Not all behaviors are appropriate for informal resolution and the Title IX Coordinator will determine whether it is appropriate to offer the parties informal resolution in lieu of a formal investigation of the Complaint. For example, Informal Resolution is never appropriate to resolve allegations that an employee sexually harassed a student.

If the Title IX Coordinator determines that Informal Resolution is appropriate, the parties will be provided written notice disclosing: the allegations, the requirements of the informal resolution process, any consequences resulting from participating in the informal resolution process, and the records that will be maintained or could be shared. Both parties must provide voluntary, written consent to Informal Resolution. At any time prior to agreeing to a resolution, any party has the right to withdraw from the Informal Resolution process and resume the Formal Resolution process with respect to the Complaint.

### **DETERMINATION OF PROCESS AND DISMISSALS**

Once a Complaint is filed, the Title IX Coordinator will initiate a prompt review of the Complaint to determine which resolution procedures to follow. If Informal Resolution is preferred, the Title IX Coordinator will determine whether the Complaint is suitable for Informal Resolution and seek to determine if the parties are also willing to engage in an informal process.

The University will utilize the Title IX Resolution Procedures if all the following are true based on the alleged Complaint:

1. The Respondent is a current student or employee;
2. The Complainant is a current student or employee;
3. The conduct alleged meets the definition of Sexual Harassment under Title IX;

4. The alleged conduct occurred in the University’s education program or activity where the University had substantial control of the Respondent during the time that the harassing behavior reportedly occurred; and
5. The alleged conduct occurred in the United States.

Complaints that do not meet all the requirements above but still allege sexual harassment may proceed using the procedures for Non-Title IX Resolution at the discretion of the Title IX Coordinator.

Complaints that do not on their face state sexual harassment (for example behaviors that are not based on sex or gender), will not be adjudicated using this policy but will be referred for review under other University policies. Complaints where the Respondent is not affiliated with the University will be dismissed, but the Complainant retains the ability to receive supportive measures, including actions to protect the safety of the Complainant.

At the University’s discretion, the Title Coordinator may dismiss a Complaint or any allegations therein if, at any time during the investigation or hearing:

- a Complainant notifies the Title IX Coordinator in writing that they would like to withdraw the Complaint;
- the Respondent is no longer enrolled at the University; or
- Specific circumstances prevent the University from gathering evidence sufficient to reach a determination as to the Complaint or allegations therein.

Upon any dismissal, the University will promptly send written notice of the dismissal and the rationale for doing so simultaneously to the parties. The dismissal determination of a Complaint or any included allegations may be appealed following the appeals process outlined in this policy. A Complainant who decides to withdraw a Complaint may later request to reinstate it or refile it.

## **CONSOLIDATIONS**

The Title IX Coordinator has the discretion to consolidate multiple Complaints into a single investigation if evidence relevant to one incident might be relevant to the others. Where a Complaint involves more than one Complainant or more than one Respondent, references in this section to the singular “Party,” “Complainant,” or “Respondent” include the plural, as applicable.

If a case involves violations of other University policies, the Title IX Coordinator, in consultation with other school officials, will determine whether all violations will be considered using the resolution procedures outlined in this policy or if different processes would be more appropriate for the separate violations.

## **RESOLUTION TIMEFRAME**

Upon the signing of a Complaint, the University will make a good faith effort to complete the resolution process within 60 calendar days, excluding appeals. The timeline may be extended for good cause. The University will notify the parties in writing when a delay is anticipated and the rationale for any extensions or delays as appropriate, as well as an estimate of how much additional time will be needed to complete the process.

## **FORMAL RESOLUTION**

### **NOTICE OF ALLEGATIONS**

For Complaints that are proceeding under Formal Resolution, the Title IX Coordinator shall provide the Complainant and Respondent with timely written notice of the allegations, including

the identities of the parties involved in the incident, if known, the date, time, and location of the alleged violation, if known, and the conduct allegedly constituting the violation. Amendments and updates to the notice may be made as the investigation progresses and more information becomes available regarding the addition or dismissal of various charges.

## **INVESTIGATION**

Following notice to the parties, the Title IX Coordinator will appoint an Investigator(s) to investigate the allegations subject to the Formal Resolution process. The investigation may include, among other things, interviewing the Complainant, the Respondent, and any witnesses; reviewing law enforcement investigation documents if applicable; reviewing relevant student or employment files (preserving confidentiality wherever necessary); and gathering and examining other relevant documents, social media, and evidence.

The Complainant and Respondent will be notified of the date, time and location of each meeting or interview that they are required or permitted to attend and shall have the right to be accompanied by an Advisor. During the investigation, the Advisor may attend any interview or meeting, but the Advisor may not actively participate and may not serve as a proxy for the party.

The Complainant and Respondent shall have the right to submit to the Investigator evidence, witness lists, and suggested questions for the other party and witnesses. Evidence regarding a party's medical history, including mental health counseling, treatment, or diagnosis, may not be considered without that party's written consent. All parties must submit any evidence they would like the Investigator to consider prior to the conclusion of the investigation period and assignment to resolution.

## **ASSIGNMENT TO RESOLUTION**

At the conclusion of the initial investigation stage, if not previously determined, the Title IX Coordinator will make a final determination as to the appropriate resolution procedures, specifically whether it will proceed under the procedures for a Hearing or for an Administrative Resolution.

At the time it is assigned to resolution, both the Complainant and Respondent and any appointed Decision-makers will be given an opportunity to request the removal or recusal of a Decision-maker due to a bias or conflict of interest. A request for removal must state with specificity the grounds for removal. A designee appointed by the Title IX Coordinator shall make the final decision regarding removal.

## **TITLE IX RESOLUTION PROCEDURES**

The following procedures apply only for Complaints that meet the requirements regarding definition and jurisdiction as of Title IX as outlined in the "Determination of Process and Dismissals" section.

### **EVIDENCE INSPECTION AND REVIEW PERIOD**

Prior to the conclusion of the investigation, the Complainant and Respondent will be given ten calendar days to inspect and review all evidence that is directly related to the Complaint and provided an opportunity to submit a written response. If a written response has been submitted, the Investigator will evaluate the information and determine if further investigation needs to be conducted to gather relevant evidence.

### **INVESTIGATIVE REPORT**

Following the evidence inspection and review period, the Investigator shall prepare a final investigative report summarizing and analyzing the evidence, including both evidence indicating the alleged behavior occurred and that it did not occur. The Title IX Coordinator will provide the final investigative report to the parties ten calendar days prior to the scheduling of any hearing required

under this policy. Both parties will be given the opportunity to provide a written response to the final investigative report.

### **PRE-HEARING CONFERENCE**

To promote a fair and expeditious hearing, the parties and their Advisors will attend a pre-hearing conference with the Decision-maker and/or the Title IX Coordinator. The prehearing conference assures that the parties and their Advisors understand the hearing process and allows for significant issues to be addressed in advance of the hearing.

### **HEARING PROCEDURES**

All hearings will be conducted in a live hearing format which means all parties and the Decision-maker may be physically present in the same geographic location, or at the request of either party or the University, the parties may be located in separate rooms with technology enabling the Decision-maker(s) and parties to simultaneously see and hear the party or the witness answering questions. The University will require all parties, Advisors, and witnesses to maintain appropriate decorum throughout the hearing. All hearings are closed to the public. A recording will be made by the University, but all other recordings are prohibited.

### **EVIDENTIARY CONSIDERATIONS AT THE HEARING**

Any evidence that the Decision-maker determines is relevant may be considered. The parties will have the opportunity to present the evidence they submitted, subject to any exclusions determined by the Decision-maker. Generally, the parties may not introduce evidence, including witness testimony, at the hearing that they did not identify during the pre-hearing process. However, the Decision-maker has the discretion to accept or exclude additional evidence presented at the hearing. In addition, the parties are expected not to spend time on undisputed facts or evidence that would be duplicative.

Questions and evidence about the complainant's sexual predisposition or prior sexual behavior are not relevant, unless such questions and evidence about the complainant's prior sexual behavior are offered to prove that someone other than the respondent committed the conduct alleged by the complainant, or if the questions and evidence concern specific incidents of the complainant's prior sexual behavior with respect to the respondent and are offered to prove consent. The decision-maker will not require, allow, rely upon, or otherwise use questions or evidence that constitute, or seek disclosure of, information protected under a legally recognized privilege, unless the person holding such privilege has waived the privilege.

### **CROSS-EXAMINATION**

The parties' Advisors will have the opportunity to cross examine the other party (and witnesses, if any). The Advisor is not to represent a party, but only to relay the party's cross-examination questions that the party wishes to have asked of the other party and witnesses. Advisors may not raise objections or make statements or arguments during the live hearing. If a party does not have an Advisor, the University will appoint one on behalf of the party free of charge.

Only relevant cross-examination questions and follow-up questions, including those that challenge credibility, may be asked. Before a Complainant, Respondent, or witness answers a cross-examination or other question, the Decision-maker first must determine whether the question is relevant or cumulative and must explain any decision to exclude a question that is not relevant or is cumulative.

If a party or a party's Advisor refuses to comply with the University's established rules of decorum for the hearing, the party or Advisor will be removed, and the party will receive an appointed Advisor of the University's choosing for the remainder of the hearing.

## **NON-TITLE IX RESOLUTION PROCEDURES**

### **INVESTIGATIVE REPORT**

The Investigator shall prepare a final investigative report summarizing and analyzing the evidence, including both evidence indicating the alleged behavior occurred and/or that it did not occur. The Title IX Coordinator will provide the final investigative report to the Decision-maker.

### **REVIEW PERIOD**

The Decision-maker will review the investigative report. The Decision-maker is responsible for maintaining an orderly, fair, and impartial process. The Decision-maker, in his or her discretion, may pose additional questions to the parties or to witnesses in writing and the parties shall have 5 days to respond. Conversely, the parties may pose questions that they would like the other party to answer for consideration by the Decision-maker. The Decision-maker will document any additional information gathered.

### **DETERMINATION OF RESPONSIBILITY**

At the conclusion of either the Title IX Resolution or Non-Title IX Resolution Procedures, the Decision-maker will review the evidence provided by all parties and will make a final determination of responsibility. The Decision-maker shall use a preponderance of the evidence standard to determine whether the alleged violation of the policy occurred. Preponderance of the Evidence is a standard of proof where it is more likely than not that a policy violation occurred.

If there is a finding of responsibility, the determination of sanctions and remedies will be made by the Decision-Maker in consultation with a student affairs representative for cases in which the Respondent is a student, and in consultation with Human Resources or other PHSU Administrators for cases in which the Respondent is an employee.

### **WRITTEN DETERMINATION**

The Complainant and Respondent will simultaneously receive a written determination regarding responsibility applying the preponderance of the evidence standard typically within ten business days. The written determination letter, drafted by the Decision-maker, will include:

- The allegations constituting sexual misconduct;
- A description of the procedural steps taken during the grievance process including any notifications to the parties, interviews with parties and witnesses, site visits, and methods used to gather evidence; Findings of fact supporting the determination;
- Conclusions regarding the application of the policy to the facts;
- A statement, and rationale for the result of each allegation including findings, sanctions, and remedies; and
- Procedures and permissible bases for the parties to appeal the determination for appeal.

The determination of responsibility becomes final either on notification of the results of the appeal, or the date on which an appeal would no longer be considered timely.

Remedies and supportive measures that do not impact the Respondent should not be disclosed in the written determination; rather the determination should simply state that remedies will be provided to the Complainant.

### **SANCTIONS AND REMEDIES**

Remedies and sanctions are designed to restore or preserve equal access to the recipient's education program or activity. Such remedies may include supportive measures however, remedies need not be non-disciplinary or non-punitive and need not avoid burdening the Respondent.



Violations of this policy are serious, and the sanctions will take into account the nature and severity of the violation and may include one or more of the sanctions described below.

### **STUDENT SANCTIONS**

- Written reprimand
- Class reassignments
- No contact directives
- Limitation on extracurricular activities
- Training
- Administrative Dismissal
- Disciplinary Probation
- Disciplinary Suspension
- Expulsion
- Loss of Privileges
- Restitution

### **EMPLOYEE SANCTIONS**

- Verbal Warning
- Written Warning
- Work Improvement Plan
- Preventive Education
- Administrative Leave with Pay
- Administrative Leave without Pay
- Change in job assignment
- Demotion
- Mandatory EAP program
- Termination

### **APPEALS**

The Complainant and the Respondent have equal rights to an impartial appeal. A Complainant or Respondent may file a written appeal with the Title IX Coordinator on the following grounds:

- Procedural irregularity that affected the outcome of the matter;
- New evidence that was not reasonably available at the time the determination regarding responsibility or dismissal was made, that could affect the outcome of the matter;
- The Title IX Coordinator, Investigator, or Decision-maker had a conflict of interest or bias for or against Complainants or Respondents generally or the individual Complainant or Respondent that affected the outcome of the matter.

The deadline for filing a written appeal is five business days from the date the parties are provided the written determination. The submission of an appeal stays any sanctions for the pendency of an appeal. Supportive measures remain available during the pendency of the appeal. The University will notify the other party of the appeal, and that other party will have an opportunity to submit a written statement in response to the appeal, within three business days.

The Appeals Decision-maker will decide appeals. The purpose of an appeal is not to initiate a review of substantive issues of fact or a new determination of whether a violation of University rules has occurred. The Appeals Decision-maker may decide to uphold the original decision or to return the case for additional proceedings or other action based on new evidence or to correct a procedural error.

The Appeal Decision-maker will summarize the decision in a written notification that will be sent simultaneously to the Complainant and Respondent within 10 business days of receiving the appeal. The written decision will describe the result of the appeal and the rationale for the result.

## **DISABILITY ACCOMMODATIONS AND INTERPRETIVE SERVICES**

Students with a disability who desire accommodation regarding this Policy must request accommodation to the Title IX Coordinator. The Title IX Coordinator will decide regarding the request after consultation with the Chair of the Reasonable Accommodation Committee and notify the appropriate Parties. An Individual will not be considered to have a disability allowing for an accommodation unless and until the student has fulfilled the obligation of providing the necessary and appropriate documentation and met the requirements for being provided with an accommodation(s).

Employees with a disability who desire accommodation regarding this Policy must request accommodation with Human Resources.

Similarly, those in need of interpretive services are encouraged to contact the Title IX Coordinator.

## **RECORD-KEEPING AND ANNUAL REPORTS**

PHSU will keep for seven (7) years, the following:

- All information obtained as part of each Complaint investigation, including any determination regarding responsibility and any audio or audiovisual recording or transcript; any disciplinary sanctions and/or remedies; any appeal, including the result of the appeal; and any informal resolution and the result therefrom.
- All information regarding any action taken, including supportive measures, and a rationale as to why a Complaint was not filed. If a Complainant was not provided supportive measures, a rationale must be provided as to why supportive measures were not provided.
- All training materials used to train Title IX Coordinators, Investigators, Decision-makers, and those who facilitate the informal resolution process.

Generally, information from a student's discipline file is not released without the written consent of the student. However, certain information may be provided to individuals within or outside the University who have a legitimate legal or educational interest in obtaining it. Typically, the information that is released to those outside of the University is limited to information associated with findings of "in violation" which resulted in a suspension or expulsion (discipline file). Please refer to the federal Family Educational Rights and Privacy Act of 1974 (FERPA).

Personnel files are the property of the University and will not be shared without a subpoena.

## **REVISION AND INTERPRETATION**

PHSU reserves the right to review and update this policy in accordance with changing legal requirements and the specific needs of the University.

Any questions of interpretation regarding this policy shall be referred to the Title IX Coordinator. The Title IX Coordinator's determination is final.

## **APPENDIX B: CONTACTING THE TITLE IX TEAM AT PHSU ST. LOUIS CAMPUS**

PHSU has procedures in place that serve to be sensitive to victims who report sexual assault, domestic violence, dating violence, and stalking, including informing individuals about their right to file criminal charges as well as the availability of counseling, health, mental health, victim advocacy,

legal assistance, visa and immigration assistance, student financial aid and other services on and/or off campus as well as additional remedies to prevent contact between a complainant and an accused party, such as changes to housing, academic, protective orders, transportation and working situations, if reasonably available. PHSU will make such accommodations or protective measures, if the victim requests them and if they are reasonably available, regardless of whether the victim chooses to report the crime to local law enforcement.

Students and employees should contact:

**Title IX Delegate – St. Louis Campus**  
 Palka Kumar  
 314-499-6808  
 710 N. Tucker Blvd Suite 200  
 St. Louis, MO 63101  
 pkumar@psm.edu

Upon receipt of a report of domestic violence, dating violence, sexual assault or stalking, the institution will provide written notification to students and employees about existing assistance with and/or information about obtaining resources and services including counseling, health, mental health, victim advocacy, legal assistance, visa and immigration assistance, student financial aid and assistance in notifying appropriate local law enforcement. These resources include the following:

**STL CAMPUS - ON AND OFF CAMPUS SERVICES FOR VICTIMS**

**ON CAMPUS**

TYPE OF SERVICE	SERVICE PROVIDER CONTACT INFORMATION
Professional Counseling: Individual, small group, academic counseling and advising, professional development, mental health	<b>Ponce Health Sciences University St. Louis</b> <b>Arriell Pinkston, PLPC</b> apinkston@psm.edu 314-887-1341
Physical Health	<b>Wellness Center partner with Mercy</b> <b>Kim Wickline, NP</b> Kimberly.wickline@mercy.net 314-827-3040
Visa and Immigration Assistance	<b>Palka Kumar</b> 314-499-6808 pkumar@psm.edu
Student Financial aid orientation and counseling	<b>Terry Brewer</b> tbrewer@psm.edu 314-238-8246
Campus Director: Employee and student assistance with reporting, accommodations, process questions	<b>Stefani Schuette, Ed.D.</b> sschuette@psm.edu 636-399-3908
Title IX Coordinator: Title IX Assistance, Lead Coordinator (Off-Site in Puerto Rico)	<b>Jonaira Arroyo, LPC</b> 787-840-2575 Ext. 5734 jarroyo@psm.edu
Title IX Assistance, On-Site Deputy Coordinator (On-Site in St. Louis)	<b>Palka Kumar</b> 314-499-6808 pkumar@psm.edu
Title IX-St. Louis Location (Student Reports): Title IX Assistance, On-Site Deputy Coordinator (On-Site in St. Louis)	<b>Susan Hemmer</b> shemmer@psm.edu 314-887-1360

Human Resources Department: Employee Assistance Program, Other Employment Needs	<b>Susan Hemmer</b> shemmer@psm.edu 314-887-1360
Emergency Help: Law Enforcement	<b>St. Louis Police Department</b> 9-1-1

## OFF CAMPUS

TYPE OF SERVICE	SERVICE PROVIDER CONTACT INFORMATION
Crisis Hotline & Counseling Services Individual, Couples and Family Counseling	<b>Safe Connections</b> Safeconnections.org Crisis Hotline - 314-531-2003 Counseling - 314-646-7500  <b>The Counseling and Social Advocacy Center - University of Missouri - St. Louis</b> 314-516-4613 csac@umsl.edu
Emergency Medicine	<b>SSM Saint Louis University Teaching Hospital</b> 1201 S. Grand Blvd. St. Louis, MO 63104 314-257-1320
Psychological Services on a referral basis Mental Health Crisis Hotline Suicide Hotline Behavioral Health Urgent Care	<b>The Counseling and Social Advocacy Center - University of Missouri - St. Louis</b> Counseling: 314-646-7500 314-516-4613 csac@umsl.edu  <b>Access Crisis Intervention (ACI)</b> 314-647-4357  <b>Missouri Department of Mental Health</b> Life Crisis Suicide Hotline www.bhrstl.org 24 hr. crisis helpline: 1-800-811-4760  <b>SSM Health</b> 12355 DePaul Drive Suite 150, St. Louis, MO 63044 314-344-7200
Legal Services Legal Services for domestic violence	<b>Legal Services of Eastern Missouri</b> 314-534-4200  <b>Legal Advocates for Abused Women</b> 314-664-6699 supportvictims.org/legal-advocates-for-abused-women
Visa and Immigration Assistance	<b>Legal Services of Eastern Missouri - Immigration Law Program</b> 314-256-8756
Sexual Assault: Crisis Intervention, Education Resources, Advocacy Sexual Assault Hotline	<b>St. Louis Regional Sexual Assault Center (YWCA)</b> 314-531-7273 (24-hour access) ywcastl.org/what-were-doing/womens-resource-center  <b>Bridgeway Sexual Assault Center Hotline</b> 877-946-6854 bridgewaybh.com/sexual-assault-services

Domestic Violence: Crisis Hotline & Intervention, Nights of Safety, Individual and Group Counseling & Support, Children's Treatment Program, Court Advocacy

**Alternatives for Living in a Violent Environment (ALIVE)**  
314-993-2777 (24-hour access/crisis line)  
alivestl.org

## REPEAL AND VALIDITY

This policy does not repeal the provisions established by other policies such as the **Unprofessional Behavior Policy**, the **Honor Code**, the **Mistreatment Policy**, the **Interpersonal Abuse Policy**, among others, but offers specific provisions to comply with the Title IX mandatory provisions for schools participating in Title IV funds programs.

*This policy will be effective from November 1, 2023.*

# FACILITIES

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Students are expected to treat the campus, its furnishings, fixtures, and technology with respect. Students that remove any of these items, deface, or destroy campus property will be subject to disciplinary action.

The safety and security of our campus community is of the utmost importance to the administration. Students should not prop open exits or open doors for anyone. If someone has forgotten their access badge or is having trouble accessing the building, students should contact security or the Campus Director.

## BUILDING HOURS

Student access to the campus will be Monday through Sunday, from 6:00 a.m. to 12:00 a.m. During normal business hours, Monday through Friday, 8:00 a.m. to 5:00 p.m., students will have access to all public spaces, i.e. classrooms, lecture halls, labs, administrative area, etc. During all other times, students will only have access to the rec area, open study spaces, and the library. The campus will be closed on certain holidays and the institution reserves the right to alter these times for any reason. Student Services or the Campus Director will notify students of any changes to these hours.

All entry doors will have key card and PIN access. Security will be present from 6:00 a.m. to 12:00 a.m. Monday through Sunday.

If you have any issues with accessing rooms, please contact the on-duty security officer.

## CAMPUS AREAS

### STUDENT RECREATION AREA

We are happy to have a student rec area which features a mini market, games, and a kitchen area. Students should keep their noise to a reasonable level when using this area. as there will be classes or studying going on in the surrounding areas.

Students are also responsible for keeping the kitchen area clean, including taking care of any messes on the counter, around the sink, in the refrigerator, or the microwave.

The mini market is based on an honor system, Students are required to pay for any items taken from the mini market. Any student caught taking merchandise from the market without paying will be subject to disciplinary action.

### PATIO

The patio is an outdoor area for the campus community. Students should not prop open the door for easy access to the rec area or allow any one from outside of the university onto campus.

Part of the patio furniture is a fire pit. Students are able to use the fire pit, but it is under the oversight of the Campus Director when it is available for use.

### LIBRARY

The library will be open to students during all building hours. Students that need access to the library collection will need to speak with the librarian. The library is considered a quiet area during all open hours.

## RESTROOMS/MOTHER'S ROOM

As with all campus facilities, restrooms should be treated with respect and students should clean up after themselves. There are men's and women's restrooms located on all floors. On the ground floor, there are two unisex restrooms, one of which includes a shower. Students should provide their own shower accessories, including shampoo, conditioner, soap, and towel. It is recommended that anyone using the shower wear sandals or flip flops. In emergency situations, the campus can provide toiletries and towels. Please contact the Dean of Enrollment Management and Student Success or the Campus Director to access these emergency supplies.

Any student that needs to utilize the mother's (Nursing) room, should contact the Campus Director for access.

## LABS

Students will not have access to the Micro, Standardized Patient or SIM lab without supervision of faculty or campus personnel.

## PHSU GROSS ANATOMY LABORATORY

### ACCESS POLICY

**Access to the Laboratory must always be authorized by the Anatomy Department.** The lab will be open Working Hours from 8:00 am – 5:00 pm Monday to Friday; Everyone Must “Sign-In” at the Anatomy Department Office.

**After Hours/Weekend Access:** MD and MSMS students will be able to access facilities using their access card issued at the beginning of the Academic year. After hours are Monday through Friday 5:00 p.m. to 11:00 p.m., and Saturday and Sunday 8:00 a.m. to 11:00 p.m.

Students are responsible for the proper use of the facilities. Laboratory Access will NOT be granted while students are scheduled to attend other lectures/courses. ONLY authorized MD and MSMS students may gain entrance to the laboratory and MUST have prior approval from the anatomy staff/faculty/chairperson.

### LABORATORY RULES

- A. It is expected that all individuals behave in a professional manner while in the laboratory and always maintain proper respect for the human dissection material, including skeletons. This professional attitude is also expected outside the laboratory, especially when discussing anatomy in public places.
- B. DO NOT PLAY MUSIC IN THE GROSS LAB.
- C. SMOKING, EATING, DRINKING ARE PROHIBITED IN THE LABORATORY.
- D. Photographs and/or video may NOT be taken in the laboratory unless taken by instructors.
- E. Only MD and MSMS students are allowed into the lab, and they must sign in before entering the laboratory to view or dissect cadaver materials. They MUST also sign out before leaving the lab. The sign in and sign out forms are available on the entry doors to the lab.
- F. Under NO circumstances may human cadaver material be removed from the laboratory.
- G. All cadaver material MUST remain in the dissection table unless you are instructed otherwise.
- H. It is the responsibility of each student to keep their work area as clean and neat as possible.
- I. All rules remain in effect after scheduled lab hours.

### SAFETY GUIDELINES

#### A. Laboratory Environment

The laboratory is to be maintained in a clean and orderly manner so that it remains as safe and pleasant as possible over the course of the year. Several characteristics of the lab environment that cannot be altered are cadaver odors, embalming fluid, and preservative fluid.

1. **Cadaver Odors.** All regions of the body contain fat, which has a perceptible odor. Furthermore, the gastrointestinal tract holds food in various stages of digestion, which may create an odor. These odors are not harmful but might seem so because they are disagreeable.
2. **Embalming Fluid.** The fluid is used to fix the tissues of the cadaver and kill any microorganisms. The PHSU embalming fluid contains the following chemicals: formalin, phenol [carbolic acid], glycerol, ethanol, and water. This is a standard formula used in most medical schools. You should be aware of the function, hazard, and, if applicable, the protection against each of these components.
  - a. **Formalin** is a solution of formaldehyde. Formaldehyde is used commercially in a wide variety of products, including shampoo and composition board; those of you planning to go into pathology will be exposed to it almost every day. Humans experience a varied response to formaldehyde, ranging from no reaction to systemic reactions. Since formaldehyde is *highly soluble in water*, it does not reach the lungs when inhaled, but is instead trapped in the upper respiratory tract.
  - b. **Phenol** (carbolic acid) is used as a germicidal agent; you may know that Joseph Lister first used carbolic acid successfully as an antiseptic in surgery and in the treatment of wounds. Phenol has an extremely low vapor pressure, so is present in only minute quantities in the lab air. *However, it can be absorbed through the skin*, so protect your hands with barrier cream and gloves.
  - c. **Glycerol**, or glycerin, is a polysaccharide used to help keep the joints of the cadaver flexible.
  - d. **Alcohol** is used as a germicidal preservative. It is extremely volatile, and therefore present in the lab air. It may dehydrate the skin after prolonged contact and may cause upper respiratory tract irritation. Use barrier cream, and gloves to help reduce exposure.
3. **Preservative Fluid.** This fluid is used to keep the body tissues moist so the cadaver will not dry out. *Drying of the cadaver can be a serious problem in the lab and care should be maintained throughout the course to minimize this as much as possible by using the preservative fluid.*

## RULES TO MINIMIZE HAZARDS

1. **Gloves are to be always worn during the dissection of the cadaver.** It should be noted that some individuals are allergic to latex and/or powdered gloves. If you have a known sensitivity to latex/powder or develop an allergic response to latex/powder, you should wear non-latex/powder-less gloves. *Dispose of gloves in the biohazard containers only. Do not take gloves outside the lab nor dispose of them in the restroom or trash containers.*
2. **Contact lenses are prohibited** in the Gross Anatomy Lab since they may absorb the chemicals used in the lab. Safety glasses are optional. They prevent eye exposure to chemicals and splashes in the lab. Students are to provide their own safety glasses.
3. **Shoes must cover the whole foot;** therefore open-toed/top vented shoes are PROHIBITED.
4. **Eye washes** are in the lab. Take the time to locate them when you enter the lab for the first time so that you can easily locate them in an emergency.
5. **Scalpel blades** must be handled with care and disposed of only in the “*red rectangular receptacles*” placed in the lab for this purpose. *They are labeled as “Biohazard waste SHARP-TAINER”.* Report any injuries to a member of the staff. A first aid kit is in the lab.
6. **Dissection tools** must NOT be left loose on the table. They should be washed and placed to dry on paper towels at the end of each lab period.
7. **Remove excess fluids from the table.** Make sure the floor around your dissecting table is free of fluid and tissue. Dispose of excess fluid in laboratory sinks.
8. **All cadaver material MUST remain in the dissection table** unless you are instructed otherwise.



9. **Avoid dropping tissue fragments on the floor**, as they will damage the floor, and may be a safety hazard. Use the bins under your table to collect them, and as soon as lab is over, empty the bins into the proper trash labeled as “*Biohazard*”. Dispose of the paper in the trash labeled as “*papers*”.
10. **Biohazard (tissue) material** is disposed regularly by the embalmer, so *do not mix discarded tissues with paper*. Major organs, limbs, etc.; should be kept with the rest of the cadaver to be buried at the end of the academic year.
11. **White Lab coats are a must for the lab.** *Wear them at all times in the laboratory.* Write your name or use an ID card in the front pocket, which will help the lab instructors to learn your name and prevent the “loss” of lab coats when they are left around the lab. Wash your coats regularly; dirty lab coats carry mold around the room and your house.
12. **Visitors are prohibited.** *This includes medical students from other institutions.* Enter and leave the laboratory via one entrance door which may be kept partially open. Make sure the second door is closed during dissecting time. All doors should be locked at the end of the day. Except for custodians, the only individuals allowed in the laboratory are those authorized by the Director of the Anatomical Sciences Course and the Assistant Dean, School of Medicine, and laboratory instructors.

## ILLNESS

1. **Should you experience illness** despite the protective measures outlined above, or you have a known sensitivity to any fluid component, or you have an existing condition that you feel may be exacerbated by the lab environment, contact the Course Coordinator/Course Director immediately to discuss the problem.
2. **If you sustain a wound while dissecting**, it should be reported to the anatomy staff. The wound should be washed thoroughly and bandaged. Bandages and dressing are available in the laboratory in the labeled drawers in the lab. If the wound is serious, the student should be taken to the Emergency Room for medical attention.

## PREGNANCY

Students who are pregnant or plan to become pregnant during the course, **MUST** contact the Course Coordinator.

*\*Note: The presence of phenols and formaldehydes has been reported to be hazardous to pregnant persons and their fetus. If you are pregnant or are planning to become pregnant you need to consult your physician.*

## EMOTIONAL CONCERNS

Emotional adjustment to cadaver dissection is a normal process experienced by all medical students. Should you encounter difficulties making this adjustment please contact the Course Coordinator/ Course Director.

## GENERAL INSTRUCTIONS

1. Cadavers will be set on the first day of lab and shared by at least seven (7) students.
2. After each dissection and/or lab period:
  - a) Moisten specimen and towels (do not soak) with *Moistening Solution*
    - 1) *Moistening Solution*: combine in Spray Bottle 50:50
      - a. *Embalming fluid*: five-gallon jug at the back of the lab
      - b. *Fabric softener*: Snuggle/Downy
    - b) Cover specimen with towels tucking it in at all sides and close the plastic cover.
    - c) *Do not allow the cadaver to dry.* Moisten your cadaver!

3. Periodically inspect the cadaver for *fungus growth*. This growth occurs often and should be reported to the faculty so that measures can be taken to eliminate it.
4. The use of the white coat is strictly restricted for use inside the laboratory.

### **LOCKERS**

Students can check out a locker for one semester. They will need to complete a locker use agreement and submit to the Office Operations Partner. The Office Operations Partner will issue the key for the locker. Students are responsible for keeping the interior of the locker clean and will need to clean it out and have a staff member sign off before returning the locker at the end of the semester.

If a student loses the locker key, please see the Office Operations Partner. Students that lose more than one key during a semester, violate the locker agreement, or do not maintain a sanitary locker will be subject to disciplinary action, including a fine or loss of semester long locker privileges.

### **PETS**

No pets are permitted on the university campus. On occasion, a stray pet will be found roaming the campus. For safety reasons, please do not feed the animal or touch it. Please notify security or the Campus Director regarding any stray animals. Only service animals are allowed on campus. Please refer to the Service Animal Guidelines. Any student that brings an animal on campus will be asked to leave and will face disciplinary action.

### **CAMPUS GUESTS**

PHSU understands that students will want to bring guests to campus at times. Students are asked to bring no more than two guests onto campus at a time. Any student wishing to bring more than two guests needs to request special permission from the Campus Director. All guests to campus are expected to adhere to applicable University safety protocols that are in place at the time they visit campus. These may include protocols regarding masking and other expected community behaviors. It is the hosts' responsibility to convey the current expectations to guests they invite to campus.

All guests will be required to sign in at the front desk and will need to wear a visitor's badge. Guests are not allowed to use group study rooms, computers, or printers. Additionally, guests understand that their usage of campus facilities, including but not limited to video games, kitchen area, etc. should not hinder usage by a PHSU student. Visitors must also be familiar with and adhere to any current campus health and safety guidelines.

Students that bring guests understand that any guest that does not follow policies or conducts themselves in an unprofessional manner will be asked to leave. If a guest causes any damage while on campus, the student can be held financially responsible.

## **GUIDELINES FOR SERVICE ANIMALS**

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Ponce Health Sciences University (PHSU) is an institution of higher education committed to the well-being of its students in all aspects of their life. Our purpose is to provide student services in accordance with the "Americans with Disabilities Act of 1990", including changes made by the ADA Amendments Act of 2008, effective January 1, 2009, and in compliance with Section 504 of the Rehabilitation Act 1973.

PHSU supports the use of service animals on property or in a PHSU-sponsored event. The Guidelines for Service Animals provide the definition of a service animal, responsibilities of the student, expected animal behavior, and the process for its registration.

This provision is established in compliance with the Americans with Disabilities Act of 1990 including changes made by the ADA Amendments Act of 2008, effective January 1, 2009, and in compliance with Section 504 of the Rehabilitation Act 1973.

This policy applies to all Active PHSU students and/or PHSU's visiting or international students who are assigned to in-person academic activities in Main campus, East Campus, San Juan University Center and St Louis Campus. It also applies to students assigned to rotations/practicums in Allied Clinical Sites, however, health-care facilities have their own guidelines and procedures for the access of service animals.

The institution recognizes the importance of providing student services in accordance with the "Americans with Disabilities Act of 1990", including changes made by the ADA Amendments Act of 2008, effective January 1, 2009, and in compliance with Section 504 of the Rehabilitation Act 1973.

### DEFINITION OF SERVICE ANIMAL BY ADA TITLE II AND TITLE III

**A service animal means any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability.** Tasks performed can include, among other things, pulling a wheelchair, retrieving dropped items, alerting a person to a sound, reminding a person to take medication, pressing an elevator button, guiding people who are blind, alerting people who are deaf, alerting and protecting a person who is having a seizure, calming a person with Post Traumatic Stress Disorder (PTSD) during an anxiety attack, or performing other duties. Service animals are working animals, not pets. Generally, Title II and Title III of ADA entities must permit service animals to accompany people with disabilities in all areas where members of the public are allowed to go.

**Emotional support animals, comfort animals, and therapy dogs are not service animals under Title II and Title III of the ADA.** Other species of animals, whether wild or domestic, trained or untrained, are not considered service animals either. The work or tasks performed by a service animal must be directly related to the individual's disability. A person may have a note from a doctor stating that the person has a disability and needs to have the animal for emotional support; however, a doctor's letter does not turn an animal into a service animal.

### EXAMPLES OF SERVICES ANIMALS UNDER ADA

These service animals have been specifically trained to perform a task for a person with disability.

- **Guide Dog:** is a well-trained animal to serve as a guide to blind or severely visually-impaired people.
- **Hearing or Signal Dog:** is a trained animal that notifies a person who is deaf or has a significant hearing loss, when someone knocks on the door, for example.
- **Psychiatric Service Dog:** can be prepared to perform a series of tasks that help people with the inability to detect the onset of psychiatric episodes and, thus, reduce its effects. The tasks that these animals carry out include: reminding the person under its care to take their medicine; doing security checks, inspecting the house, turning on lights for people with post-traumatic stress disorder; stopping self-mutilation in people with dissociative identity disorders; and keeping disoriented people away from danger.

### RULES AND RESPONSIBILITIES RELATED TO SERVICE ANIMALS AND EXPECTED BEHAVIOR

- Service dogs in training must be identified by vests and under the control of the handler at all times.

- An animal may be denied access to the facility if it can be reasonably determined that the animal poses a direct threat to the health or safety of others. This determination must be based on actual risks and not on mere speculation, stereotypes, or generalizations.
- The student requiring the use of a service animal must clean up after the dog, unless they cannot do so due to the nature of their disability. In those cases, the student is responsible for identifying someone who can assist with the cleaning.
- The student is responsible for the feeding, grooming, and veterinary care of their service animal.
- Service animals must be clean and free of fleas and ticks. The owner is responsible for their proper prevention and control. A veterinary certification may be requested by the Institution to this effect. If the service animal does not comply with this requirement PHSU will require the handler to remove the animal from the facilities immediately.
- PHSU may deny access to a service animal whose behavior is unacceptable (barking uncontrollably, jumping on other people, or running away from their owner) or in situations where the owner is not in control of their animal.

## REGISTRATION OF SERVICE ANIMAL AT PHSU

The student must:

- Contact the Rehabilitation Counselor or Student Affairs Office for orientation.
- Complete a Reasonable Accommodation Form stating the need for a service animal.
- Register the service animal in PHSU Service Animal Registry.
- Present the service animal photo, along with evidence of its current vaccinations and immunization, including Rabies and Leptospirosis, upon registration of the service animal.
- Read, sign, and hand in the “Service Animal Handler Acknowledgment of Responsibility and Liability Waiver Agreement”.

Once the student has fulfilled the requirements, and access to property is granted for the service animal, the University guard and Academic Departments will be notified.

## RENEWAL PROCESS

Every academic year, no later than one week prior to the first day of classes, the student must renew their PHSU Animal Service Registry with the Rehabilitation Counselor or Student Affairs Office.

The student must provide an updated vaccinations and immunization record of the service animal. It can be a veterinary certification indicating that the animal is up to date with its vaccinations and it is in good health.

## SERVICE ANIMAL EXCLUSIONS

A student with a disability cannot be asked to remove their service animal from the premises, unless the dog is not housebroken, is out of control, or if the student does not take effective action to control the service animal. A student can be requested to remove the service animal from the premises if it is in non-compliance with the rules and responsibilities included in this policy.

Fear and allergies are not valid reasons for denying access to a service animal or refusing to provide a service to people using service animals.

It may be appropriate to exclude a service animal from limited-access areas that employ general infection control measures, such as operating rooms and burn units, where the animal’s presence may compromise a sterile field environment.

PHSU may deny access to service animals in such a case where the animal's presence may compromise a sterile field environment, as some laboratory rooms, including the Anatomy Laboratory, among others.

*\*\*Health-care facilities have their own guidelines and procedures for the access of service animals. PHSU is not responsible for the approval of access in clinical or practicum sites. On those cases the student must follow the protocols and procedures established by the Hospital, clinical or practicum site. For more information you can visit the following link: Guidelines for Environmental Infection Control in Health-Care Facilities: <https://www.cdc.gov/infectioncontrol/pdf/guidelines/environmental-guidelines-P.pdf>*

## **GRIEVANCE AND RECLAMATIONS**

A student who has been denied access to PHSU property or its sponsored events because of their service animal can file a complaint at the Office of Student Affairs.

Also, the student can file a claim with OCR or file a private lawsuit in federal court. An OCR complaint must be filed within 180 calendar days from the date of the alleged discrimination, unless this has been extended for a good cause.

Before presenting the OCR complaint against the Institution, the potential complainant may want to find out about the Institution's grievance process and use this process to resolve the complaint. However, the law does not require the complainant to use the Institution's process of conciliation before presenting the claim with OCR. If the complainant uses this conciliation process and then choose to file this claim, they must do so within 60 days after the last act of institutional conciliation. For more information, contact:

U.S. Department of Education  
Office for Civil Rights  
400 Maryland Ave. SW  
Washington, DC 20202-1100  
Customer Service: 800-421-3481 Fax: 202-453-6012 TTY: 877-521-2172  
E-mail: [OCR@ed.gov](mailto:OCR@ed.gov)  
<http://www.ed.gov/ocr>

## **DISCIPLINE**

Students who violate this policy (including lying or misrepresenting information about the requirements for the service animal) may be subjected to disciplinary process according to the Students Handbook. If an investigation results in a finding that this policy has been violated, the mandatory minimum discipline is a written reprimand. The discipline for very serious or repeat violations can include dismissal.

## **OTHER AVAILABLE PROCEDURES**

The procedures available under this policy do not preempt or supersede any legal procedures or remedies otherwise available under local, state or federal law.

## **CONFIDENTIALITY**

All complaints and investigations are treated confidentially to the extent possible and information is disclosed strictly on a need-to-know basis. The identity of the complainant is usually revealed to

the parties involved during the investigation and the VP of Students Affairs takes adequate steps to ensure that the complainant is protected from retaliation during and after the investigation. All information pertaining to a complaint or investigation is maintained in secure files within the Student Affairs department.

## REFERENCES

- Animales de Servicio y Animales de Apoyo Emocional: ¿Dónde son admitidos y bajo qué condiciones? ADA National Network [http://southwestada.org/html/publications/Spanish/Service\\_Anima\\_IBooklet\\_Spanish.pdf](http://southwestada.org/html/publications/Spanish/Service_Anima_IBooklet_Spanish.pdf)
- U.S. Department of Justice, Civil Rights Division, Disability Rights Section. Service Animals. [https://www.ada.gov/service\\_animals\\_2010.htm](https://www.ada.gov/service_animals_2010.htm)
- ADA National Network. Service Animals and Emotional Support Animals <https://adata.org/guide/service-animals-and-emotional-support-animals#:~:text=Title%20I%20of%20the%20ADA,private%20lawsuit%20in%20federal%20court.>
- U.S. Department of Justice, Civil Rights Division, Disability Rights Section. Frequently Asked Questions about Service Animals and the ADA [https://www.ada.gov/regs2010/service\\_animal\\_qa.html](https://www.ada.gov/regs2010/service_animal_qa.html)
- Public Health Emergency. Understanding How to Accommodate Service Animals in Healthcare Facilities <https://www.phe.gov/Preparedness/planning/abc/Pages/service-animals.aspx>
- Guidelines for Environmental Infection Control in Health-Care Facilities <https://www.cdc.gov/infectioncontrol/pdf/guidelines/environmental-guidelines-P.pdf>
- Meeks, L., Jain, N. R., & Laird, E. P. (2021). Equal Access for students with disabilities: The Guide for Health Science and Professional Education. Springer Publishing.

## DISCLAIMER

PHSU reserves the right to interpret and apply this policy in a way that facilitates the operations of the company. This policy will be interpreted and applied in conjunction with the other policies and procedures established by the Company and does not represent a contract between the parties. It is established as a guide to unify the procedures for handling situations with service animals on campus and to prevent situations that could occur. However, nothing prevents PHSU from varying or flexibly applying the provisions of this protocol, at its discretion, when it deems it to be in the best interests of PHSU.

## PARKING

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Students should park in the designated PHSU parking lot, Lot C of the Wells Fargo lot at Market and Beaumont. Students will receive a parking sticker which should be displayed on the right-hand side of the rear window.

Use of the handicap parking spots requires the vehicle to have a valid state-issued hangtag or license plate. All others parking in a handicap parking spot are subject to fines.

The university will not be held responsible for any consequences or actions taken because a student chooses to park in a lot not designated as PHSU parking.

# INCLEMENT WEATHER POLICY

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Should weather conditions create potentially hazardous conditions, PHSU STL will evaluate the situation and take into consideration the safety of faculty, staff, and students as well as the services that must be provided despite the inclement weather. After this careful evaluation and depending on the hazardous weather conditions (e.g., tornado, snow/ice, etc.), an alert will be sent to applicable students, faculty, and staff via email. This alert will detail the appropriate action required of faculty, staff, and students.

Closures and schedule alterations due to inclement weather will also be posted on the St. Louis-area television stations KTVI, KMOV, and KSDK. In the unlikely event that PHSU STL alters the normal work and/or class schedule, an announcement will be posted on the university's homepage (stlouis.psm.edu). An announcement will be distributed to all PHSU employees and students and will include information on whether classes will be conducted virtually or canceled for the day.

# BASIC EMERGENCY ACTION PLAN

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## PURPOSE

Ponce Health Sciences University is committed to the safety and security of all stakeholders. The purpose of this policy is to provide guidance as it relates to the “Basic Emergency Action Plans.”

## SCOPE

This policy applies to all stakeholders and are designed to provide guidance in response to emergencies.

## POLICY

St. Louis Campus  
Stefani Schuette, Ed.D.  
Campus Director  
2351 Market St.  
St. Louis, MO, 63103  
314-887-1356

St. Louis Police Department: 911 or 314-231-1212 (non-emergency)

For the purposes of this document, a floor coordinator is a predetermined individual responsible for assisting with the emergency response on a particular floor.

## BEAP/LOCK-DOWN

Lockdowns occur without warning when there is a threat that occurs on campus. Examples of threats can be an armed intruder or an incident that occurs off campus but threatens the safety of students and staff members. Lockdowns may last several minutes or may last several hours if the threat is still active.

## LOCKDOWN PROCEDURES

Lockdowns occur without warning when there is threat that occurs on campus. Examples of threats can be an armed intruder or an incident that occurs off campus but threatens the safety of students and staff members. Lockdowns may last several minutes or may last several hours if the threat is still active.

Once a threat is verified, students and staff will be alerted as soon as safe and reasonable. A One Call Now alert will be activated, notifying students of the lockdown, and asking students and staff who are not on campus to stay away. This can be done via text message, email, and/or verbal notifications.

Anyone that is on another floor in the building should proceed to a secure office or area away from windows on that floor and await further instructions. Anyone that is outside the building should either get to their vehicle or find a nearby business to wait for further instructions. Professors, staff, and students who are in an office, meeting room, or classroom should lock the door and turn off the lights. Stay away from the windows and await further instructions.

DO NOT UNLOCK THE DOOR FOR ANYONE. Once the situation has been resolved, St. Louis Police or university officials will provide instructions. Once the lockdown is over, a One Call Now alert will be sent and university officials will notify everyone that the threat is over.

## BEAP/ACTIVE SHOOTER

Building occupants may become aware of a violent act by the sounds of an explosion, gunfire, scuffling, or by observation of events that could only be intentional acts of violence. The person(s) who observes these life-threatening acts should immediately seek shelter and call 911 and then the Campus Director at 636-399-3908.

When contacting 911, give them the following information:

- Location of the shooter
- The number of shooters, if known
- Description of the shooter and type of weapons
- The number of people at your location and if movement, direction of travel

The floor coordinator, if possible, should attempt to communicate to everyone on the floor that a perpetrator of workplace violence is in the building. This may be done by using several methods, including telephone, email, or word of mouth. Once the university is aware of the emergency situation, an emergency notification will be issued. An email or text notification will be issued to notify students and staff members of the location where the incident is taking place and to shelter in place and await further information.

If you are inside the building when violence occurs, do the following:

## ESCAPE/EVACUATE

- Have an escape route and plan in mind
- Leave your belongings inside
- Keep your hands visible
- Don't let someone slow you down by inaction
- Once outside, stop people from entering the building and go to a safe place
- Call 911 and give the police an update on what is happening



## **EVADE/HIDE**

- Hide in an area away from the shooter’s view
- Block and lock the door. Use whatever is available to block the door
- Turn off the lights
- Silence your phone
- Stay quiet

## **ENGAGE/TAKE ACTION**

- As a last resort, and only when your life is in imminent danger
- Act with physical aggression and attempt to incapacitate the shooter
- Use chairs, tables, or anything with which you can throw or hit the shooter

DO NOT UNLOCK THE DOOR FOR ANYONE. Once the situation has been resolved, St. Louis Police or university officials will provide you with instructions.

## **BEAP/SHELTER IN PLACE**

### **WHAT IT MEANS TO “SHELTER-IN-PLACE”**

If an incident occurs and the area around you becomes unstable, or if the air outdoors becomes dangerous due to toxic or irritating substances, it is usually safer to stay indoors, because leaving the area may expose you to that danger. Thus, to “shelter-in-place” means to make a shelter of the building you are in, and with a few adjustments, this location can be made even safer and more comfortable until it is safe to go outside.

### **BASIC “SHELTER-IN-PLACE” GUIDANCE**

If an incident occurs and the floor you are on is not damaged, stay inside in an interior room until you are told it is safe to come out. If your floor is damaged, take your personal belongings, close your door, proceed to the nearest floor/room using the stairs instead of the elevator. If police or fire department personnel are on the scene, follow their directions.

### **HOW YOU WILL KNOW TO “SHELTER-IN-PLACE”**

A shelter-in-place notification may come from several sources, including university administration, Green Street (property Manager), or the St. Louis government.

### **HOW TO “SHELTER-IN-PLACE”**

No matter where you are, the basic steps of shelter-in-place will generally remain the same. Should the need ever arise, follow these steps, unless instructed otherwise by local emergency personnel:

- If you are inside, stay where you are. Collect any emergency shelter-in-place supplies (i.e. medication, water, food, defensive objects etc.) and a telephone to be used in case of emergency. If you are outdoors, proceed to the closest building quickly or follow instructions for emergency personnel on scene.
- Locate a room to shelter inside. It should be an interior room that is above ground level and without windows or with the least number of windows. If there is a large group of people, use several rooms if necessary.
- Shut windows if needed
- Close vents to ventilation systems if you are able.
- Make a list of people with you and ask someone to call the campus director with the list. If only students are present, one of the students should call in the list.
- If safe and possible, monitor the university website, university social media platforms and other social media outlets for information.
- Make yourself comfortable

## BEAP/EARTHQUAKE

Earthquakes occur without warning. Some earthquakes are instantaneous tremors and others are significant sustained events followed by aftershocks. Individuals should take emergency action immediately, and additional actions will be implemented after the earthquake stops.

An earthquake may cause noticeable shaking of the ground and building. This shaking will vary in intensity (i.e., mild tremors to shaking sufficient to destroy buildings). When a significant earthquake occurs, occupants should immediately take cover. Seek cover and protection by performing one of the following actions:

- Getting under a desk or heavy table and holding on
- Kneeling in a corner of an interior wall with your head and face covered
- Standing in a doorway and bracing your hands and feet against each side. Stay away from glass, bookshelves, and wall hangings

Note: Once the shaking has stopped, gather your personal belongings and valuables and quickly leave the building. **DO NOT USE ELEVATORS.** All employees should gather at the evacuation assembly area. Occupants who come into contact with a student or visitor should direct them to take appropriate actions. Any occupant that comes into contact with a physically disabled individual should assist that individual or take them to the nearest stairwell landing and seek assistance from an emergency responder outside the building. Floor coordinators will facilitate the evacuation of the campus.

Be prepared for aftershocks. Although smaller than the main shock, aftershocks cause additional damage and may bring down weakened structures. Aftershocks can occur in the first hours, days, weeks, or even months after the earthquake. Follow the same procedures as far as earthquakes.

If everyone on campus cannot be accounted for, the floor coordinators will assist in documenting the names of those missing and supply that list to the Campus Director and St. Louis Police. The Campus Director and St. Louis Police and Fire will consult and a decision will be made on whether or not employees can return to their workstations or if they will be dismissed for the day. The floor coordinator(s) will give direction to students and staff based on that decision. This information will also be communicated by a One Call Now alert.

## BEAP/FIRE

This section of the Building Emergency Action Plan will be activated in the event of fire alarm activation or fire discovered by building occupant.

Any faculty, staff, student, or visitor who becomes aware of a fire shall immediately activate the building fire alarm system. The fire alarm system will in turn notify all building occupants that a fire emergency exists. This is accomplished through sounding an audible alarm and activating a visual flashing light. The university evacuation policy mandates that the building shall immediately be evacuated unless there has been previous notification of the fire alarm system being tested.

The person activating the fire alarm shall, once safe, contact 911 and advise police dispatch of the situation and then contact the Campus Director at 636-399-3908.

All occupants will immediately evacuate the building utilizing the posted evacuation routes. Occupants may collect their valuables (purse, coat, etc.) if time permits and should close the door upon leaving. Any occupant who comes into contact with a student or visitor should direct them to evacuate the building. Any occupant that comes into contact with a physically disabled individual

should assist that individual from the building and seek assistance from an emergency responder.  
DO NOT USE ELEVATORS.

Only occupants trained to operate a fire extinguisher should make an attempt to extinguish the fire. Those who have not been trained shall immediately evacuate the building. Only if the fire is very small, such as an incipient stage fire, should those trained occupants attempt to extinguish the fire. If the fire is not contained, involves flammable solvents, is spreading rapidly, is partially hidden behind a wall or ceiling, cannot be reached from a standing position, or if it becomes difficult to breathe in the room, one should not attempt to extinguish fire or cease the attempt to and immediately evacuate the building.

Once out of the building, all occupants should gather at the evacuation assembly area (see Appendix A). The floor coordinators will conduct a count of all present and work to determine if everyone has vacated the building. Nobody should leave the assembly area, either to re-enter the building or leave the campus, until advised to do so by the floor coordinator or Campus Director.

The floor coordinator will provide information to the Campus Director, St. Louis City police or fire, or to any other emergency response agencies on the scene. This information may include, but is not limited to, the following:

- Location of the fire
- Name and location of disabled individuals requiring evacuation assistance
- Status of the evacuation, personnel missing that may still be in the building
- Special hazards associated with the building

DO NOT RE-ENTER THE BUILDING UNTIL FIRE OFFICIALS GIVE THE ALL-CLEAR SIGN

## **BEAP/MEDICAL EMERGENCY**

Implement the Basic Emergency Action Plan for medical emergencies for any injury or illness that requires more than simple first aid.

Immediately contact 911 and then contact the Campus Director at 636-399-3908.

When reporting the emergency, provide the following information:

- Type of emergency
- Location of the victim
- Condition of the victim
- Any dangerous conditions

Comfort but do not move the victim. Have someone standby outside the building to “flag down” the ambulance when they reach the vicinity of the building. Once the victim has been cared for and is transported, please provide applicable information to the Campus Director.

## **BEAP/SEVERE WEATHER**

This section of the Basic Emergency Action Plan will be activated in the event of a severe weather situation. In the event of a severe weather situation, a notification will advise the building occupants of the type of warning (thunderstorm or tornado) and to implement the Emergency Action Plan— Severe Weather.

Once occupants have been notified of a THUNDERSTORM WARNING, they should take no other steps than to ensure that they are prepared for conditions to deteriorate.

Once occupants have been notified of a TORNADO WARNING via text message, email or One Call Now alert, they should gather their valuables and take cover in the nearest severe weather shelter area on their floor. Any occupant who comes into contact with a student or visitor should direct them to take appropriate actions. Any occupant that comes in to contact with a physically disabled individual should assist that individual to the severe weather shelter areas. Office doors should be closed upon exiting. Building occupants should take cover in the areas determined safe.

The floor coordinators should ensure that all floor occupants are in the shelter areas and remain there until the “all clear” is given from university officials via text, email, or in-person notification. If injuries or building damage occurs, notify the St. Louis Police Department at 911 and the Campus Director at 636-399-3908. Once the warning period has expired, the floor coordinators will give the word for employees and students to return to normal activity.

## BEAP/UTILITY OUTAGE

Students, Faculty, Staff, and other stakeholders will become aware of utility outages by the obvious absence of that particular utility.

- No Lights, computers not working – Electric
- Toilets won't flush, sinks not working – Water
- Building won't warm up during winter – Steam or Gas
- Building won't cool in summer – Electric

The floor coordinators should contact the Campus Director at 636-399-3908 to report the problem and obtain any available information.

While a power interruption does not usually cause emergencies within a facility, injuries or hazards may be created by outages. The floor coordinator will determine the appropriate course of action.

The floor coordinator should consider the following issues:

- Dangers from tripping and injuries due to lights being out
- Person(s) being trapped on elevators
- Dangers of extreme heat and cold
- Sanitation problems due to no water

The building occupants will await university leadership decisions regarding the continuance of work in the building during a utility interruption. Any occupant that comes into contact with someone who is physically disabled should assist those individuals.

If anyone is trapped on an elevator, immediately call the Campus Director 636-399-3908 or 911 for assistance.

## BEAP/WORKPLACE VIOLENCE/TERRORISM

Building occupants may become aware of a violent act by the sounds of an explosion, gunfire, scuffling, or by observation of events that could only be intentional acts of violence. The person(s) who observe these life-threatening acts should immediately seek shelter and 911 and then call the Campus Director at 636-399-3908. The floor coordinator should attempt to communicate to everyone in the building that a perpetrator of workplace violence is in the building. This may be done by using several methods including telephone, email, or word of mouth.

Different types of workplace violence require different actions:

**Explosion** – If an explosion occurs, building occupants should leave the building using the same evacuation plan and procedures as they would for a fire.

**Threatening Phone Calls/Bomb Threat** – In the event that the campus receives a phone call or bomb threat, the call receiver is to maintain an open line of communication with the caller for as long as possible. As soon as possible, it is necessary for the call receiver to complete the “Threatening Call/ Bomb Threat Checklist” with the assistance of the Campus Director. Either the caller or someone close by should contact the St. Louis City Police at 911 as soon as possible.

**Gunfire** – If you become aware of gunfire occurring in the building, take refuge in a room that can be locked. The room should also provide limited visibility to anyone that is outside of it. Secure the door and hide under a desk, in a closet, or in the corner. **DO NOT UNLOCK THE DOOR FOR ANYONE.** Once the situation has been resolved, the Campus Director or St. Louis city police will provide you with instructions.

**Physical Threat** – If someone’s actions pose a physical threat to you, evacuate the area and report these actions to your supervisor. Contact the Campus Director at 636-399-3908. In the event someone is hurt and/or a fire is caused by these events, advise the St. Louis City Police of this situation.

**Hostage Situation** – Immediately vacate the area or seek safe, secure shelter, take no chances to endanger the life of the hostage. Contact St. Louis City police as soon as possible by dialing 911. In the event someone is hurt and/or a fire is caused by these events, advise the St. Louis City police of this situation.

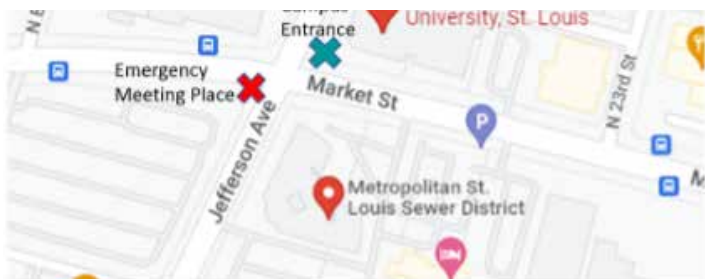
The floor coordinators and Campus Director will coordinate the building’s security once the incident commander releases the building. This group will also contact building occupants and advise them on when to return to normal activity.

Any occupant who comes into contact with a student or visitor should direct them to take appropriate actions.

## BEAP/AFTER THE EMERGENCY ACTIONS

The floor coordinators will participate in any post-incident critique regarding the emergency. The floor coordinator will contact the Campus Director regarding any property damage caused by the incident. In the event an occupant is injured, normal injury reporting procedures should be followed.

The floor coordinator(s) and other employees may be asked to assist in preparing a report after implementing this plan. This report shall review emergency actions, their effectiveness, and needed revisions. This report will be shared with employees and forwarded to the university leadership once completed.



APPENDIX A - Meeting Place

## USE OF SCHOOL NAME AND FACILITIES

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Individuals or student organizations do not have the authority to use the school name in legal nor official transactions. Neither the faculty or student body will use the school stationary and envelopes except for official business.

Permission to use classrooms or other facilities of the school, including affiliates, loaned or leased space, must be requested in writing from the Dean of Enrollment Management & Student Success. Only organizations and students in good standing have the right to use School facilities.

Student Organizations may use the school's name if authorized by Student Affairs and following the instructions established on the brand guideline document.

### USE OF SPEAKERS, DEMONSTRATIONS, ACTIVITIES, AND DISTRIBUTION OF PRINTED MATERIALS

Outside speakers can only be invited to participate in School activities after approval by the pertinent Dean and ratification by the Campus Director.

Demonstrations must be carried outside the school or hospital grounds and must not interfere with the normal work or educational activities.

Any activity can be approved by the pertinent Dean. Any extracurricular activity belongs to students must have the written approval of the Dean of Enrollment Management & Student Success or designee.

Approval for posting or distributing printed materials must be obtained from the Office of Student Success. Unauthorized announcements will be removed and discarded from the physical areas designated for them. For Social Networking Sites a petition of removal will be sent to the student group in charge of the posting.

# SOCIAL MEDIA POLICY

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Students are not allowed to release, disclose, post, display or communicate the following information:

- Identifiable, confidential, protected health information (PHI) regarding any patient associated with PHSU, its affiliated hospitals, clinics, or other external health care organization. This includes, but is not limited to, any information, such as initials, personal activities, record numbers, pictures, or other information that might enable external parties to identify patients. Disclosure of PHI may constitute a severe HIPAA violation and may have personal and institutional liability consequences.
- Confidential information regarding policies and operations, including financial information that PHSU, its affiliated hospitals, clinics, or other external affiliated healthcare organizations have not approved to disclose.
- Students must also adhere to the following:
  - Students are personally responsible for the content they post on PHSU-sponsored social media properties -from blogs to social networks, list serves, wikis, websites, forums, and other social media platforms.
  - Students should not expect privacy when using the Internet at school, practicum, or clinical sites and are reminded that any time spent posting and viewing social media sites or other sites must not interfere with the performance of their duties.
  - Students should maintain appropriate professional boundaries and should separate personal and professional content online.
  - Students must not “friend” active patients or their families on any social media site.
  - Students must not offer medical, psychological or scientific advice on any social media site.
  - Students should routinely monitor their own Internet presence to ensure that the personal and professional information on their own sites, and the content posted about them by others, is accurate and appropriate.
  - Students must not post information on any site that might be considered offensive and reflect negatively on the student, peers, supervisors, other patients, PHSU, its affiliated hospitals, and clinics, or other external affiliated health care organization.
  - Students should always be aware of their association with PHSU when posting to a PHSU-sponsored site or any other social networking site. Personal profiles and content should always be consistent with the professional manner in which students are expected to present themselves to peers, supervisors, patients, and others in all settings.
  - Students must recognize that their actions online may negatively affect their reputations with patients, peers, and others, and may have long-term consequences for their careers.
  - Students should consider that everything they post online contributes to a lifetime record that is readily accessible to others. Potential employers may use social media to access this record to evaluate applicants. Posting distasteful, immature, or offensive content may eliminate job or other professional opportunities. Students must convey a professional and ethical presence to all who might view their online information.

**Violations of this policy will be considered a professionalism competency violation, will jeopardize the student’s standing in the academic program, and may result in a written warning, probation, or dismissal from the program.**

# INFORMATION AND TECHNOLOGY RESOURCES ACCEPTABLE USE POLICY AND GUIDELINES

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## POLICY IT-2 INFORMATION AND TECHNOLOGY RESOURCES ACCEPTABLE USE POLICY – FOR STUDENTS

### OVERVIEW

The Information Technology Department is committed to preserving the confidentiality, integrity, and availability of Information Technology resources. The use of these resources is in support of teaching, research, learning, administrative, and other intellectual pursuits consistent with the aims and objectives of Ponce Health Sciences University (PHSU), Ponce Research Institute (PRI), Tiber Health Corporation (THC), and all related entities (hereinafter the Company). The Company has an obligation to ensure the security and confidentiality of its member records and protect these records against unauthorized access that could result in loss or inconvenience for its members. The protection for the confidentiality of nonpublic information must be consistent with state and federal laws.

### PURPOSE

The purpose of the Acceptable Use Policy (AUP) is to outline the acceptable use of all IT resources across all sites on which the Company operates. This policy also provides the guidelines to identify situations where unacceptable use of these resources could affect the teaching, learning, research, services, or administrative missions of the Company; or compromises the security of the systems or data.

### DEFINITIONS AND AUTHORITY

**Authority to Change:** Because the Company policies are subject to change, this document may change from time to time. **Information Technology (IT) Resources:** The complete set of information technology devices, data applications, and network services involved in the process, storage, access, and transmission of information.

**Company Systems:** All applications and software platforms, either on-premises or cloud-based, including email and Internet/Intranet/Extranet-related systems.

**Technology Devices:** Computers, laptops, tablets, printers, scanners, photocopiers, servers, networking devices, VoIP phones, corporate smartphones, and hotspots.

**Mobile Devices:** Portable devices intended primarily for the access to or processing of data, which can be easily carried by a single person and provide persistent storage, including, but not limited to, laptops, smartphones, tablets, e-readers, and portable computing devices.

**Restricted Data:** Data in any format collected, developed, maintained, or managed by or on behalf of the University, or within the scope of University activities, which are subject to specific protections under federal or state law or regulations or under applicable contracts. Examples include, but are not limited to, medical records, social security numbers, credit card numbers, driver licenses, non-directory student records, financial data, research protocols, and export-controlled technical data.

**Users:** Account holders or any person who uses a computer or network facility, whether affiliated with the Company or not.

**User Account:** Username assigned or email address, and password.

**Affiliate:** Someone officially linked or associated to the Company who is not a student or employee (e.g., contractors, vendors, interns, temporary staffing, volunteers).



**Company members:** Employees, faculty, students, and affiliates.

**Information Technology (IT) Assets:** It refers to any information system, operating system, database, software, application, computer, servers, Cloud service, printer, scanner, copiers, VoIP phone, mobile devices, audiovisual, video conference, storage, and network equipment.

**IT Department:** The Information Technology Department of the Company.

**Cloud Storage:** A technology that allows you to save files in storage and then access those files via the Cloud. Examples of cloud storage services are Google Drive, Dropbox, and OneDrive. Files stored on these cloud storages can usually be accessed via any web browser, and they synchronize the files to multiple computers and mobile devices. They also offer the feature for sharing files with other people.

**MFA:** An authentication method that requires the user to provide two or more verification factors to gain access. Example of factors: Password and PIN number.

**Chain letter:** An email directing recipients to send out multiple copies of it, so its circulation increases exponentially.

**Spam:** The use of email systems (including most broadcast media and digital delivery systems) to send unsolicited bulk messages indiscriminately.

**Peer-to-Peer (P2P):** A file-sharing network. It is a networking technology that normally uses a decentralized communication model, where there is no central server involved, and all computers in the network act as both server and client. An example of a pure decentralized P2P network is BitTorrent.

**Cloud backup:** Also known as online backup, it is a strategy for backing up data that involves sending a copy of the data over a public network (Internet) to an off-site server.

**Social media:** Any Web site in which visitors can publish information to a larger group. Such destinations include large, branded entities such as Facebook, Twitter, YouTube, My Space, Google+, LinkedIn, and similar.

**Moonlighting Work:** Paid work that you do in addition to your regular job, especially without telling your employer.

## SCOPE

This policy applies to the use of any Company Information Technology resources by any student who uses a computer or network facility, whether affiliated with the Company, its subsidiaries, and parent companies or not. By using these resources, all Users agree to comply with this policy. Use of the Company Network and Technological Services with Personal Devices (e.g., smartphones, laptops, tablets, etc.) abide by the same policies.

All students will receive a copy of this policy, and a signed copy of the agreement will be filed in the Students Affairs Department. However, the use of the Company Computers, Network, and Internet/Intranet/Extranet-related systems implied that the user understands and agrees to abide by this policy.

## POLICY

### USER RIGHTS AND RESPONSIBILITIES

1. User access to Information and Technology (IT) resources is contingent upon prudent and responsible use.
2. Users are responsible for ascertaining what authorizations are necessary and for obtaining them before using the PHSU System.

3. Users are responsible for any activity originating from their user accounts or company system. In cases when unauthorized use of user accounts or resources is detected or suspected, the account owner should change the password and report the incident to the IT Department.
4. Occasional personal use of Information and Technology resources is allowed, while such personal use does not interfere with work performance or violate any policy, regulation, or law.
5. Users should consider the Company and community standards when determining if an activity is appropriate. Imprudent use of IT Resources can lead to consequences affecting many other users.
6. Users of the Company's IT resources must comply with federal and state laws, Company rules, policies, and procedures. Examples of applicable laws, rules, and policies include; the laws of libel, privacy, copyright, trademark, obscenity, and child pornography; the Electronic Communications Privacy Act, and the Computer Fraud and Abuse Act, which prohibit "hacking, cracking", and similar activities; the PHSU's Student Code of Conduct; Faculty Manual, Employee Manual.

All users shall review and refer to all IT policies and procedures. For more information regarding specific policies for wireless access, mobile devices, social media, and other IT general guidelines and procedures, please go to Information Technology Policies or contact the IT Department, by email [itsupport@psm.edu](mailto:itsupport@psm.edu).

## GENERAL GUIDELINES

### ACCEPTABLE USE

1. Use IT resources only for authorized purposes.
2. Protect your Account and System from unauthorized use. Accounts cannot be used by anyone other than to whom they have been assigned. Use effective passwords and safeguard those passwords.
3. Access only information that is your own, that is publicly available, or to which you have been given authorized access.
4. Use email in a responsible and productive manner that reflects well on the Company.
5. Use only legal versions of copyrighted software in compliance with vendor license requirements.
6. Show consideration for the consumption and utilization of IT resources.
7. Save all work-related documents on the Server. However, an employee can keep a copy on their computers.
8. Encrypt emails when sending protected or confidential information, such as documents with social security, credit card numbers, payment claims for patient services, and patient referrals.
9. Request authorization from IT prior to downloading any software.

### UNACCEPTABLE USE

The following activities and behaviors are Inappropriate and prohibited:

1. Use another person's account.
2. Use another person's system, files, or data without the proper authorization of the IT Director and the corresponding Dean or designee.
3. Download or save restricted, confidential, or sensitive data on personal devices.
4. Use of faculty and administrative computers, except on special and authorized occasions (e.g., Match Activities). Permission must be requested from the IT Department prior to use.
5. Disclosure of restricted, confidential, or sensitive data to a third party without proper authorization.
6. Engage in any activity that might be purposefully harmful to the Company System or to any information stored thereon, such as creating or propagating viruses, disrupting services, damaging files, or making unauthorized modifications to the Company data.

7. Make or use illegal copies of copyrighted materials or software. Install or store such copies on the Company system or transmit them over the Company networks.
8. Use of Peer-to-Peer (P2P) or other technology for illegal uploading, downloading, or sharing of copyrighted material, such as music and software. Sharing or downloading copyrighted files without permission over the Company's network is illegal and a violation of the Company's Acceptable Use Policy.
9. Attempt to alter any Company computing and networking components, including data drops connections or wireless infrastructure.
10. Connect network equipment (including, but not limited to, bridges, routers, hubs, and wireless access points) to open network ports. Any student who needs to connect laptops or network equipment to any network drop on the campus must request approval from the IT Department.
11. The use of devices to provide unauthorized services or as gateways to provide alternative means of access to Network Services.
12. Attempt to circumvent or subvert Company systems or network security measures, e.g., using computer programs to decode passwords or scanning of networks for security vulnerabilities.
13. Engage in any activity that alters the integrity or might be purposefully harmful to systems or to any information stored thereon. For example, creating or propagating viruses, disrupting services, damaging files or making unauthorized modifications to the Company data, attempting to capture or decode passwords, attempting to get additional access, or altering data that belong to other users.
14. Monopolize the Company systems, overload networks with excessive data, degrade the services, waste computer or connection time, disk space, printer paper, manuals, or other resources.
15. Make or use illegal copies of copyrighted materials or software, store such copies on PHSU systems, or transmit them over Company networks.
16. Use the Company Information Technology Resources for the following:
  - To Impede, interfere, impair, or cause harm to the activities of others.
  - For commercial or partisan political purposes.
  - To harass, intimidate, or discriminate against another person.
  - To send chain letters, unsolicited mass mailings, virus hoaxes, "spamming" (spreading email widely without good purposes), or "bombing" (flooding another's email with numerous or large email messages)
  - To do "moonlighting" work using the Company's IT resources.
  - For illegal or any other purpose that is against institution policy or contrary to the Institution's best interests.
  - For entertainment purposes, non-work-related activities, or non-academic-related activities, including the use of streaming video services like Netflix, Hulu, Disney+, HBO, etc., during work hours or academic class sessions.
  - For personal gain, for example, by selling access to your account or Company systems or networks, or by performing work for profit with Company resources in a manner not authorized by the Institution.
  - Waste computing resources or network resources, for example, by intentionally placing a program in an endless loop, printing excessive amounts of paper, or sending chain letters or unsolicited mass mailings.
  - Any activity that violates any other Company policy or code, or violates federal, state, or municipal laws or regulations.
  - Release, disclose, post, display, communicate, confidential or protected information or information that might be considered offensive on social media pages (Refer to IT Policy IT-3 social media Acceptable Use Policy).

- All users who use cloud storage for processing, storing, and sharing Company information must use OneDrive for Business under the Company's Office365 subscription.
17. Engage in any activity that violates any other Ponce Health Sciences University policy or code, or violates federal, state, or municipal laws or regulations.

## **INSTITUTIONAL WEBSITE AND WEB PAGES**

All requests regarding the institutional website and social media pages should be referred to the Marketing Department.

## **SOCIAL MEDIA**

Social media includes any Web site in which visitors can publish information on destinations that are viewed by more than one person. Information shared may include but is not limited to, personal information, opinions, research, commentary, or business information. Examples of such destinations include large, branded entities such as Facebook, Twitter, YouTube, My Space, Google+, LinkedIn, WhatsApp, and similar sites or applications developed in the future. However, blogs, special interest forums, and user communities' web pages are also considered social media.

The Company recognizes that users must conduct institutional business within social media. Accessing social media for personal purposes during work hours is prohibited. Please refer to the IT4-Social Media Acceptable Use Policy for more information and guidelines.

## **EDUCATIONAL TECHNOLOGY RESOURCES**

### **LAPTOPS**

All students must have personal laptop computers that meet the following minimum requirements. Although Windows laptops are strongly recommended, Apple Macintosh laptops are acceptable when configured to meet the specified software requirements.

We recommend systems that meet or exceed the following specifications:

1. WINDOWS or MAC
2. Intel Core i5 or i7 processor (1GHz or higher), Sixth Generation or higher with a TPM
3. Intel Core i5 or i7 processor (1GHz or higher), Sixth Generation or higher with a TPM
4. Windows 10 x64 or higher MAC OS v10.14, V10.15, v11.0, v12.0 8GB RAM (16GB of RAM preferred) 8GB RAM (16GB or more of RAM preferred) 512 GB internal Solid-State Drive (SSD) or higher 512 GB internal Solid-State Drive (SSD) or higher.
5. Intel HD Graphics, or discrete graphics card (must have at least one display out option or adapter)
6. 13" to 15.6" display or higher 13" to 15.6" display or higher
7. Two USB 3.0 ports or USB adapters Two USB 3.0 ports or USB adapters
8. 802.11ac 2.4/5 GHz wireless adapter 802.11ac 2.4/5 GHz wireless adapter
9. Full-Size Keyboard preferred Full-Size Keyboard preferred
10. Trackpad or wireless mouse Trackpad or wireless mouse integrated webcam integrated webcam integrated microphone integrated microphone.

## **E-LEARNING PLATFORMS**

Ponce Health Sciences University uses the educational web-based platforms Canvas and Moodle, where educational materials, including evaluations, rotation schedules, grades, and other students' confidential information, are posted. The platform also allows for web-based examinations. The student is advised that this information is accessed with their user ID and password. PHSU is not responsible for the disclosure of such information when it is accessed by a third party through the use of the student's user ID and password.

## **APPLE IPADS**

PHSU provides iPads to all new students to facilitate access to the educational resources available in the Institution. Students must remain active for at least one (1) year before the ownership of the equipment transfers to them. Students who withdraw from PHSU before the year is over must return the equipment to the IT Department. The equipment must be in good condition, including its components or accessories like covers, chargers, etc. The iPads will be used throughout your academic career at PHSU; do not dispose of them.

## **MICROSOFT OFFICE 365 PLATFORM**

Every student has access to Microsoft Office 365 applications for free as long as they are students at PHSU and the PHSU subscription continues. The applications can be installed on up to 5 compatible devices. MS Office 365 is the official email platform used in the Institution, which also provides a Cloud storage space (OneDrive) and other applications.

## **PRINTING QUOTA**

An established number of copies is assigned to every student, every academic period (semester or trimester), as applicable. Unused copies balance will be rolled over to the next academic period. If the student has no balance left or wants to be able to increase the number of copies available, he/she can purchase an additional printing quota. Any unused balance from the quota assigned by the Institution is not refundable. Print refunds might be applied for print jobs that were caused by a technical hardware or software problem, and such refund will apply only when using funds from the additional printing quota purchased by the student. A refund request should be made no more than two (2) days after the incident. It will be investigated, and the student will be notified by email. Print job errors caused by misconfigurations by the user are not refundable.

## **SOFTWARE CODE OF ETHICS AND SOFTWARE POLICY**

### **PURPOSE**

This code of ethics states the Ponce Health Sciences University and the Company policy concerning the installation and acceptable use of the software. Any unauthorized duplication of copyrighted computer software violates the law and is contrary to PHSU standards of conduct. PHSU does not excuse the illegal duplication of software and will not tolerate it. Any violations to this Policy will be handled according to the HR Employee Manual.

### **SOFTWARE**

Company Software will be used in accordance with their license agreements.

Company staff shall not:

- Download or upload unauthorized software over the Internet.
- Give Company software to outsiders, clients, customers, and others.
- Make unauthorized copies of software under any circumstances.
- Install software on any institutional computer.
- Install company-owned software on personal computers.

### **ACQUISITIONS**

Any software, application, or hardware with a software combination must follow the IT Department's evaluation and approval process prior to its acquisition. These include any software or hardware that needs to be connected to the Company network or run on a stand-alone computer.

Shareware or Free-to-try software is copyrighted software that is distributed freely through the Internet and online systems. It is the policy of the Company to pay shareware authors the fee they request for the use of their products. Registration of shareware products should be handled the same way as commercial software products.

## **GUIDELINES**

1. Use software in accordance with their license agreements. Must be aware that ALL computer software is protected by copyright unless it is explicitly labeled as PUBLIC DOMAIN.
2. Must not download or upload unauthorized software over the Internet.
3. Must not give software or accept unlicensed software from any third party.
4. Must not make unauthorized copies of software under any circumstances. Shareware or Free- to-try software is copyrighted software that is distributed freely through the Internet and online systems. It is the policy of PHSU to pay shareware authors the fee they request for the use of their products. Registration of shareware products should be handled the same way as commercial software products.
5. Must not install software on any institutional computer; all software shall be installed by the IT Staff. Generally, institution-owned software cannot be installed on a student's personal computer.
6. Must notify IT Department immediately in case there is a suspected misuse of software within the organization.

## **PENALTIES**

Any person illegally reproducing software can be subject to civil and criminal penalties, including fines and imprisonment.

## **INTERNET AND EMAIL SERVICES POLICY**

### **PURPOSE**

To establish guidelines that should be followed to ensure proper usage of email and Internet access at Ponce Health Sciences University. Any improper use of these services jeopardizes the PHSU legal standing and, therefore, cannot be tolerated.

### **STATEMENTS AND GUIDELINES**

- a. The Institution provides Internet and email access for academic usage. Every student has the responsibility to maintain and enhance the Institution's public image and to use its email and access to the Internet in a responsible and productive manner that reflects well on the Institution.
2. Unacceptable uses of Institution email and Internet access.
  - a. The Institution's email and Internet access may not be used for transmitting, retrieving, or storage of any communications of a discriminatory or harassing nature or materials that are obscene or "X-rated."
  - b. Harassment, threatening, bullying, or making damaging or false statements of any kind is prohibited.
  - c. No messages with derogatory or inflammatory remarks about an individual's race, age, disability, religion, national origin, physical attributes, or sexual preference shall be transmitted.
  - d. Abusive, profane, or offensive language is not to be transmitted. Electronic media cannot be used for any other purpose that is illegal or against institution policy or contrary to the Institution's best interests.
  - e. Solicitation of non-institutional business, or any use of the Institution's email or Internet for religious and political purposes as personal gain, is strictly prohibited.

## **COMMUNICATIONS**

The email provided by the Institution is considered the official means of communication.

Students are expected to read their emails regularly while being active students at PHSU.

This policy includes students enrolled and those on leave of absence. It is the student's responsibility to respond immediately, if necessary. Students will be considered responsible for all information

posted through the email system while on or off-site. Also, emergency notices will be published to the psm.edu email and the student's registered cellphone number. Each student is responsible for the content of all text, audio, or images that he or she places or sends over the PHSU email and Internet system. No email or other electronic communications may be sent that hide the identity of the sender or represents the sender as someone else or someone from another institution. All messages communicated on the PHSU email and Internet system should contain the student's name.

## **WIRELESS ACCESS POLICY**

### **PURPOSE**

Establish guidelines for the use of PHSU Wireless Networks by the students, staff, guests, and other Company members.

### **GUIDELINES**

1. All general policies within the Acceptable Use Policy for Information and Technology Resources apply to wireless network users.
2. Only the Information Technology Department (IT) is authorized to attach wireless switches or routers (commonly known as Access Points or AP's) to the campus cabled network.
3. Under no circumstances should any user connect any router, Access Point, Bridge, or similar devices to network ports anywhere on campus. Failure to comply with this policy is subject to confiscation of the unauthorized device.
4. End users are not permitted to use their devices (e.g., computers, mobile devices, etc.) to provide unauthorized services or as gateways to provide alternative means of access to Network Services.
5. Computer users' devices, including personal laptop computers with wireless network interfaces capable of acting as bridges between wireless and wired networks, should not be attached to open cabled network ports unless the wireless interface is disabled. Both cabled, and wireless networking capability can be simultaneously active even if the end-user is unaware of this. This means that users must actively disable their wireless interfaces (e.g., WiFi cards) before attaching to an Ethernet port.
6. IT will monitor the local wireless network for unauthorized AP's and other unauthorized wireless network devices that pose security risks.
7. IT will be responsible for maintaining a reasonable balance between easy access and proper security for all cabled and wireless network services. In certain cases, some cabled network services may be inaccessible from wireless connections because of security considerations. Individuals wishing to request the addition of a particular service for wireless accessibility or an explanation as to why a particular service is unavailable may contact the IT Helpdesk.

## **SECURITY & PRIVACY**

The Company employs various measures to protect the security of its computing resources and its user's accounts. However, the users should be aware that the Company cannot guarantee security and confidentiality if the users don't engage in "safe computing" practices by establishing appropriate access restrictions for their accounts, guarding their passwords, and changing them regularly.

Users should also be aware that their use of the Company's computing resources are not completely private. While incidental and occasional personal use of such resources is permissible, personal communications and data transmitted or stored on Company technology resources are treated as business communications; those who use Company's information technology resources do not acquire, and should not expect, a right of privacy. However, employees should limit their personal use of the telephone and computer during office hours. Because telephone and email systems are provided

by the Company at its expense for business use, all messages sent by or received on those systems are company documents. The Company reserves the right to access and disclose the messages that you send or receive on the voice mail or email systems. Deleted messages from the computer screen may not actually be deleted from the email system.

While the Company does not routinely monitor individual usage of its computing resources, the normal operation and maintenance of the Company's computing resources require the backup and caching of data and communications, the logging of activity, the monitoring of general usage patterns, and other such activities that are necessary for the provision of service. The Network, Internet, and Email activities will be monitored to ensure and safeguard the best use of technological resources and compliance with policies and regulations.

The Company reserves the right to monitor the accounts' activities of individual users of the Company's computing resources, including individual login sessions and the content of personal communications, without notice. Such monitoring requires previous approval of the executive management. The most common reasons for monitoring are when:

1. It reasonably appears necessary to do so to protect the integrity, security, or functionality of the Company or other computing resources or to protect the Company from liability.
2. There is reasonable cause to believe that the user has violated or is violating this policy.
3. An account appears to be engaged in unusual activity.
4. It is otherwise required by law.

## **DISCLAIMER**

The Company exercises no control whatsoever over the content of the information passing through its network or the Internet. The Company makes no warranties of any kind, whether expressed or implied, for the service it is providing. The Company also disclaims any warranty of merchantability or fitness for a particular purpose. The Company will not be responsible for any resulting damages. This includes loss of data resulting from delays, non-deliveries, or service interruptions caused by its own negligence, power or telephone company failures, acts of God, or your errors or omissions.

The Company network services may only be used for lawful purposes in accordance with the Telecommunications Act, Higher Education Act, and any applicable law. Transmission of any material in violation of any U.S., Puerto Rico, or any other country regulations is prohibited. You agree to indemnify and hold harmless the Company from any claims resulting from your use of the service, which damages you or another party.

Any access to other networks through the Company's network must comply with the rules appropriate for that other network. Whenever you are transferring software (or, for that matter, ideas) from one place to another, you must consider intellectual property and license issues. Use of any information obtained via the Company's network is at your own risk. The Company specifically denies any responsibility for the accuracy or quality of information obtained through its services.

## **ACCOUNTABILITY**

Users who violate this policy, abuse the privilege of the Company-facilitated access of Information Technology Resources, or who make, acquire, or use unauthorized copies of software, will be subject to disciplinary action as appropriate under the circumstance. Such discipline may include the denied access to the Company Information Technology resources and may be subject to other penalties and disciplinary actions, including possible expulsion or dismissal. Alleged violations will be handled through the Company disciplinary procedures applicable to the user. The Company may suspend, block, or restrict access to an account, independent of such procedures when it reasonably appears necessary to do so in order to protect the integrity, confidentiality, and availability of the Company



or other computing resources or to protect the Company from liability. The Company may also refer suspected violations of applicable law to appropriate law enforcement agencies. Any user that is found guilty of illegal distribution of copyrighted material is vulnerable to criminal and civil penalties.

*Rev. 08/02/2022*

# STUDENT LIFE

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## GENERAL POLICY

Ponce Health Sciences University supports students' participation in activities outside their educational programs that contribute to their professional development. These include attendance to conventions or specialty meetings, continuing education activities, professional organizations meetings, community activities, voluntary service activities and others. However, participation in these activities must not unduly affect their academic responsibilities and requires an authorization from the Campus Director and from the corresponding Program/Department Director.

## PROCEDURES

Any student that wishes to participate in an extracurricular activity during a time period that the student has assigned academic activities must request written authorization to the Program Director or Department Chair. The request must include information about the nature of the activity and the benefits for the student that attends this activity. The authorization must be requested at least two weeks ahead of the date that the extracurricular activity will be initiated. It will be the responsibility of the Program Director/Department Chair to evaluate the request and make the recommendation to the Campus Director who will make the final authorization. The student must abide by the Program Director or Department Chair determination and accept the responsibility for the material covered and learning activities missed during the period of absence.

Authorization from the Campus Director for a student to attend extracurricular activities does not obligate a program or department to make special arrangements or to organize additional activities in order to substitute for the missed period by excused students. Authorized absences to participate in extracurricular activities will be counted as "excused absences" for the purpose of the Ponce Health Science University attendance policy.

## STUDENT ORGANIZATIONS—STL CAMPUS

For information regarding student organizations, please refer to the Student Bylaws.