

Health Careers Good Standing Form Procedure

Purpose – Good Standing Form Procedure

In order to protect the safety of the client and the ethics of its health career programs it is HACC's position that students who have previously withdrawn or have been dismissed from a clinical program be evaluated for violation of the code of ethics.

The Good Standing Form is required for a student who was previously admitted to a health career program at HAC from which he/she did not graduate. The form should be given to the student during his/her first health career advising session.

1. When meeting with the student who requests a change of major from another clinical program that he/she did not complete, the Program Director, counselor or advisor has the student complete the Student portion of the form and forwards the form to the Coordinator of Health Careers.
2. The Coordinator of Health Careers will record the information on the *Prohibitive Offense-Good Standing Tracking Sheet* (P: Drive) and send the form to the Program Director for completion.
3. The former Program Director completes the Program Director section of the Good Standing Form and returns it to Coordinator of Health Careers, who notifies the new Program Director and records the response on the tracking sheet.
4.
 - A. If the form is returned and there was no breach of the Code of Ethics, the Coordinator of Health Careers places a note in SPACMNT and records in the secure drive tracking sheet identifying the program(s) and that there was no breach of Code of Ethics.
 - B. If the form is returned and the student was in breach of the Code of Ethics, the Coordinator of Health Careers places a note in SPACMNT and records receipt of the form on the secure drive tracking sheet, notifies the new PD and forwards the form to the Department Chair. The form is scanned and stored on the secure division (P:) drive.
 - C. If the form is not returned by a HACC PD within 5 working days, the Coordinator of Health Careers will follow up to ensure that the form is completed and returned.
 - D. The Coordinator of Health Careers notifies the student in writing (form letter) and copies the Program Director that there was no breach of the Code of Ethics. The form is forwarded to the Department Chair where it is scanned and stored on the secure division (P:) drive.

* If a student challenges a decision, AP 663 must be followed. A Health Careers Ethical Review Committee can be convened and appointed by the Department Chair. This committee will be comprised of one health career Program Director, two faculty members in allied health and/or nursing and one or more noncredit health care representatives.

After the committee convenes, reviews the information and makes a decision, the committee Chair notifies the Department Chair of its decision in writing. The Department Chair will notify the student in writing (form letter), copying both the new and old program directors. Letters are scanned and stored on the secure (P:) drive by the Department Dean's office. The Department Chair places a note in SPACMNT and records results on the tracking sheet.

SPACMNT Notes:

- To be used by PD upon removal from the program:
Student was removed from <name of program> program due to breach of the Health Careers Code of Ethics
- To be used by the Dean following review by the HC Ethical Review Committee
Student not eligible for admission into a health career program at HACC due to Health Careers Code of Ethics violation

Or

After review by the Health Careers Ethical Review Committee, student is eligible for admission into a health career program at HACC.

Student name: _____

HACC ID: _____



Good Standing Form

For Student Seeking Change of Health Career Major or Readmission to a Health Career Program

This Good Standing Form is to be used in the event a student has withdrawn or been dismissed from a clinical program at HACC and is requesting admission into another clinical program.

Directions:

Student completes Student section of form. A separate form must be completed for each program if withdrawn from more than one

1. Advisor/PD forwards completed Form to Coordinator of Health Careers
2. Coordinator of Health Careers forwards form to Program Director of previous program(s)
3. Completed form is returned to Health Careers Coordinator
4. Contact Coordinator of Health Careers at 717-780-1992 with questions

TO BE COMPLETED BY STUDENT

Other/Maiden/Previous Name: _____

Program from which student withdrew: _____

Withdrawal Date: _____

Reason for withdrawal:

Program to which student is applying: _____

Student signature: _____ Date: _____

TO BE COMPLETED BY THE PROGRAM DIRECTOR

Did this student leave your program in breach of the code of ethics? YES NO

Comments:

Program Director signature: _____ Date: _____

Program Director name (print): _____

PD, please complete form and return **WITHIN 5 WORKING DAYS** to the Coordinator of Health Careers.